

CONCLUSION OF HEALTH CHECKUP

| | | |
|--------------------|----------------------|------------------------------|
| ECU Number : 10970 | MR Number : 23200755 | Patient Name: NITABEN SUTHAR |
| Age : 48 | Sex : Female | Height : 150 |
| Weight : 51.5 | Ideal Weight : 52 | BMI : 22.89 |
| Date : 13/04/2024 | | |

FM

Dr. Manish Mittal

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.



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ESTD. 1964



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Date : 13/04/2024

Past H/O : NO P/H/O ANY MAJOR ILLNESS.

Present H/O : BACKACHE
BOTH KNEE JOINT ON EXERTION
BOTH SHOULDER PAIN ON MORNING

Family H/O : NO F/H/O ANY MAJOR ILLNESS.

Habits : NO

Gen.Exam. : G.C.GOOD

B.P : 126/70

Pulse : 72/MIN REG

Others : SPO2 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :





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ECU Number : 10970
Age : 48
Weight : 51.5
Date : 13/04/2024

MR Number : 23200755
Sex : Female
Ideal Weight : 52

Patient Name: NITABEN SUTHAR
Height : 150
BMI : 22.89

Ophthalmic Check Up :

Right

Left

| | | |
|------------------------|-----------------------|-----|
| Ext Exam | | NIL |
| Vision Without Glasses | - | - |
| Vision With Glasses | 6/6 | 6/6 |
| Final Correction | N.5 WITH + 1.75 D SPH | - |
| Refraction | NORMAL | |
| Colour Vision | NORMAL | |
| Advice | NIL | |

Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



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Gynaec Check Up :

OBSTETRIC HISTORY 3 FTND
MENSTRUAL HISTORY -
PRESENT MENSTRUAL CYCLE POSTMENOPAUSAL - SPOTY 6 MONTH
PAST MENSTRUAL CYCLE REGULAR
CHIEF COMPLAINTS NIL
() SOFT
PS Cx - (N) Vg - (N) LAX PERINEUM
PV UT NS Fx CLEAR
BREAST EXAMINATION RIGHT NORMAL
BREAST EXAMINATION LEFT NORMAL
PAPSMEAR TAKEN
BMD
MAMMOGRAPHY
ADVICE PELVIC FLOOR EXERCISES



Patient Name : **Ms. NITABEN SUTHAR**
 Gender / Age : Female / 48 Years 8 Months 26 Days
 MR No / Bill No. : **23200755 / 251003481**
 Consultant : Dr. Manish Mittal
 Location : **OPD**

Type : OPD
 Request No. : **218749**
 Request Date : 13/04/2024 08:26 AM
 Collection Date : 13/04/2024 08:31 AM
 Approval Date : 13/04/2024 11:52 AM

CBC + ESR

| Test | Result | Units | Biological Ref. Range |
|--------------------------------------|--|----------|---|
| Haemoglobin. | | | |
| Haemoglobin | 11.2 | gm/dL | 12 - 15 |
| Red Blood Cell Count (T-RBC) | 4.22 | mill/cmm | 3.8 - 4.8 |
| Hematocrit (HCT) | 36.8 | % | 36 - 46 |
| Mean Corpuscular Volume (MCV) | 87.2 | fl | 83 - 101 |
| Mean Corpuscular Haemoglobin (MCH) | 26.5 | pg | 27 - 32 |
| MCH Concentration (MCHC) | 30.4 | % | 31.5 - 34.5 |
| Red Cell Distribution Width (RDW-CV) | 14.6 | % | 11.6 - 14 |
| Red Cell Distribution Width (RDW-SD) | 46.3 | fl | 39 - 46 |
| Total Leucocyte Count (TLC) | | | |
| Total Leucocyte Count (TLC) | 9.43 | thou/cmm | 4 - 10 |
| Differential Leucocyte Count | | | |
| Polymorphs | 61 | % | 40 - 80 |
| Lymphocytes | 27 | % | 20 - 40 |
| Eosinophils | 06 | % | 1 - 6 |
| Monocytes | 06 | % | 2 - 10 |
| Basophils | 00 | % | 0 - 2 |
| Polymorphs (Abs. Value) | 5.81 | thou/cmm | 2 - 7 |
| Lymphocytes (Abs. Value) | 2.59 | thou/cmm | 1 - 3 |
| Eosinophils (Abs. Value) | 0.55 | thou/cmm | 0.2 - 0.5 |
| Monocytes (Abs. Value) | 0.42 | thou/cmm | 0.2 - 1 |
| Basophils (Abs. Value) | 0.06 | thou/cmm | 0.02 - 0.1 |
| Immature Granulocytes | 0.3 | % | 1 - 3 : Borderline > 3 : Significant |
| Platelet Count | | | |
| Platelet Count | 257 | thou/cmm | 150 - 410 |
| Remarks | This is counter generated CBC Report, smear review is not done | | |
| ESR | 26 | mm/1 hr | 0 - 12 |

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.



