

• COMPU. PATHOLOGY • ALLERGY TESTING
• DIGITAL WHOLE BODY X-RAYS
• DIGITAL 3D SONOGRAPHY
• DIGITAL WHOLE BODY COLOUR DOPPLER
• DIGITAL 2-D ECHO WITH COLOUR DOPPLER
• E.C.G. • LUNG FUNCTION TEST
• MAMMOGRAPHY & BONE MINERAL DENSITOMETRY

• COMPUTERISED STRESS TEST
• DENTAL
• ADVANCED DENTISTRY
• PHYSIOTHERAPY
• AUDIOMETRY & SPEECH THERAPY
• FULL BODY HEALTH CHECK-UPS
• CORPORATE HEALTH CHECKUPS



HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MRS JYOTI SARAVANAN
Referred By Dr : MEDIWHEEL
Sex : FEMALE Age : 51 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LEB5618 *LEB5618*
Reg. Date : 14-May-2024 8:39 am
Report Date : 14-May-2024 3:52 pm
Print Date : 15-May-2024 4:06 pm

25 HYDROXY CHOLECALCIFEROL (VIT D3)

| TEST | RESULT | UNITS | NORMAL VALUES |
|-------------------|--------|---------|---|
| 25 (OH) VITAMIN D | 49.971 | ng / ml | INTERPRETATION OF REFERENCE RANGES Sufficient Vitamin D level- 30-100 ng/ml Insufficient Vitamin D level- 10-29 ng/ml Deficient: < 10 ng/ml Potential Toxicity >100 |

METHOD CLIA

Interpretation :

1. Testing for 25(OH)vitamin D is recommended as it is the best indicator of vitamin D nutritional status as obtained from sunlight exposure & dietary intake. For diagnosis of vitamin D deficiency it is recommended to have clinical correlation with serum 25(OH)vitamin D, serum calcium, serum PTH & serum alkaline phosphatase.
2. During monitoring of oral vitamin D therapy - suggested testing of serum 25(OH)vitamin D is after 12 weeks or 3 mths of treatment. However, the required dosage of vitamin D supplements & time to achieve sufficient vitamin D levels show significant seasonal (especially winter) & individual variability depending on age, body fat, sun exposure, physical activity, genetic factors (especially variable vitamin D receptor responses), associated liver or renal disease, malabsorption syndromes and calcium or magnesium deficiency influencing the vitamin D metabolism. Vitamin D toxicity is known but very rare. Kindly correlate clinically, repeat with fresh sample if indicated.

----- End of Report -----

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Checked By
JAY

DR. BHAVINI KAMDAR
MD (PATH) MUM

BORIVALI CENTRE 1ST FLR., YOGI AVENUE, YOGI NAGAR, BORIVALI (W), MUMBAI - 400092. • TEL.: 2899 6565 / 2899 1376 • MOB.: 90222 39301
KANDIVALI CENTRE MAHAVIR SURYADARSHAN SOC., SATYANAGAR RD., MAHAVIR NAGAR, KANDIVALI (W), MUMBAI - 67. • TEL.: 2868 0090 / 6522 6565 / 2869 7808 • MOB.: 90220 54458
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BIOCHEMISTRY

| TEST | RESULT | | NORMAL VALUES |
|---------------------------|--------|---------|------------------------|
| Blood Urea Nitrogen (BUN) | 17.70 | | 5 - 20 mg/dl |
| CREATININE | 1.16 | mg/dl | 0.5 - 1.3 mg/dl |
| Serum Uric Acid | 3.70 | mg% | Female : 2.6 - 6.0 mg% |
| Sodium | 140 | mEq/l | 135 - 148 mEq/l |
| Serum Calcium | 9.80 | mg / dl | 8.6 - 10.2 mg/dl |
| Age of the Patient | 51 | | |
| Potassium | 4.0 | mEq/l | 3.5 - 5.5 mEq/l |
| eGFR | 52.35 | ml/min | |
| Chlorides | 101 | mEq/l | 96 - 110 mEq/l |

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DR. BHAVINI KAMDAR
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BLOOD GROUP

| TEST | RESULT |
|-------------|----------|
| Blood Group | 'O' |
| Rh Factor | Positive |

----- End of Report -----

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BLOOD SUGAR REPORT

| TEST | RESULT | UNITS | NORMAL VALUES |
|-----------------------------|--------|-------|---|
| BLOOD SUGAR FASTING | 105.3 | mg/dL | Normal: 70-110 mg/dL Impaired Fasting Glucose(IFG): 110 -125 Diabetes mellitus: \geq 126 (on more than one occasion) |
| BLOOD SUGAR (Post prandial) | 138 | mg/dl | Normal: 70-140 mg/dL Impaired Tolerance: 140-199 Diabetes mellitus: \geq 200 (on more than one occasion) |
| URINE SUGAR (Post prandial) | Absent | | |

Method: GOD - POD Enzymatic on Erba EM 200 Random access analyser

Comment:

Blood suagr values are known to be affected by several factors like food, stress and medication. So all discrepant results should be confirmed with repeat sample collection.

