Dr. Vimmi Goel Hoad - Non Invasive Cardiology Incharge - Proventive Health Care MBBS, MD (Internal Medicine) Beg. No: MMC - 2014/01/0113	Preventive Health Check up KIMS Kingsway Hospitals Nagpur Phone No.: 7499913052	KIMS-K HOSI	Mo- Nagour INGSWAY PITALS
Name: MTS.	shuch graisare	Date	23/11/24
Age: 34 4 Sex; M	() Weight: <u>54</u> 8 kg Height:	1.55-9 inc BMI: 24	1.5
BP: 98/69		bpm RBS :	mg/dl
	SP02' 100'/.	LMP - 1	20/10/24

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KIMS - Kingsway Hospitals (A Unit of SPANV Medisearch Lifesciences Pvt. Ltd.) 44. Kingsway, Near Kaslurchand Park, Nagour, Maharashtra, India - 440001 Ph No.:1800 256 8346(Mobile No.:+91-7125789100

Email :assistance@kimshospitals.com[Website :www.kimshospitals.com

#### DEPARTMENT OF OPHTHALMOLOGY OUT PATIENT ASSESSMENT RECORD

SHRUTI BHAISA 34Y(5) 8M(S) 24 KH114357 9763004288 MARRIED				CONSULT TYPE : WAL	2425093320 KAMBLE
_°F –/min Weight:BMI: _kgs —			02: Pain 6RA — 11	Score : Helght : C ons	CHIEF COMPLAINTS ROUTINE EYE CHECK UP
NOTES GLASS PRESO DISTANCE VIS		•			
EYE	SPH	CWL	AXIS	VISION	
RIGHT EYE	82	00	CO	54	
LEFT EVE	C0	00	ØD	50	Chamble
NEAR ADDITIO	<b>3</b> N		đĐ	68	Dr. Ashish Prakashchandra Kamble MBBS,MS, FVRS,FICO Consultant
					Printed On :23-11-2024 13:42:37

LEFT EYE 00

115

REMARK-

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Dr. Rahul Atara BDS. MDS (Endodentics) Reg. No: A-16347

# KIMS-KINGSWAY

Name: My - Shuti Bhaisare	Date: 23/11/24.
Age : Sex : M/F Weight : kg Height : inc BMI	r
BP :bpm RBS	:mg/d
Allergy:	
Rentine devital checkup.	
ofe - Partially inspacted 2 38	
Stains +	
Calculus +	
Adrice: - OPG	
complete oral prophylaxis.	
Di hugha N.	
5	

For Appointment Call : 93567 21135

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for

MON: Shand Dhough

Dr. Mugdha Jungari (Gili) Sr. Consultant Obstetrics & Gynaecology High Risk Pregnancy Expert & Laparoscopic Surgeon Pag-No: 2020126315

MOTHER & CHILD CENTRE DLES SMIX

: щбірн







## CLINICAL DIAGNOSTIC LABORATORY

## DEPARTMENT OF PATHOLOGY

HAEMOGRAM			
	10/17/1	Report Date	:23-Nov-24 12:25 pm
Received Dt	: 23 Nov-24 10:10 am	weierred by	Dr. Vimmi Goel MBBS,MD
Bill No/ UMR No	1 BIL 2425066344/KH114357		
	A STATE OF A	Age /Gender	: 34 Y(s)/Female
Patient Name	1 Mrs. Shruti Bhaisare		