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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
 Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter by Fluorescent flow cytometry using a semi-conductor laser and hydrodynamic focusing in dedicated channels. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification.

ESR on ESL-30, comparable to Westergrens method and in accordance to ICSH reference method.

— End of Report —



Dr. Ameer Soni
MD (Path)



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 MR No / Bill No. : 23200755 / 251003481
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Fasting Plasma Glucose

| Test | Result | Units | Biological Ref. Range |
|------------------------------------|--------|-------|-----------------------|
| Fasting Plasma Glucose | | | |
| Fasting Plasma Glucose | 96 | mg/dL | 70 - 110 |
| Post Prandial 2 Hr. Plasma Glucose | 108 | mg/dL | 70 - 140 |

By Hexokinase method on EXL Dade Dimension

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.



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 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 218749
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 Approval Date : 13/04/2024 12:33 PM

Complete Lipid Profile

| Test | Result | Units | Biological Ref. Range |
|--|-------------|-------|-----------------------|
| Complete Lipid Profile | | | |
| Appearance | Clear | | |
| Triglycerides <i>(Done by Lipase /Glycerol kinase on Vitros 5600)</i> | 72 | mg/dL | 1 - 150 |
| <i>< 150 Normal 150-199 Borderline High 200-499 High > 499 Very High</i> | | | |
| Total Cholesterol <i>(Done by Colorimetric - Cholesterol Oxidase, esterase, peroxidase on Vitros 5600.)</i> | 185 | mg/dL | 1 - 200 |
| <i><200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High</i> | | | |
| HDL Cholesterol <i>(Done by Colorimetric: non HDL precipitation method PTA/MgCl2 on Vitros 5600)</i> | 53 | mg/dL | 40 - 60 |
| <i>< 40 Low > 60 High</i> | | | |
| Non HDL Cholesterol (calculated) | 132 | mg/dL | 1 - 130 |
| <i>(Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)</i> | | | |
| LDL Cholesterol <i>(Done by Enzymatic (Two Step CHE/CHO/POD) on Vitros 5600)</i> | 122 | mg/dL | 1 - 100 |
| <i>< 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High</i> | | | |
| VLDL Cholesterol (calculated) | 14.4 | mg/dL | 12 - 30 |
| LDL Ch. / HDL Ch. Ratio | 2.3 | | 2.1 - 3.5 |
| T. Ch./HDL Ch. Ratio <i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i> | 3.49 | | 3.5 - 5 |

— End of Report —

Dr. Rakesh Vaidya
MD (Path). DCP.



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Liver Function Test (LFT)

| Test | Result | Units | Biological Ref. Range |
|---|-------------|-------|-----------------------|
| Bilirubin | | | |
| Bilirubin - Total | 0.61 | mg/dL | 0 - 1 |
| Bilirubin - Direct | 0.25 | mg/dL | 0 - 0.3 |
| Bilirubin - Indirect | 0.36 | mg/dL | 0 - 0.7 |
| <i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i> | | | |
| Aspartate Aminotransferase (SGOT/AST) | 40 | U/L | 13 - 35 |
| <i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i> | | | |
| Alanine Aminotransferase (SGPT/ALT) | 33 | U/L | 14 - 59 |
| <i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i> | | | |
| Alkaline Phosphatase | 86 | U/L | 42 - 98 |
| <i>(Done by Multipoint-Rate - p-nitrophenyl Phosphate, AMP buffer on Vitros 5600)</i> | | | |
| Gamma Glutamyl Transferase (GGT) | 24 | U/L | 5 - 55 |
| <i>(Done by Multipoint Rate - L-γ-glutamyl-p-nitroanilide on Vitros 5600)</i> | | | |
| Total Protein | | | |
| Total Proteins | 7.74 | gm/dL | 6.4 - 8.2 |
| Albumin | 4.03 | gm/dL | 3.4 - 5 |
| Globulin | 3.71 | gm/dL | 3 - 3.2 |
| A : G Ratio | 1.09 | | 1.1 - 1.6 |
| <i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i> | | | |

— End of Report —

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MD (Path). DCP.



