





#### **2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT**

#### NAME: SAVITA VERMA DATE: 29/03/2024

AGE/SEX: 35 YRS/ FEMALE REF BY: DIRECT

#### **OBSERVATION:**

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST.
- NORMAL LV DIASTOLIC DYSFUNCTION.
- MILD MR. NO MS.
- NO AR. NO AS.
- MILD TR. NO PAH.RVSP: 27 MMHG
- NORMAL SIZED LA, RA & RV WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- INTACT IAS & IVS.
- NO E/O INTRACARDIAC CLOT/VEGETATION/PE.
- NORMAL IVC.
- NORMAL PERICARDIUM.

| LA: 31MM AO: 25MM IVS: 10/12MM LVPW: 09/11MM LVID: 39/23MM | LA: 31MM | AO: 25MM | IVS: 10/12MM | LVPW: 09/11MM | LVID: 39/23MM |  |
|--|----------|----------|--------------|---------------|---------------|--|
|--|----------|----------|--------------|---------------|---------------|--|

CONCLUSION:

- NORMAL LV/RV SIZE AND SYSTOLIC FUNCTION.
- NO RWMA AT REST.
- LVEF = 60% (VISUAL).

DR.NIRAV BHALANI [CARDIOLOGIST]

DR.ARVIND SHARMA [CARDIOLOGIST]



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PATIENT NAME: SAVITA VERMA

AGE/SEX: 35 YRS/F

DATE: Friday, 29 March 2024

#### ULTRASOUND OF ABDOMEN & PELVIS

**LIVER** appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion. No evidence of dilated IHBR or portal vein. CBD appears normal.

GALL BLADDER is distended. No evidence of abnormal wall thickening or any significant calculus within.

PANCREAS appears normal. MPD is WNL.

SPLEEN appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion.

**BOTH KIDNEYS** appear normal in size, shape and position. Show normal cortical echogenicity. Corticomedullary differentiation is maintained. No evidence of calculus or hydronephrosis on either side.

URINARY BLADDER is partially full. No evidence of abnormal wall thickening or any significant calculus within.

**UTERUS** appears normal in size and position. CET is 10.4 mm WNL. No evidence of focal lesion noted. Bilateral ovaries appear normal in size. No evidence of focal or obvious mass lesion noted.

**BOWEL LOOPS** appear normal and show normal peristalsis. No evidence of LYMPHADENOPATHY noted. No evidence of ASCITES noted.

#### **IMPRESSION:**

NO SIGNIFICANT ABNORMALITY AT PRESENT SCAN.

DR SHARAD (UNGTA (MD & DNB) CONSULTANT RADIOLOGIST Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.







#### PATIENT NAME: SAVITA VERMA AGE/SEX: 35 YRS/M

DATE: Friday, 29 March 2024

#### CHEST X-RAY (PA)

Both lung fields appear normal.

Both hila appear normal

Bilateral costo-phrenic angles appear grossly clear

Mediastinum and cardiac shadow appear normal

Bony thorax appears unremarkable

No evidence of free gas under domes of diaphragm

#### **IMPRESSION:**

- NO SIGNFICANT ABNORMALITY NOTED IN LUNG FIELDS
- NORMAL CARDIAC SHADOW

DR SHARAD RUNGTA (MD & DNB) CONSULTANT RADIOLOGIST Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.

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| Patient Name : | Savita S Verma  | Sample No. :    |                  |
|----------------|-----------------|-----------------|------------------|
| Patient ID :   | 20240309246     | Visit No. :     | OPD20240329439   |
| Age / Sex :    | 35y/Female      | Call. Date :    | 29/03/2024 09:59 |
| Consultant :   | DR SAURABH JAIN | S. Coll. Date : | 29/03/2024 13:22 |
| Ward :         | -               | Report Date :   | 29/03/2024 18:12 |

#### CBC, ESR

| ,                |                   |                         |
|------------------|-------------------|-------------------------|
| Investigation    | Result            | Normal Value            |
| Hemoglobin :     | 12.7 gm/dl        | 12.5 to 16.0 gm/dl      |
| P.C.V. :         | 38.9 %            | 37.0 to 47.0 %          |
| <b>M</b> .C.V. : | 86.1 fL           | 78 to 100 fL            |
| M.C.H. :         | 28.1 pg           | 27 to 31 pg             |
| M.C.H.C. :       | 32.6 g/dl         | 32 to 36 g/dl           |
| RDW :            | 12.3 %            | 11.5 to 14.0 %          |
| RBC Count :      | 4.52 X 10^6/ cumm | 4.2 to 5.4 X 10^6/ cumm |
| Polymorphs :     | 70 %              | 38 to 70 %              |
| Lymphocytes :    | 28 %              | 15 to 48 %              |
| Eosinophils :    | 1 %               | 0 to 6 %                |
| Monocytes :      | 1 % [L]           | 3 to 11 %               |
| Total :          | 100               | < 100<br>> 100          |
| MRC Count :      | 8800 /omm         | 4000 to 10000 /cmm      |

| WBC Count :            | 8800 /cmm    | 4000 to 10000 /cmm        |
|------------------------|--------------|---------------------------|
| Platelets Count :      | 238000 / cmm | 1,50,000 to 4,50,000 /cmm |
| ESR - After One Hour : | 20 mm/hr     | 1 to 20 mm/hr             |