----- End of Report -----

Checked By
JAY

DR. BHAVINI KAMDAR
MD (PATH) MUM

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COMPLETE BLOOD COUNT

| TEST | RESULT | UNITS | NORMAL VALUES |
|----------------------------|-----------------------|-------------|--------------------------------------|
| Haemoglobin | 10.3 | gm % | Female : 11.5 - 14.5 gm% |
| Erythrocytes (Total RBCs) | 4.76 | mill. / cmm | Female : 3.8 - 5.2 mill. / cmm |
| PCV | 34.8 | % | Female : 32 - 47 % |
| MCV | 73.00 | fl | 80- 96 fl |
| MCH | 21.70 | pg | 27 - 32 pg |
| MCHC | 29.70 | gm% | 32 - 37 gm% |
| RDW | 15.7 | % | 12 - 14.5 |
| <u>TOTAL WBC COUNT</u> | | | |
| TOTAL WBC COUNT | 6570 | / cumm | 4,000 - 11,000 |
| <u>DIFFERENTIAL COUNT</u> | | | |
| Neutrophils | 60 | % | 40 - 75 |
| Lymphocytes | 35 | % | 20 - 40 |
| Eosinophils | 03 | % | 0 - 6 |
| Monocytes | 02 | % | 2 - 8 |
| Platelet count | 315000 | Lacs/cmm | 150000-450000 |
| <u>PERIPHERAL SMEAR</u> | | | |
| RBC Morphology | Hypo(mild)Micro(mild) | | |
| WBC Morphology | Normal | | |
| Platelets Morphology | Adequate | | |
| ESR (westergren's method) | 30 | mm/hr | Male: 0 - 10 mm Female: 0 - 20 mm |

----- End of Report -----

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JAY

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CRP QUANTITATIVE

| TEST | RESULT | UNITS | NORMAL VALUES |
|--------|--------------------|-------|---------------|
| CRP | 4.16 | mg/L | 0 - 6 mg/L |
| Method | Immunoturbidometry | | |

CRP is an acute phase protein, present in normal serum, which increases significantly after most forms of tissue injuries infections and inflammations. Progressive decrease in C.R.P can be used as a monitor response to therapy.

----- End of Report -----

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DR. BHAVINI KAMDAR
MD (PATH) MUM

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GLYCOSYLATED HAEMOGLOBIN (HbA1c)

| TEST | RESULT | UNITS | NORMAL VALUES |
|---------------------------|--------|-------|---------------|
| HBA1C | 5.6 | % | 4 - 5.7 % |
| ESTIMATED AVERAGE GLUCOSE | 114.02 | | |
| METHOD : NEPHELOMETRY | | | |

DIAGNOSTIC CRITERIA FOR DIABETES:

Normal: Less than 5.7%
 Impaired glucose tolerance: 5.8% to 6.4%
 Diabetes: 6.5% or more

CONTROL CRITERIA IN DIABETICS:

Optimal control: 7.0% or less
 Fair control: 7.0% to 8.0%
 Poor control: More than 8.0%

Comment :

HbA1c values should not used in diagnosis of Diabetes Mellitus and are marker of glycaemic control in known cases of Diabetes Mellitus.

----- End of Report -----

* RECHECKED & CONFIRMED

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MD (PATH) MUM

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LIPID PROFILE

| TEST | RESULT | UNITS | NORMAL VALUES |
|-------------------|---------------|---------|---|
| SR. CHOLESTEROL | 167 | mg / dl | Desirable: < 200 mg/dl Borderline High: 200-239 mg/dl High: >= 240 mg/dl |
| SR. TRIGLYCERIDES | 96.9 | mg / dl | Normal: < 150 mg/dl Borderline High: 150-199 mg/dl High: 200-499 mg/dl Very High: >= 500 mg/dl |
| HDL CHOLESTEROL | 41.5 | mg / dl | 35.3 - 79.5 mg / dl |
| VLDL | 19.38 | mg / dl | 6 - 38 mg / dl |
| LDL CHOLESTEROL | 106.12 | mg / dl | Optimal: < 100 mg/dl Near Optimal: 100-129 mg/dl Borderline high: 130-159 mg/dl High: 160-189 mg/dl Very High: >= 190 mg/dl |
| CHOLESTEROL / HDL | 4.02 | | < 5 |
| LDL / HDL | 2.56 | | < 3.5 |

NOTE: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.
 Lower HDL values are associated with increased risk of atherosclerosis. Cholesterol/HDL
 Ratio below 5.1 is statistically associated with decreased incidence of heart disease.

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- GOREGAON CENTRE** M.G. ROAD, NEAR JAIN MANDIR, GOREGAON (W), MUMBAI - 400062. • TEL.: 2873 3030 / 2873 3131 • MOB.: 93213 83806

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- AUDIOMETRY & SPEECH THERAPY
- FULL BODY HEALTH CHECK-UPS
- CORPORATE HEALTH CHECKUPS



HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MRS JYOTI SARAVANAN
Referred By Dr : MEDIWHEEL
Sex : FEMALE **Age :** 51 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LEB5618 *LEB5618*
Reg. Date : 14-May-2024 8:39 am
Report Date : 14-May-2024 1:34 pm
Print Date : 15-May-2024 4:06 pm