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 Consultant : Dr. Manish Mittal
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Renal Function Test (RFT)

| Test | Result | Units | Biological Ref. Range |
|--|--------------|-------|-----------------------|
| Urea <i>(Done by Endpoint/Colorimetric - Urease on Vitros 5600)</i> | 24 | mg/dL | 10 - 45 |
| BUN | 11.21 | mg/dL | 5 - 21 |
| Creatinine <i>(By Modified Kinetic Jaffe Technique)</i> | 0.64 | mg/dL | 0.6 - 1.1 |
| Estimate Glomerular Filtration rate <i>(Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)</i> | More than 60 | | |
| Uric acid <i>(Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)</i> | 4.6 | mg/dL | 2.2 - 5.8 |

— End of Report —

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 Request Date : 13/04/2024 08:26 AM
 Collection Date : 13/04/2024 08:31 AM
 Approval Date : 13/04/2024 02:00 PM

HbA1c (Glycosylated Hb)

| Test | Result | Units | Biological Ref. Range |
|------------------------------------|--------|-------|-----------------------|
| HbA1c (Glycosylated Hb) | | | |
| Glycosylated Hemoglobin (HbA1c) | 5.3 | % | |
| estimated Average Glucose (e AG) * | 105.41 | mg/dL | |

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

| HbA1c% | e AG (mg/dl) | Glycemic control |
|--------|--------------|--|
| > 8 | > 183 | Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances |
| 7 - 8 | 154 - 183 | Good |
| < 7 | < 154 | Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area. |
| 6 - 7 | 126 - 154 | Near Normal |
| < 6 | < 126 | Nondiabetic level) |

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.



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 Approval Date : 13/04/2024 12:34 PM

Thyroid Hormone Study

| Test | Result | Units | Biological Ref. Range |
|---|--------|------------|-----------------------|
| Triiodothyronine (T3) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (ng/ml) 1 - 3 days : 0.1 - 7.4 1-11 months : 0.1 - 2.45 1-5 years : 0.1 - 2.7 6-10 years : 0.9 - 2.4 11-15 years : 0.8 - 2.1 16-20 years : 0.8 - 2.1 Adults (20 - 99 years) : 1.07 - 1.85 Pregnancy (in last 5 months) : 1.2 - 2.5 (Reference : Tietz - Clinical guide to laboratory test, 4th edition)) | 1.61 | ng/ml | |
| Thyroxine (T4) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (mcg/dL) 1 - 3 days : 11.8 - 22.6 1-2 weeks : 9.8 - 16.6 1 - 4 months : 7.2 - 14.4 4 - 12 months : 7.8 - 16.5 1-5 years : 7.3 - 15.0 5 - 10 years : 6.4 - 13.3 10 - 20 years : 5.6 - 11.7 Adults (20-99 years) : 5.91 - 12.98 (Reference : Tietz - Clinical guide to laboratory test, 4th edition)) | 9.50 | mcg/dL | |
| Thyroid Stimulating Hormone (US-TSH) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (microIU/ml) Infants (1-4 days) : 1.0 - 39 2-20 weeks : 1.7 - 9.1 5 months - 20 years : 0.7 - 6.4 Adults (20-99 years) : 0.4001 - 4.049 Pregnancy : 1st trimester : 0.3 - 4.5 2nd trimester : 0.5 - 4.6 3rd trimester : 0.8 - 5.2 (Reference : Tietz - Clinical guide to laboratory test, 4th edition)) | 2.71 | microIU/ml | |

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

— End of Report —

Dr. Rakesh Vaidya
 MD (Path). DCP.



Patient Name : Ms. NITABEN SUTHAR
 Gender / Age : Female / 48 Years 8 Months 26 Days
 MR No / Bill No. : 23200755 / 251003481
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 218749
 Request Date : 13/04/2024 08:26 AM
 Collection Date : 13/04/2024 08:31 AM
 Approval Date : 13/04/2024 11:30 AM

Urine routine analysis (Auto)

| Test | Result | Units | Biological Ref. Range |
|---|----------|-------|-----------------------|
| Physical Examination | | | |
| Quantity | 30 | mL | |
| Colour | Yellow | | |
| Appearance | Clear | | |
| Chemical Examination (By Reagent strip method) | | | |
| pH | 5.5 | | 4.6 - 8.0 |
| Specific Gravity | 1.019 | | 1.005 - 1.030 |
| Protein | Negative | | Negative |
| Glucose | Negative | | Negative |
| Ketones | Negative | | Negative |
| Bilirubin | Negative | | Negative |
| Urobilinogen | Negative | | Negative (upto 1) |
| Blood | 1+ | | Negative |
| Leucocytes | Negative | | Negative |
| Nitrite | Negative | | Negative |
| Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000) | | | |
| Red Blood Cells | 1 - 5 | /hpf | 0 - 2 |
| Leucocytes | 0 - 1 | /hpf | 0 - 5 |
| Epithelial Cells | 0 - 1 | /hpf | 0 - 5 |
| Casts | Nil | /lpf | Nil |
| Crystals | Nil | /hpf | Nil |
| Mucus | Absent | /hpf | Absent |
| Organism | Absent | | |