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| Patient Name : | Savita S Verma  | Sample No. :    | 20240314827      |
|----------------|-----------------|-----------------|------------------|
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#### **Blood Group**

| Dieea ereap             |           |  |
|-------------------------|-----------|--|
| Investigation           | Result    | Normal Value   |
| BLOOD GROUP :           |           |  |
| ABO                     | В         |  |
| Rh                      | Positive  |  |
| FBS & PPBS              |           |  |
| Investigation           | Result    | Normal Value   |
| Blood Sugar (FBS) :     | 95 mg/dl  | 74 - 100 mg/dl   |
| Urine Sugar ( FUS ) :   | Nil       |  |
| Blood Sugar (PP2BS) :   | 118 mg/dl | 70 to 120 mg/dl  |
| Urine Sugar ( PP2US ) : | Nil       |  |
| HBA1C                   |           |  |
| Investigation           | Result    | Normal Value   |
| Glycosylated Hb :       | 6 % [H]   | Near Normal Glycemia : 6 to 7<br>Excellent Control : 7 to 8<br>Good Control : 8 to 9<br>Fair Control : 9 to 10 |
|                         |           | Poor Control : > 10  |

Average Plasma Glucose of Last 3 125.5 Months :

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#### LFT (Liver Function Test)

| Investigation                | Result    | Normal Value     |            |
|------------------------------|-----------|------------------|------------|
| Total Bilirubin :            | 0.5 mg/dl | 0.2 to 1.0 mg/dl |            |
| Direct Bilirubin :           | 0.4 mg/dl | 0.0 to 0.2 mg/dl |            |
| Indirect Bilirubin :         | 0.1 mg/dl | 0.0 to 0.8 mg/dl | <i>ه</i> . |
|                              |           |                  |            |
| AST (SGOT) :                 | 13 U/L    | 5 to 34 U/L      |            |
| ALT (SGPT) :                 | 10 U/L    | 0 to 55 U/L      |            |
| Total Protein (TP):          | 7 g/dL    | 6.4 to 8.3, g/dl |            |
| Albumin (ALB) :              | 4 g/dl    | 3.5 to 5.2 g/dl  |            |
| Globulin :                   | 3 g/dl    | 2.3 to 3.5 g/dl  |            |
| A/G Ratio :                  | 1.33      |                  |            |
| Alkaline Phosphatase (ALP) : | 96 U/L    | 40 to 150 U/L    |            |
| GAMMA GT. :                  | 10 U/L    | 7 to 35 U/L      |            |
|                              |           |                  |            |

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#### **Lipid Profile**

| Investigation            | Result       | Normal Value  |
|--------------------------|--------------|---|
| Sample :                 | Fasting      |   |
| Sample Type :            | Normal       |   |
| Cholesterol (Chol) :     | 120 mg/dl    | Low risk : < 200<br>Moderate risk : 200 - 239<br>High risk : > or = 240                                 |
| Triglyceride :           | 60 mg/dl     | Normal : < 200.0<br>High : 200 - 499<br>Very High : > or = 500  |
| HDL Cholesterol :        | 47 mg/dl     | Low risk: >or = 60 mg/dL<br>High risk : Up to 35 mg/dL  |
| LDL :                    | 61 mg/dl [L] | 131.0 to 159.0(N)<br>< 130.0(L)<br>> 159.0(H)   |
| VLDL :                   | 12 mg/dl     | Up to 0 to 34 mg/dl   |
| LDL/HDL Ratio :          | 1.3          | Low risk : 0.5 to 3.0<br>Moderate risk : 3.0 to 6.0<br>Elevted level high > 6.0                         |
| $\bigcirc$               |              |   |
| Total Chol / HDL Ratio : | 2.55         | Low Risk : 3.3 to 4.4<br>Average Risk : 4.4 to 7.1<br>Moderate Risk : 7.1 to 11.0<br>High Risk : > 11.0 |
| Total Lipids :           | 527 mg/dl    | 400 to 700 mg/dl  |
|                          |              |   |

Note :- Lipemic samples give high triglyceride value and falsely low LDL value.