ì	Parameter	Specimen Box	Results	<b>Biological Reference</b>	Method
	Hanmatixmit(PCV)		39.0	12.0 - 15.0 gm/%	Photometric
	RBC Count		4.50	36.0 46.0 %	Calculated
	Mean Cell Volume (MCV)		4.50	3.8 - 4.8 Millions/cumm	Photometric
	Mean Cell Naemoglobin (MCH)		29.4	83 - 101 m	Calculated
	Mean Cell Haemoglobin Concentration (MCHC)		33.4	27 - 32 pg	Calculated
	ROW ROW		2002	31.5 35.0 g/l	Calculated
	Platelet count		13.1	11.5 - 14.0 %	Calculated
	WBC Count		296	150 - 450 10^3/cumm	Impedance
	DIFFERENTIAL COUNT		9800	4000 - 11000 cells/cumm	Impedance
	Neutrophis		69.4		P stratec
	Lymphocytes		18.7	50 - 70 % 20 - 40 %	Flow Cytometry/Light microscopy
	townshis.		5.8	1-6 46	Flow Cytometry/Light microscopy
	Monocytes		6.1	2 - 10 %	Flow Cytometry/Light microscopy
	Basconis		0.0	0 - 1 %	Flow Cytometry/Light microscopy
	Absolute Neutrophil Count Absolute Lymphocyte Count		6801.2	2000 - 7000 /cumm	Flow Cytometry/Light microscopy
	Absolute Eosinophil Count		1832.6	1000 - 4800 /cumm	Calculated
	Absolute Monocyte Count		568.4	20 - 500 /cumm	Calculated
	Absolute Basophil Count		597.8	200 - 1000 /cumm	Calculated
			0	0 - 100 /cumm	Calculated
				and benefit	Calculated



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## KIMS-KINGSWAY HOSPITALS

CLINICAL DIAGNOSTIC LABORATORY

DEPARTMENT OF PATHOLOGY

Patient Name : Mrs. Shruti Bhaisare Bill No/ UMR No : BIL2425066344/KH11 Deceived Dt : 23-Nov-24 10:10 an	4357	Age /Gender Referred By Report Date	:Dr. Vimmi (	Soel MBBS,MD
Parameter Specimen PERIPHERAL SMEAR	Results	Biologica	I Reference	<u>Method</u>
RBC WBC	Normocytic As above Adequate			
Platelets E S R	15 *** End Of F	0 - 20 mm/nr teport ***		Automated Westergren's Metho

Suggested Clinical Correlation \* If neccessary, Please discuss Verified By : : 11100245

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Dr. GAURI HARDAS, MBBS,MD CONSULTANT PATHOLOGIST

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Page 2 of 2

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#### CLINICAL DIAGNOSTIC LABORATORY

#### DEPARTMENT OF BIOCHEMISTRY

Bill Noi UMR No	: BIL24250	ti Bhalsare 66344/KH11 4 10:09 am	4357	Age /Gender Referred By Report Date	: Dr. Vimm	emale I Goel MBBS,MD 4 11:35 am
Received Dt Parameter		<u>Specimen</u> Plasma	<b>Results</b> 89	<u>Biological Re</u> < 100 mg/dl	aference	Method GOD/POD,Colorimetric
Fasting Wastria GA GLYCOSYLAT HDA1c	ED HAEMO	GLOBIN (H	4.4	Non-Diabetic Pro-Diabetic % Diabetic : >:	; 5.7 - 6.4	HPLC
			*** End Of	Report ***		

Suggested Cinical Correlation \* If neccessary, Please discuss

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Dr. GAURI HARDAS, MBBS, MD CONSULTANT PATHOLOGIST

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# CLINICAL DIAGNOSTIC LABORATORY

## DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mrs SH	nruti Bhaisare		FBIOCHEMISTR	tγ	
Bill No/ UMR No	: BIL242	5066344/KHj -24 12:31 pr	14357	Age /Gender Referred By Report Date		Goel MBBS,MD
Parameter Post Prandial Plasma Interpretation Clinical Decision	n:	Specimen Plasma	89	Siological Ref. < 140 mg/di		Method GOD/POD, Colorimetric
	F	asting =/>	ellites If, 126 mg/dl Irs.OGTT=/ asting = 10			

npaired Glucose Tolerance = 140-199 mg/dl

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neccessary, Please

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Teanade

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# CLINICAL DIAGNOSTIC LABORATORY