LIVER FUNCTION TEST

| TEST | RESULT | UNITS | NORMAL VALUES |
|----------------------|--------|---------|--|
| Bilirubin Total | 0.34 | mg / dl | 0 - 1.0 mg / dl |
| Bilirubin Direct | 0.14 | mg / dl | 0 - 0.4 mg / dl |
| Bilirubin Indirect | 0.20 | mg/dl | UPTO 0.8 mg / dl |
| S.G.P.T. | 27.50 | U / L | Up to 45 U / L |
| S.G.O.T. | 15 | U / L | Up to 46 U / L |
| Alkaline Phosphatase | 123.00 | U/l | 4 - 15 Years: 54 - 369 U/l 20 - 59 Years: 42 - 98 U/l > 60 Years: 53 - 141 U/l |
| Total Proteins | 7.09 | gm / dl | 6.4 - 8.3 gm / dl |
| Albumin | 4.03 | gm / dl | 3.5 - 5.2 gm / dl |
| Globulin | 3.06 | mg/dl | 2 - 3.5 mg / dl |
| A / G Ratio | 1.32 | | 1.0- 2.3 |
| GGT | 25.1 | IU/L | 55 IU/L |

----- End of Report -----

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Checked By
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DR. BHAVINI KAMDAR
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Patient's Name : MRS JYOTI SARAVANAN
Referred By Dr : MEDIWHEEL
Sex : FEMALE **Age :** 51 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LEB5618 *LEB5618*
Reg. Date : 14-May-2024 8:39 am
Report Date : 14-May-2024 3:52 pm
Print Date : 15-May-2024 4:06 pm

T3 T4 TSH

| TEST | RESULT | UNITS | NORMAL VALUES |
|-----------------------------------|--------|--------|---|
| T3 [Tri - iodothyronine] | 116.34 | ng/dl | 91.14 - 237.61 ng/dl HYPOTHYROID : Less than 35 ng/dl HYPERTHYROID : Above 193 ng/dl |
| T4 [Thyroxine] | 8.117 | ug/dl | 4.71 - 13.20 ug/dl ug/dl HYPOTHYROID : Less than 4.87 ug/dl HYPERTHYROID : Above 11.72 ug/dl |
| TSH [Thyroid Stimulating Hormone] | 2.605 | uIU/mL | 0.3 - 4.3 uIU/ml Hypothyroid > 15.0 Hyperthyroid : < 0.35 First Trimester : 0.1 - 2.5 Second Trimester : 0.2 - 3.0 Third Trimester : 0.3 - 3.0 |

METHOD: CLIA

Interpretation :

1. TSH results between 4.5 to 15 show considerable physiologic & seasonal variation, suggest clinical correlation or repeat testing with fresh sample.
2. TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure , severe burns , trauma and surgery etc.
3. Drugs that decrease TSH values e.g: L dropra, Glucocorticoid Drugs that increase TSH values e.g Iodine, Lithium, Amiodarone.
4. Total T3 & T4 Values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy. Drugs (Androgens, Estrogens. O C Pills, Phenytoin). Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

----- End of Report -----

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MRS JYOTI SARAVANAN
Referred By Dr : MEDIWHEEL
Sex : FEMALE Age : 51 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LEB5618 *LEB5618*
Reg. Date : 14-May-2024 8:39 am
Report Date : 14-May-2024 2:20 pm
Print Date : 15-May-2024 4:06 pm

URINE ROUTINE & MICROSCOPY

| TEST | RESULT |
|---|-----------------|
| <u>PHYSICAL EXAMINATION</u> | |
| Quantity | 15 ml |
| Colour | Pale yellow |
| Appearance | clear |
| Deposit | Absent |
| pH | Acidic (5.0) |
| Specific Gravity | 1.010 |
| <u>CHEMICAL EXAMINATION</u> | |
| Proteins | Absent |
| Sugar | Absent |
| Ketone | Absent |
| Occult Blood | Absent |
| Bile Pigment | Absent |
| Bile Salts | Absent |
| Urobilinogen | Normal |
| <u>MICROSCOPIC EXAMINATION OF CENTRIFUGED DEPOSIT</u> | |
| Red Blood Cells | Absent |
| Pus Cells | Occasional /hpf |
| Epithelial Cells | Occasional /hpf |
| Casts | Not seen |
| Crystals | Not seen /hpf |
| Yeast | Not seen |
| Bacteria | Absent |

Page 11 of 13

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MRS JYOTI SARAVANAN
 Referred By Dr : MEDIWHEEL
 Sex : FEMALE Age : 51 Years
 Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LEB5618 *LEB5618*
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----- End of Report -----

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MRS JYOTI SARAVANAN
Referred By Dr : MEDIWHEEL
Sex : FEMALE Age : 51 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LEB5618 *LEB5618*
Reg. Date : 14-May-2024 1:40 pm
Report Date : 14-May-2024 3:52 pm
Print Date : 15-May-2024 4:06 pm

VITAMIN B12

| TEST | RESULT | UNITS | NORMAL VALUES |
|-------------------|---------|---------|-----------------|
| S. VITAMIN B - 12 | 308.057 | pg / ml | 206 - 765 pg/ml |
| Method | CLIA | | |

Interpretation :

1. Vit B12 levels are decreased in megaloblastic anemia, partial/total gastrectomy, pernicious anemia, peripheral neuropathies. chronic alcoholism, senile dementia, and treated epilepsy.
2. Holo Transcobalamin II levels are a more accurate marker of active VitB12 component.