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#### **RENAL FUNCTION TEST**

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| Investigation | Result    | Normal Value    |  |
|---------------|-----------|-----------------|--|
| Creatinine :  | 0.7 mg/dl | 0.6 - 1.4 mg/dl |  |
| Urea :        | 23 mg/ dl | 13 - 45 mg/dl   |  |
| Uric Acid :   | 4 mg/dl   | 3.5 - 7.2 mg/dl |  |
| Calcium :     | 8.9 mg/dl | 8.5 - 10.5      |  |

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- 7. A requested test might not be performed in case of following reasons: a) Insufficient quantity of specimen (inadequate collection/spillage in transit) b) Specimen quality unacceptable (hemolysed/clotted/lipemic etc) c) Incorrect specimen type d) Incorrect identity of specimen. In above mentioned circumstances it is expected that a fresh specimen will be sent for the purpose of the reporting on the same parameter.
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#### GENERAL PRINCIPLES OF LABORATORY TESTING & LABORATORY REFERENCE RANGES

- 1. Under the best of circumstances, no test is having 100% sensitivity & 100% specificity. In the majority of laboratory parameters, the combination of short-term physiologic variation & analytical error/technological limitations are sufficient to render the interpretation of single determinations difficult especially when the concentrations are in borderline range. Any particular laboratory test result may be misleading (not correlating with clinical findings) for large varieties of reasons, regardless of high quality of laboratory, such results should be rechecked. If indicated new specimen should be submitted.
- 2. Reference ranges (biological reference interval) vary from one laboratory to another and with age, sex, race, size, physiologic status (e.g. pregnancy & lactation) that apply to the particular patient. Reference values represent the statistical data for 95% of the population; values outside these ranges do not necessarily represent disease. Result may still be within the reference range but be elevated above the patient's baseline, which is why serial testing is important in a number of conditions.
- 3. The effects of drugs on laboratory test values must never be overlooked. Laboratory values in elderly must be interpreted in light of many factors that affects "normal" values in this group.
- 4. Negative laboratory test results do not necessary rule out a clinical diagnosis.

### TEAM OF DOCTORS

Dr. Girish Gupta, MD (Path) Dr. Ankit Jhaveri MD (Path)

Dr. Rachna Parekh DCP

Dr Priya Mangukiya MD (Microbiology)

- Dr. Varsha Raimalani, PhD
- Dr. Nehal Tiwari MD (Path)
- Dr. Usha Amliyar DCP

- Dr. Rakesh Shah MD (Path), DCP
- Dr. Vishal Jhaveri, DCP
- Dr. Hetal Parikh MD (Path) FRCPath (UK)
- Dr. Mitesh Rathwa MD (Path)
- Dr. Shreyas Nisarta MD (Path)
- Dr. Vaishali Bhatt, DCP
- Dr. Manjari Bhabhor DCP

### **OUR UNITS**

a) Aayu Path Lab (Tarsali) - 9376224836, 7043940202

b) Purak Hi-Tech Lab (Nizampura) - 7229046350, 9377559900

- c) Dr. Jhaveri Laboratory (Akota) 0265-2329428, 9998724579
- d) Dr. Jhaveri Laboratory (Polo Ground) 0265-2424335, 9725282172
- e) Jhaveri Advanced Path Lab (Subhanpura)
- f) Jhaveri Advanced Path Lab (Waghodiya road)





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Home Visit / OPD Reception : 9998724579

|          |                     | TEST REPORT                          |              |                     |
|----------|---------------------|--------------------------------------|--------------|---------------------|
| Reg. No. | : 40301017401       | <b>Reg. Date</b> : 29-Mar-2024 12:19 | Collected On | : 29-Mar-2024 12:19 |
| Name     | : Ms. SAVITA SHARMA |                                      | Approved On  | : 29-Mar-2024 14:35 |
| Age      | : 35 Years          | Gender : Female Ref. No. :           | Dispatch At  | :                   |
| Ref. By  | :                   |                                      | Tele No.     | :                   |
| Location | : SAVITA SUPER      | SPECIALTY HOSPITAL @ WAGHODIYA ROAD  |              |                     |
|          |                     |                                      |              |                     |

| Test Name              | Results       | Units    | Bio. Ref. Interval |
|------------------------|---------------|----------|--------------------|
| a.a                    | THYROID FUNCT | ION TEST |                    |
| T3 (triiodothyronine)  | 1.33          | ng/mL    | 0.6 - 1.81         |
| Method:CLIA            |               |          |                    |
| T4 (Thyroxine)         | 11.90         | µg/dL    | 4.5 - 12.6         |
| Method:CLIA            |               |          |                    |
| TSH ( ultra sensitíve) | 1.446         | µIU/mL   | 0.55 - 4.78        |
| Method:CLIA            |               |          |                    |

Sample Type:Serum

#### Comments:

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

Test done from collected sample.