## DEPARTMENT OF BIOCHEMISTRY

Patient Name Bill No/ UMR No Received Dt	: Mrs. Shruti Bhalsare : BIL2425066344/KH : 23-Nov-24 10:10 at	114357	The second se	ni Goel MBBS,MD
LIPID PROFI	LE		123-Nov-	24 12:14 pm
Parameter Total Cholesterol Trigiycerides HDL Cholesterol Dire LDL Cholesterol Dire VLDL Cholesterol Tot Chol/HDL Ratio	xt	Results 154 75 53 83.10 15 3	< 200 mg/dl < 150 mg/dl > 50 mg/dl < 100 mg/dl < 30 mg/dl 3 - 5	Method Enzymatic(CHE/CHO/PC D)
Intiate therapeut CHD OR CHD risk e Multiple major risk 10 yrs CHD risk>20 Two or more additi factors,10 yrs CHD	rouivalent factors conferring 0% 00al major risk risk <20%	>100 >130	Consider Drug therapy >130. optional at 100-129 10 yrs risk 10-20 % >130	<u>LDC-C</u> <100 <130
No additional major additional major ris	r fisk or one k factor	>160	10 yrs risk <10% >160 >190,optional at 160-189	<160

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neccessary, Please discuss

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when

Dr. Anuradha Deshmukh, MBBS, MD CONSULTANT MICROBIOLOGIST

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### CLINICAL DIAGNOSTIC LABORATORY

#### DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mrs. Sbrutt Bhaisare	Age /Gender	: 34 Y(s)/Female
Bill No/ UMR No	: BIL2425066344/KH114357		: Dr. Vimmi Gael MBBS, MD
Received Dt	: 23-Nov-24 10:10 am		123-Nov-24 11:35 am

### LIVER FUNCTION TEST(LFT)

Parameter Total Bitrubin	Specimen Serum	Results 0.65	Biological Reference	Method
Direct Bilirabin	and out t	0.16	0.2 i.3 mg/dl 0.1 0.3 mg/dl	
Indirect Bilinutin		0.49	0.1 0.3 mg/di 0.3 1.1 mg/di	
Aikaline Prospinatase		63	30 - 126 U/L	
SGPT/ALT .		16	13 45 D/L	
SGOT/AST		26	10-35 U/L	
Serum Total Protein		7.76	6.3 - 8.2 gm/dl	
Albumin Serum		4.71	3.5 - 5.0. gm/di	Bromocresol green Dye
Globulin		3.07	2.0 - 4.0 gm/dl	Broding
A/G Raho		1.53	and an Antal	
		*** End Of	Report ***	

Suggested Clinical Correlation \* If neccessary, Please discuss

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## CLINICAL DIAGNOSTIC LABORATORY

## DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mrs. Shruti Bhaisare	Age /Gender	: 34 Y(s)/Female
Bill No/ UMR No	: BIL2425066344/KH114357		Dr. Vimmi Goel MBBS,MD
Received Dt	:23-Nov-24 10:10 am		:23-Nov-24 11:35 am

	Parameter	Specimen	<b>Result Values</b>	<b>Biological Reference</b>	Method
	Blood Urea	Serum	13	15.0 - 36.0 mg/dl	L.T.T.T.T.M.
l	Creatining		0.50	0.52 - 1.04 mg/dl	
	GFR		126.1	>90 mL/mir/1.73m square.	
	Sodium		139	136 - 145 mmol/L	Direct ion selective
	Potassium		1.66	3.5 - 5.1 mmol/L	electrode
			*** End Of Rep		

Suggested Clinical Correlation \* If neccessary, Please discuss

Vertified By : : 11100026

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KIMS-KINGSWAY HOSPITALS

## CLINICAL DIAGNOSTIC LABORATORY

### DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mrs. Shruti Bhaisare	Age /Gender	: 34 Y(s)/Female
Bill No/ UMR No	: BIL2425066344/KH114357		: Dr. Vimmi Goel MBBS,MD
Received Dt	:23-Nov-24 1D:10 am		:23-Nov-24 12:14 pm
1112 SW 1126-515			*23-140V-24 12:14 pm