----- End of Report -----

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Checked By
JAY

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MRS JYOTI SARAVANAN
Referred By Dr : MEDIWHEEL
Sex : FEMALE Age : 51 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LEB5618 *LEB5618*
Reg. Date : 14-May-2024 8:39 am
Report Date : 15-May-2024 10:07 am
Print Date : 15-May-2024 4:58 pm

X-RAY CHEST P. A. VIEW

The lungs on the either side show equal translucency.

The peripheral pulmonary vasculature is normal.

No focal lung lesion is seen.

The pleural spaces are normal.

Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position.

No mediastinal abnormality is visible.

The cardiac size is normal.

The domes of the diaphragms are normal in position, and show smooth outline.

Ribs appear normal.

IMPRESSION :

NO EVIDENCE OF PULMONARY, PLEURAL OR CARDIAC PATHOLOGY IS NOTED.

CLINICAL CORELATION WITH NECESSARY INVESTIGATIONS.

DR. SHAI LESH SANGALE
CONS. RADIOLOGIST

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Mediwheel Health Checkups Healthcare Medical Centre Boravali West

Network : Mediwheel : New Delhi <network@mediwheel.in>

Mon, May 13, 2024 at 7:50 PM

To: "healthcare.medicals@gmail.com" <healthcare.medicals@gmail.com>

Cc: "Wellness : Mediwheel : New Delhi" <wellness@mediwheel.in>, Healthcare Medical Centre & Diagnostics <marketing01@healthcarediag.com>

Dear Team,

One of our clients will be visiting in your Borivali **west center** on **14/05/2024**. So kindly provide health checkup to him under the following package

1. Smt Jyoti Saravanan

| |
|---|
| MediWheel Full Body Platinum Plus Advanced Female |
| Test Name |
| For the most Comprehensive Check of all Pathology for complete understanding of your body. |
| CBC with ESR, Urine analysis Blood Group, BMI |
| Blood Sugar & Urine Sugar Fasting, Blood Sugar - Post Prandial, Hba1c |
| TSH, T3, T4 |
| Triglycerides, Cholesterol Total, HDL, LDL, VLDL, LDL/HDL Ratio, Cholesterol Total / HDL Ratio |
| Uric Acid, BUN, Creatinine, BUN/Creatinine Ratio, Total Protein |
| Bilirubin Total & Direct and Indirect, Alkaline Phosphatase, , Albumin, Globulin, A:G Ratio, Serum Protein, GGT, AST/ALT Ratio |
| ECG, (2D or TMT) |
| X Ray Chest, PFT |
| USG Whole Adbomen |
| Pap Smear |

Phosphates
Vitamin-D,
Vitamin B - 12

Electrolytes, Calcium & Phosphorus
C Reactive Protein

Mamography

General, Dental, Eye, ENT, Detician, Gynac

Kindly raise the bills of Vitamins & electrolytes,Ca,CRP to mediwheel as discussed with Dr. Shruti.

Regards
Mediwheel

भारत सरकार

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Government of India

नोंदविण्याचा क्रमांक / Enrollment No 1218/61133/00942

To,
ज्योती सरवानन
Jyoti Saravanan
B/307, Hareshwar Apartment
Eksar Road
Near Maratha Bank Eksar
Borivali West
Borivali West Borivali West Mumbai
Maharashtra 400092
9867063620

22/11/2012

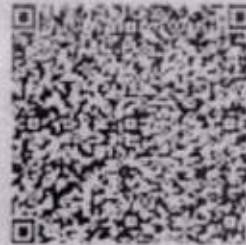
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Medical Centre And Diagnostics
Yogi Avenue, Yogi Nagar,
Borivali (West), Mumbai - 400 092.
Tel.: 28996565 / 28996535

Ref: 59 / 16A / 105023 / 106036 / P



SH073755489DF

Dr. NUPUR RAI
MBBS, DIPLOMA CARDIOLOGY (PGDCC)
Reg. No.: 2018115643



19/11/2012

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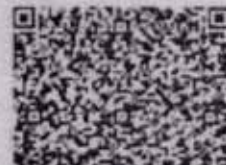
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भारत सरकार
GOVERNMENT OF INDIA



ज्योती सरवानन
Jyoti Saravanan
जन्म वर्ष / Year of Birth : 1972
स्त्री / Female



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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

| | | | |
|---------------|---------------------|------|-----------|
| NAME | MRS JYOTI SARAVANAN | DATE | 14/5/2024 |
| HEIGHT: 180CM | WEIGHT : 86.3KG | AGE | 51YRS |
| REFERRED BY | MEDIWHHEL | SEX | FEMALE |

| | |
|---|---|
| PRESENT COMPLAINT: NIL | |
| PAST HISTORY : LSCS DONE IN 2002 WAS ADMITTED AT BORIVALI EAST UNDER DR KULKARNI. | |
| ALLERGY: NIL | HABITS:NIL |
| SLEEP: GOOD | BLADDER: NAD |
| SPECS- LONG VISION | BOWEL: NAD |
| FAMILY HISTORY: FATHER 80YRS K/C/O IBS.. MOTHER 70YRS K/C/O HTN / DM. | |
| GYNEAC HISTORY : LMP-MENOPAUSE SINCE 5YRS G2P1A0L2-TWIN PREGNANCY LSCS DONE IN 2002.NO LEUCORRHEA + NO PRURITUS. | |
| GENERAL EXAMINATION: | ADVICE- |
| P : 80 /MIN BP: 120 / 70 MMHG | <i>Continue healthy diet.</i> |
| PALLOR: NIL ICTERUS: NIL | <i>Take Hesperin 490 - 1 x 2 months</i> |
| OEDEMA: NIL OTHERS: NAD | <i>Fit for employment.</i> |
| RS: A E B E clear | |
| CVS: NAD | |
| PA: SOFT , NON TENDER | |
| CNS: NAD | |
| INVESTIGATION: | |