Reference : Wallach`s Interpretation to laboratory test, 10th edition

— End of Report —

Dr. Ameet Soni
MD (Path)



DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23200755 Report Date : 13/04/2024
Request No. : 190113120 13/04/2024 8.26 AM
Patient Name : **Ms. NITABEN SUTHAR**
Gender / Age : Female / 48 Years 8 Months 26 Days

Mammography (Both Breast)

Both side mammogram has been obtained in mediolateral oblique (MLO) as well as craniocaudal (CC) projections.

Both breasts show heterogeneously dense fibroglandular parenchyma (Type c).
No obvious focal mass seen on either side.
No obvious micro/cluster calcification seen. Bilateral benign specks of calcifications are seen.
No obvious skin thickening or nipple retraction seen.
Bilateral benign axillary lymph nodes seen.

IMPRESSION:

No obvious focal mass in breasts.
BI-RADS category 2.
Kindly correlate clinically /Follow up

BIRADS: 0- needs additional imaging, 1- negative, 2- benign, 3- probably benign (require short term follow up), 4- suspicious (require further evaluation with biopsy), 5- highly suspicious for malignancy, 6- biopsy proven malignancy.

INFORMATION REGARDING MAMMOGRAMS:

- A REPORT THAT IS NEGATIVE FOR MALIGNANCY SHOULD NOT DELAY BIOPSY IF THERE IS A DOMINANT OR CLINICALLY SUSPICIOUS MASS.
- IN DENSE BREASTS, AN UNDERLYING MASS LESION MAY BE OBSCURED.
- FALSE POSITIVE DIAGNOSIS OF CANCER MAY OCCURE IN SMALL PERCENTAGE OF CASES.

Dr. Sharad Rungta, M.D DNB

Consultant Radiologist



• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED



**BHAILAL AMIN
GENERAL HOSPITAL**

ESTD. 1964



ADVANCED DIGITAL SOLUTIONS

Computerized Radiography

Ultra Sensitive Colour Doppler

Ultra High Resolution Sonography

Multi-Detector CT Scan

Magnetic Resonance Imaging (MRI)

Mammography

Interventional Radiology

Digital Subtraction Angiography (DSA)

Foetal Echocardiography

Echocardiography

4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23200755 Report Date : 13/04/2024

Request No. : 190113061 13/04/2024 8.26 AM

Patient Name : Ms. NITABEN SUTHAR

Gender / Age : Female / 48 Years 8 Months 26 Days

X-Ray Chest AP

Both lung fields are clear.
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Dr. Priyanka Patel, MD.

Consultant Radiologist



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23200755 Report Date : 13/04/2024

Request No. : 190113084 13/04/2024 8.26 AM

Patient Name : **Ms. NITABEN SUTHAR**

Gender / Age : Female / 48 Years 8 Months 26 Days

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and echopattern. No mass lesion identified. The hepaticveins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured.
Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

No ascites.

COMMENT:

• No obvious abnormality seen.

Kindly correlate clinically

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Dr.Priyanka Patel, MD.

Consultant Radiologist



Patient No. : 23200755 Report Date : 13/04/2024
Request No. : 190113068 13/04/2024 8.26 AM
Patient Name : **Ms. NITABEN SUTHAR**
Gender / Age : Female / 48 Years 8 Months 26 Days

Echo Doppler Screening

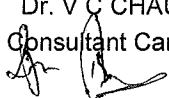
MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=60%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL

COLOUR/DOPPLER FLOW MAPPING : TRIVIAL MR, TR, NO PAH

FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. NO E/O LV DIASTOLIC DYSFUNCTION
6. TRIVIAL MR, TR, NO PULMONARY HYPERTENSION , (IVC COLLAPSING)
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