#### THYROID PROFILE

	Parameter	Specimen	Results	<b>Biological Reference</b>	Mathed
	T3	Serum	0.992	0.55 - 1.70 ng/ml	Method
	Free T4		1.01	0.80 - 1.70 ng/dl	Enhanced
TSH	тян		0.579	0.50 - 4.80 uJU/ml	Chemiluminescence
			*** End Of P		

Suggested Clinical Correlation \* If neccessary, Please discuss

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Dr. Anuradha Deshmukh, MBBS,MD CONSULTANT MICROBIOLOGIST

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## CLINICAL DIAGNOSTIC LABORATORY

## DEPARTMENT OF PATHOLOGY

Received Dt	II No/ UMR No : BIL2425066344/KH1 ceived Dt : 23-Nov-24 10:31 an		Referred By		: 34 Y(s)/Female : Dr. Vimmi Goel MBBS,MD	
URINE MICR	OSCOPY			port Date	:23-Nov-24	11:52 am
Parameter PHYSICAL EXAM Volume Colour,	Spa MINATION Urin		Results 40 ml Pale yellow	Biological Refe	arence	Method
Appearance CHEMICAL EXAM Specific gravity	INATION		Clear	Clear		
Reaction (pH) Nitrate Urine Protein Sugar Ketone Bodies Urobilinogen			1.010 7.0 Negative Negative Negative Negative	1.005 - 1.025 4.6 - 8.0 Negative Negative Negative		ion concentration Indicators protein error of pH indicator GOD/POD
Bilirubin MICROSCOPIC E Pus Cells R.B.C.	XAMINATION	i	Normal Negative 0-1	Negative Normal Negative		Legal's est Principle Ehrlich's Reaction Diazonium
Epithelial Cells Casts Crystals			Absent 0-1 Absent Absent *** End Of R	0 - 4 /hpf 0 - 4 /hpf 0 - 4 /hpf Absent		

Suggested Clinical Correlation \* If neccessary, Please Verified By : : 11101075

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Tanale

Dr. Suwarna Kawade, MBBS,MD (Pathology)

CONSULTANT

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# CLINICAL DIAGNOSTIC LABORATORY

# DEPARTMENT OF IMMUNO HAEMATOLOGY

 Patient Name
 : Mrs. Shruti Bhaisare

 Bill No/ UMR No
 : BIL2425066344/KH114357

 Received Dt
 : 23-Nov-24
 10:10 am

Age / Gender : 34 Y(s)/Female Referred By :Dr. Vimmi Goel MBBS,MD Report Date :23-Nov-24 01:17 pm

#### BLOOD GROUPING AND RH

Parameter BLOOD GROUP.

Specimen Results EDTA Whole 'O' Blood & Plasma/ Serum ' Positive

Gel Card Nethod

Rh (D) Typing.

\* Positive '(+Ve)

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neocessary, Please discuss

Verfied By : : 11100245

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> SPANV Medisoarch Lifesciences Private Limited 44. Parwana Browen, Kingrowy, Nagour (240,001, Varwashito, Inde Phone, 98, 0712,6728000 Colvy, Undeparted and Processing





# DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

	STUDY DATE 23.11 2011		
		23-11-2024 11:52:26 KH(14357	
10	Hooking		
2		DX Dr. Vimmi Goel	
2	r 1-10 19	HOSPITAL NO. 4–10 MODALITY	

### X-RAY CHEST PA VIEW

Both the hing fields are clear.

Heart and Aorta are normal.

Both liker shadows appear normal

Dophragm domes and CP angles are clear.

Cervical rib noted on left side,

Bony cage is normal.

IMPRESSION: No pleare-parenchymol abnormality seen.

Dr Poonam Chiddarwar MBBS, MD

N.8: This is only a professional opinion and not the finel diagnosis. Radiological investigations are subject to variations due to technical limitations. Hence, correlation with clinical findings and other investigations should be carried out to snow true nature of kiness.