[Signature]
Dr. NIPIR RAI
DR. V. J. MEHTA (M.D.)
 MBBS, DIPLOMA IN CARDIOLOGY (PGCC)
 Reg. No.: 2018115643

HEALTHCARE
 Medical Centre And Diagnostics
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DENTAL CHECK UP

| | | | |
|-------------|----------------------|--------------|-------------------------|
| NAME | Smt. Jyoti Saravanan | DATE | 14 th /05/24 |
| REFERRED BY | | AGE - 57 YRS | SEX - F |

CHIEF COMPLAINT: Pt c/o bleeding gums since 2 months.

PAST DENTAL HISTORY: H/o restoratⁿ and RCT done

HABITS: Snoring at night

ORAL EXAMINATION: 1) Recession \bar{c} 221/123 (evident) (Grade I)
2) Pit el fissure cavities \bar{c} 81

TREATMENT: 1) Restoration \bar{c} 81
2) Gfp → Tan x / Gum x (15 days)

Adv - warm saline gargel for 15 days twice a day.

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Yogi Avenue, Yogi Nagar,
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Tel.: 28996585 / 28996535

- COMPU. PATHOLOGY • ALLERGY TESTING
- DIGITAL WHOLE BODY X-RAYS
- DIGITAL 3D SONOGRAPHY
- DIGITAL WHOLE BODY COLOUR DOPPLER
- DIGITAL 2-D ECHO WITH COLOUR DOPPLER
- E.C.G. • LUNG FUNCTION TEST
- MAMMOGRAPHY & BONE MINERAL DENSITOMETRY

- COMPUTERISED STRESS TEST
- DENTAL
- ADVANCED DENTISTRY
- PHYSIOTHERAPY
- AUDIOMETRY & SPEECH THERAPY
- FULL BODY HEALTH CHECK-UPS
- CORPORATE HEALTH CHECKUPS



HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

EYE CHECK UP & COLOUR VISION

| | | |
|---------------------------|------------|--------------|
| NAME: MRS JYOTI SARAVANAN | | DT- 14/05/24 |
| REF. BY: MEDIWHEEL | AGE: 51YRS | SEX: FEMALE |

| | RIGHT EYE | LEFT EYE |
|------------------|---|---|
| CORNEA | NORMAL | NORMAL |
| PUPIL | CCERL | CCERL |
| SCLERA | NORMAL | NORMAL |
| EYE MOVEMENTS | NORMAL | NORMAL |
| REFRACTIVE ERROR | LONG VISION-12/6 CORRECTED BY GLASSES | LONG VISION 12/6 CORRECTED BY GLASSES |
| COLOUR VISION | NORMAL | NORMAL |

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DR. SIGNATURE

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- FULL BODY HEALTH CHECK-UPS
- CORPORATE HEALTH CHECKUPS



HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

| | | | |
|---------------|---------------------|------|------------|
| NAME | MRS JYOTI SARAVANAN | DATE | 15.05.2024 |
| INVESTIGATION | MAMMOGRAPHY | AGE | 51 YRS |
| REF. BY DR. | MEDIWHEEL | SEX | FEMALE |

SONOMAMMOGRAPHY OF BOTH BREASTS

Breast tissue is normal is echogenicity.

There is no focal hypo or hyperechoic solid / cystic lesion in both breast.

No dilated tubular structure seen.

There is no appreciable lymphnode in both axillas.

IMPRESSION:
Normal findings.

DR. SUDHANSHU SAXENA

CONS. RADIOLOGIST.

Note : Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have interobserver variation. Further / Follow-up imaging may be needed in some cases for confirmation of USG findings. Please interpret accordingly.

- COMPU. PATHOLOGY • ALLERGY TESTING
- DIGITAL WHOLE BODY X-RAYS
- DIGITAL 3D SONOGRAPHY
- DIGITAL WHOLE BODY COLOUR DOPPLER
- DIGITAL 2-D ECHO WITH COLOUR DOPPLER
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- COMPUTERISED STRESS TEST
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- PHYSIOTHERAPY
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- FULL BODY HEALTH CHECK-UPS
- CORPORATE HEALTH CHECKUPS



| | | | |
|-------------------|----------------------------|-------------|-------------------|
| NAME | MRS JYOTI SARAVANAN | DATE | 15.05.2024 |
| | | AGE | 51YRS |
| REF. BY DR | MEDIWHEEL | SEX | FEMALE |

REAL TIME ABDOMINAL SONOGRAPHY SHOWS,

LIVER :

Liver is normal in size showing bright parenchymal echotexture . There is no evidence of solid or cystic mass .The portal and the hepatic venous system appears normal.

Gall bladder :

The Gall bladder is well distended .The gall bladder wall of normal thickness . No evidence of gall stones.

PANCREAS :

Pancreas is normal in size with smooth margin and homogenous paranchymal echotexture. No focal lesion seen.

KIDNEYS :

Both kidneys are normal in size and shows homogenous cortical echotexture. Central calyceal echoes appear normal. There is no evidence of hydronephrosis or renal calculus.