Dr. V C CHAUHAN
Consultant Cardiologist



Name: Ms. Nita Suthar
Patient ID: ECU/23200755

13:04:2024 10:22:08
Standard 12-Lead

BHAIJAL AMIN GENERAL HOSPITAL

Age: 048Y
Gender: Female

Ref. phys

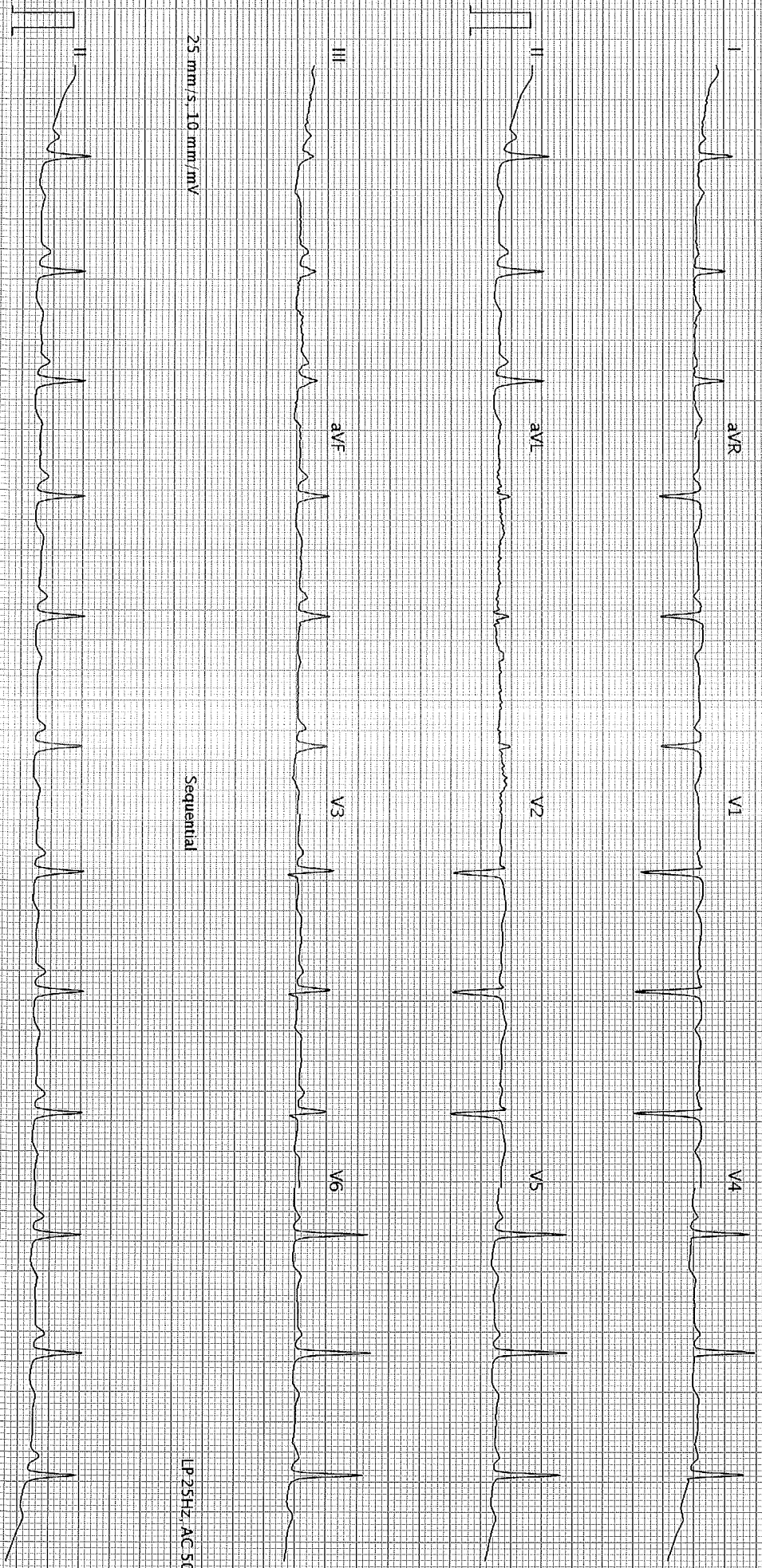
Pacemaker: Unknown

HR: 75 bpm
RR: 798 ms
P: 106 ms
PR: 144 ms
P axis: 70°
QRS axis: 45°
T axis: -44°
QR: 77 ms
QT: 370 ms
QTcB: 414 ms

Unconfirmed report

Remark:

Normal



25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

LP 25Hz, AC 50Hz

AT-102 G2 I.2.0 (I080:011030)

BHAIJAL AMIN GENERAL HOSPITAL - Printed on 13-04-2024 11:22:1

SCHILLER

Part No.2.157048M € 0123

S.BD