SPANV Medisoarch Lifesciences Private Limited A4. Pareara Eliawan, Kingaway Nagau - 440.001, Mananshina, Inch Prona - 51.0712 578810 CIN: U74992MH2018P7C3928 (



NAME OF PATIENT:	SHRUTI BHAISARE	AGE & SEX:	34 YRS/FEMALE
UMR NO:	KH114357	BILL NO	BIL2425066344-2
REF BY:	DR VIMMI GOEL	DATE:	23-NOV-2024

#### USG WHOLE ABDOMEN

LIVER is normal in size, shape and echotexture. No evidence of any focal lesion seen. Intrahepatic billiary radicals are not dilated. PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No sludge or calculus seen. Wall thickness is within normal limits.

visualized head and body of PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in size (10.0 cm) shape and echotexture. No focal lesion seen.

Right kidney measures 9.1 x 3.8 cm. Left kidney measures 10.1 x 4.1 cm. Both KIDNEYS are normal in shape, size and echotexture. No evidence of calculus or hydronephrosis seen. URETERS are not dilated.

URINARY BLADDER is partially distended. No calculus or mass lesion seen.

Uterus is normal in size, shape and echotexture. It measures 6.7 x 4.5 x 9.6 cm. No focal myometrial lesion seen. Endometrial echo-complex appears normal. ET - 10mm.

Right ovary volume 9cc and left ovary volume 8.6 cc Multiple small peripherally arranged follicles are seen in bilateral ovaries (< 1 cm) with central echogenic stroma and no dominant follicle is seen in either ovary. No adnexal mass lesion seen.

There is no free fluid or abdominal lymphadenopathy seen.

#### IMPRESSION:

- Polycystic appearing ovaries- correlate with hormonal assay.
- No other significant visceral abnormality seen.

Suggest clinical correlation.

DR. RUTUJA RANGREJ MBBS MD. CONSULTANT RADIOLOGIST

## 2D ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

KIMS-KINGSWAY

Patient Name	: Mrs. Shruti Bhaisare
Age	: 34 years / Female
UMR	: KH114357
Date	; 23/11/2024
Done by	: Dr. Vimmi Goel
ECG	: NSR, WNL
Blood pressur	e: 98/69 mm Hg (Left arm, sitting position)
BSA	: 1.53 m <sup>2</sup>

#### Impression:

Normal chambers dimensions No RWMA of LV at rest Good LV systolic function, LVEF 70% Diastolic dysfunction present E/A is 0.8 E/E' is 6.1 (Normal filling pressure) Valves are normal Trivial MR No pulmonary hypertension IVC is normal in size and collapsing well with respiration No clots or pericardial effusion

#### Comments:

Sector echocardiography was performed in various conventional views (PLAX, SSAX, AP4 CH and 5 CH views). LV size normal. There is no RWMA of LV seen at rest. Good LV systolic function. LVEF 70%. Diastolic dysfunction present. E Velocity is 64 cm/s, A Velocity is 76 cm/s. E/A is 0.8. Valves are normal. Trivial MR. No Pulmonary Hypertension. IVC normal in size and collapsing well with respiration. Pericardium is normal. No clots or pencardial effusion seen.

E' at medial mitral annulus is 10.2 cm/sec & at lateral mitral annulus is 10.8 cm/sec. E/E' is 6.1 (Average).

#### M Mode echocardiography and dimension:

	Normal ra (adults) (	ange (mm) children)	Observed (mm)
Left atrium	19-40	7-37	21
Aortic root	20-37	7-28	20
LVIDd	35-55	8-47	39
LVIDs	23-39	6-28	23
IVS (d)	6-11	4-8	09
LVPW (d)	6-11	4-8	09
LVEF %6	~ 60%	~60%	70%
Fractional Shortening			40%

1-

Dr. Vimmi Goel MD, Sr. Consultant Non-invasive Cardiology Fellow Indian Academy of Echocardiography (FIAE)