(a) Right kidney measures: 9.2 x 4.3 cms

(b) Left kidney measures: 8.6 x 4.1 cms.

SPLEEN :

The spleen is normal in size with homogenous parenchymal echotexture. No focal lesion are seen.

AORTA :

The upper aorta and para aortic regions appear normal.

URINARY BLADDER :

Urinary bladder is well distended. No evidence of calculus or intraluminal mass seen in the bladder.

UTERUS (TAS):

Uterus is anteverted and normal. Endometrial lining (3.4 mm) appears normal. No evidence of focal lesion.

Uterus measures:4.9 x 3.0 x 2.9 cms.

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

| | | | |
|-------------------|----------------------------|-------------|-------------------|
| NAME | MRS JYOTI SARAVANAN | DATE | 15.05.2024 |
| | | AGE | 51YRS |
| REF. BY DR | MEDIWHEEL | SEX | FEMALE |

ADNEXA :

Right ovary is normal in size and shows homogenous echo pattern. No evidence of focal lesion. Right ovary measures: 1.1 x 1.1 cm.

Left ovary is normal in size and shows homogenous echo pattern. No evidence of focal lesion. Left ovary measures: 1.4 x 1.2 cm.

No evidence of free fluid.

IMPRESSION :

- **GRADE I FATTY LIVER.**

SUGGEST: CLINICAL CORRELATION.

DR.SUDHANSHU SAXENA
CONS.RADIOLOGIST.

Note : Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have interobserver variation. Further / Follow-up imaging may be needed in some cases for confirmation of USG findings. Please interpret accordingly.

- COMPU. PATHOLOGY
- DIGITAL X-RAY
- DIGITAL SONOGRAPHY
- DIGITAL COLOR DOPPLER
- 2D ECHO CARDIOGRAPHY
- MAMMOGRAPHY & BONE MINERAL DENSITOMETRY (BMD)
- ECG ■ PFT
- COMPU. TREADMILL TEST
- PHYSIOTHERAPY
- DENTAL
- HEALTH CHECK-UP



MEDICAL CENTRE & DIAGNOSTICS

ELECTROCARDIOGRAM (ECG)

MRS JYOTI SARAVANAN
ELEB5618 14-May-2024



ECG

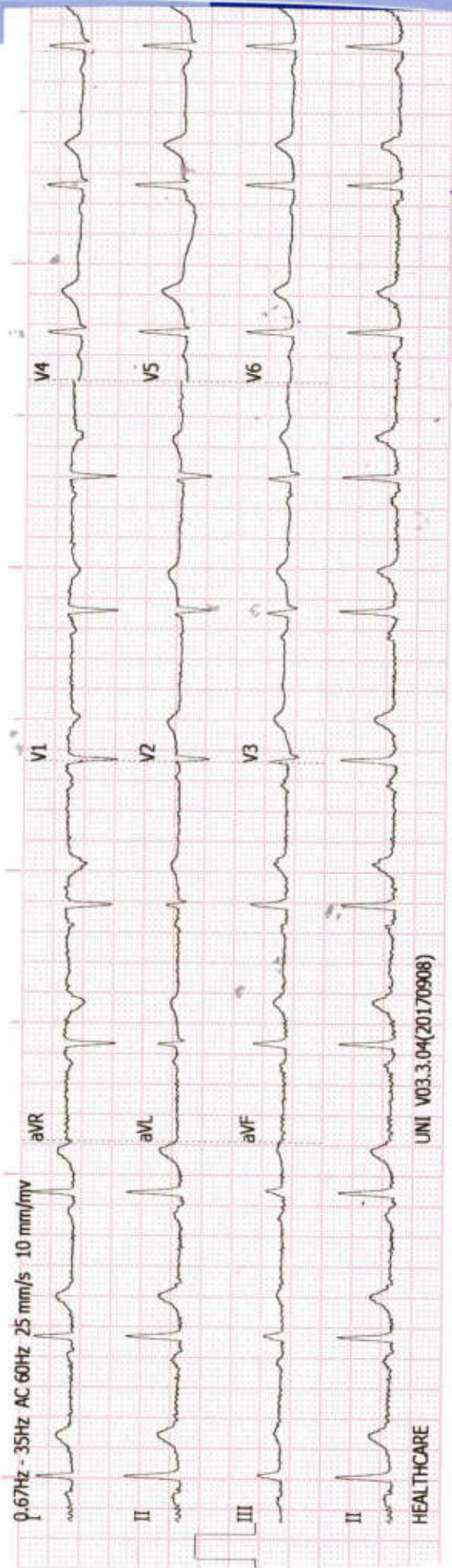
PATIENT MRS. JYOTI SARAVANAN AGE 51 SEX F

REF. BY DR. MEDIWHEEL DATE 14/05/24

INTERPRETATION : low

Dr. NIJOUR RAI
MBBS, DIPLOMA IN CARDIOLOGY (PGDCC)
Reg. No.: 2018115643

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Mumbai (West), Mumbai - 400 092.
Tel.: 28996565 / 28996535



History :
Axis :
B.P. :
P. Waves :
Drugs :
PR Interval :
Standard :
Q. Waves :
Auricular Rate : 76 bpm
QRS Interval :
Ventricular Rate :
ST Segment :
Rhythm :
T. Waves :
Mechanism :
QT Interval :
Voltage :
Extra Systoles :

REMARKS & CONCLUSIONS :
.....
.....