Dr. Vishal Jhaveri M.B.B.S, D.C.F

Printed On: 29-Mar-2024 14:36

We are open 24 x 7 & 365 days

Reg. G-13041 LLP Identification Number: AAN-8932 Page 1 of 1

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#### Urine R/M

| OTHER WIN          |             |              |
|--------------------|-------------|--------------|
| Investigation      | Result      | Normal Value |
| Quantity - :       | 10 ml       |              |
| Colour - :         | Pale Yellow |              |
| Reaction (pH) :    | 6.5         | 4.6-8.0      |
| Turbidity :        | Clear       |              |
| Deposit :          | Absent      | Absent       |
| Sp.Gravity :       | 1.025       | 1.005-1.010  |
| Protein :          | Absent      | Absent       |
| Glucose :          | Absent      | Absent       |
| Bile Salts :       | Absent      | Absent       |
| Bile pigments :    | Absent      | Absent       |
| Ketones :          | Absent      | Absent       |
| Urobilinogen :     | Absent      |              |
| Blood :            | Absent      | Absent       |
| Pus Cells :        | 5-8 /hpf    | 0-5/hpf      |
| Red Blood Cells :  | 2-4 /hpf    | Absent       |
| Epithelial Cells : | 7-9 /hpf    |              |
|                    |             |              |

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## Examination by Physician

| Name: <u>SAVITA VERMA</u>                          |   | Reg. No: <u>20230309246</u> |    |
|--|---|-----------------------------|----|
| Age/ Sex: <u>35/FEMALE</u>                         |   | DOE: 29/03/2024             |    |
| Physical Examination                               |   |                             |    |
| Height: $157$ (9)<br>Temperature: N                | weight: <u>61/<y< u=""><br/>Pulse:70</y<></u> | _BMI: 24.74<br>BP: 100/66   |    |
| ChiefComplaints:                                   | burning micture                               | it.                         | _  |
|  |   |                             | _  |
| PastHistory:                                       | NAD   |                             | ÷  |
| Examination:<br>General Examination:               | NAD   |                             | -  |
| Systemic Examination:                              | MAD.  | -                           | _  |
| Investigation:                                     |   |                             | -  |
| <br>RBS  |   |                             |    |
| ECG  |   |                             | (  |
| Others   |   |                             |    |
|  | Untop (100)                                   | 1-Oregoniality              | 10 |
| Physical Examination         Height:       157 Con |   |                             |    |



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# Examination by Ophthalmologist

| Name: <u>SAVITA VERMA</u>            | Pog. New Dopper             |
|--------------------------------------|-----------------------------|
| Age/ Sex: <u>35/FEMALE</u>           | Reg. No: <u>20230309246</u> |
| Nj                                   | DOE: <u>29/03/2024</u>      |
|                                      | 2                           |
| Medical History:                     |                             |
| N 1                                  |                             |
|                                      |                             |
| Examination of Eye: Right LEFT       |                             |
| External Examination:                |                             |
| Anti seg Examination:                |                             |
| Schiot Tonometry IOP:                |                             |
| Fundus:                              |                             |
| Without Glass Distant Vision:        |                             |
| Near Vision:                         |                             |
| With Glass Distant Vision: 666       | 516                         |
| Near Vision: NB NB                   |                             |
| Colour V.sion (With Ishihara Chart): |                             |
| Impression:                          |                             |
| Advice:                              | SERSPECIALITATION           |
|                                      | Signature                   |
|                                      | ADODARA*                    |

Mail - Customer Care : Mediwheel : New Delhi - Outlook

28/03/2024, 19:11

# Health Check up Booking Confirmed Request(bobS17763),Package Code-PKG10000475, Beneficiary Code-252238

# Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Tue 26-03-2024 14:30 To:kalyan.singh@bankofbaroda.com <kalyan.singh@bankofbaroda.com> Cc:Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

011-41195959

L Delow 10

Mediwheel

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

| <b>Booking Status</b>              | : Booking Confirmed  |
|------------------------------------|--|
| Preferred Time                     | : 8:30am   |
| <b>Confirmation Status</b>         | Booking Confirmed  |
| Appointment Date                   | : 29-03-2024   |
| Pincode                            | : 390019   |
| State                              | : Gujarat  |
| City                               | : Vadodara   |
| Address of<br>Diagnostic/Hospital- | Parivar Char Rasta, Dabhoi - Waghodia Ring Rd, Sarthi Nagar 2,<br>Kendranagar, Vadodara - 390019 |
| Name of<br>Diagnostic/Hospital     | : Savita Superspeciality Hospital  |
| Patient Package<br>Name            | : Mediwheel Full Body Health Checkup Female Below 40   |
| Hospital Package<br>Name           | : Mediwheel Full Body Health Checkup Female Below 40   |

| Me                 | mber Information |        |  |
|--------------------|------------------|--------|--|
| Booked Member Name | Age              | Gender |  |
| Savita Verma       | 35 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.

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