HEALTHCARE BORIVALI

MRS JYOTI SARAVANAN

ID : 1201
 DATE : 14/05/2024
 AGE/SEX : 51 / F
 HT/WT : 180 / 86
 REF. BY : MEDIWHEEL

TREADMILL TEST REPORT

PROTOCOL : Bruce
 HISTORY : Checkup/Physical fitness,
 INDICATION : CARDIAC EVALUATION
 MEDICATION : NONE

| PHASE | TOTAL TIME | STAGE TIME | SPEED Km/Hr | GRADE % | H.R. bpm | B.P. mmHg | RPP x100 | ST LEVEL (MM) | | | MET | |
|-------------|------------|------------|-------------|---------|----------|-----------|----------|---------------|------|------|-----|-----|
| | | | | | | | | I | II | III | | |
| SUPINE | | | | | 101 | 120 / 70 | 121 | | | | | |
| STANDING | | | | | 83 | 120 / 70 | 99 | 1.1 | 1 | -0.1 | | |
| HYPERVENT | | | | | 82 | 120 / 70 | 98 | 0.1 | 0 | -0.1 | | |
| Stage 1 | 2:55 | 0:55 | 2.7 | 10 | 127 | 130 / 80 | 165 | 0.4 | 0.1 | -0.3 | | 4.6 |
| Stage 2 | 5:55 | 2:55 | 4 | 12 | 146 | 140 / 80 | 204 | -0.1 | -1 | -0.9 | | 7.0 |
| PK-EXERCISE | 6:3 | 0:3 | 4.9 | 14 | 150 | 140 / 80 | 210 | -0.2 | -2 | -1.8 | | 7.0 |
| RECOVERY | 8:12 | 2:2 | | | 97 | 140 / 80 | 135 | -0.1 | -1.4 | -1.3 | | 7.1 |
| RECOVERY | 9:5 | 2:55 | | | 93 | 140 / 80 | 130 | 0.3 | -0.1 | -0.4 | | |
| | | | | | | | | 0.4 | -0.2 | -0.6 | | |

RESULTS

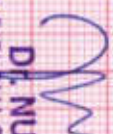
EXERCISE DURATION : 6:3
 MAX HEART RATE : 150 bpm
 MAX BLOOD PRESSURE : 140 / 80 mm Hg
 REASON OF TERMINATION : Achieved 'THR',
 BP RESPONSE : Normal,
 ARRHYTHMIA : None,
 H.R. RESPONSE : Normal Chronotropic Response,
IMPRESSIONS :
 Fair effort tolerance
 No angina
 No arrhythmia
 No significant ST changes noted
 Stress test negative for inducible ischemic changes

MAX WORK LOAD

: 7.15 METS

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 Tel.: 28398585 / 28398535



Dr. NUPUR RAI
 MBBS, DIPLOMA CARDIOLOGY (PGCC)
 Reg. No.: 2018115643

Technician : 1

HEALTHCARE BORIVALLI

MRS JYOTI SARAVANAN
I.D. 1201
Age 51/F
Date 14/05/2024

RATE 101bpm
B.P. 120/70

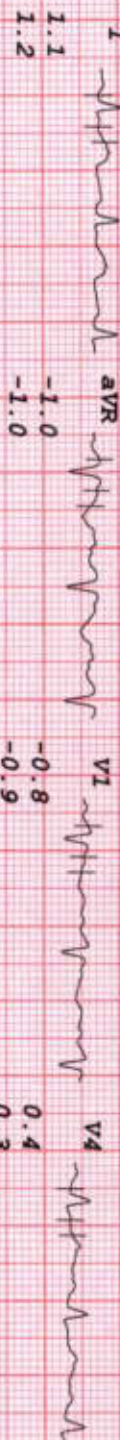
PRETEST
SUPINE

ST @ 10mm/mV
80ms PostJ

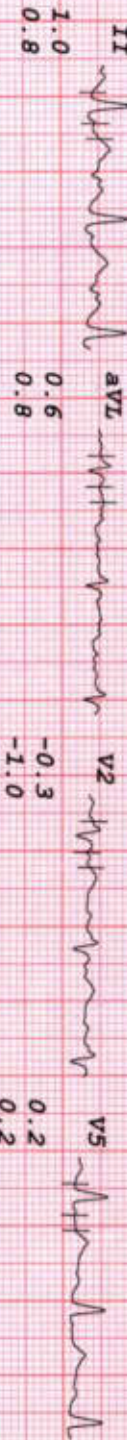
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Mag. X 2

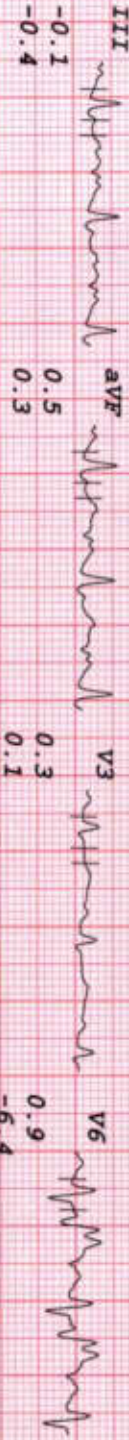
V1



0.4
0.3



0.2
0.2



0.9
-6.4



0.4
0.3

II

I III aVR aVL V1 V2 V3 V4

HEALTHCARE BORIVALLI

MRS JYOTI SARAVANAN
I.D. 1201
Age 51/F
Date 14/05/2024

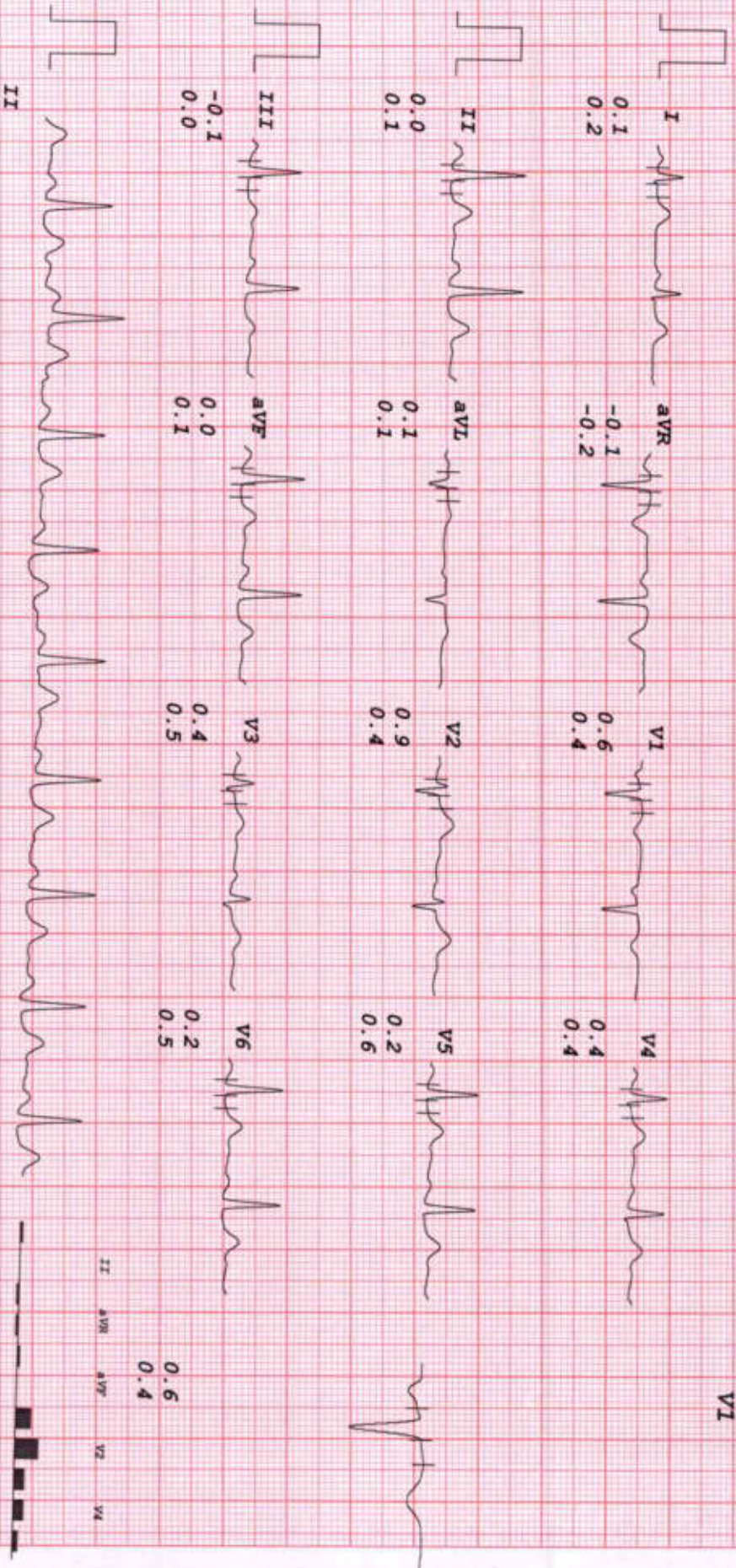
RATE 83bpm
B.P. 120/70

PRETEST
STANDING

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAL

Mag. X 2



HEALTHCARE BORIVALI

MRS JYOTI SAPAVANAN

I.D. 1201
Age 51/F
Date 14/05/2024

RATE 82bpm
B.P. 120/70

PRETEST
HYPERVENT

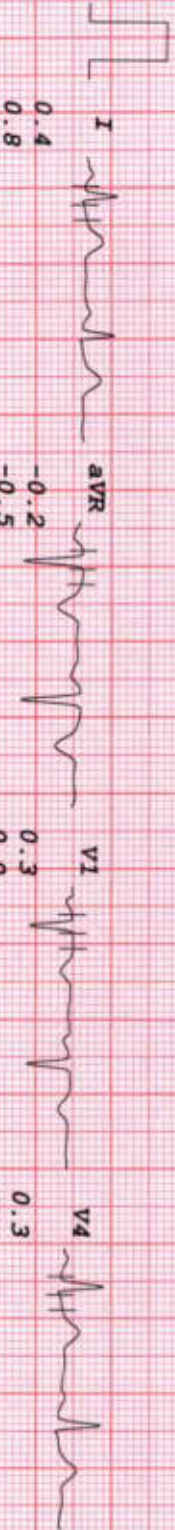
ST @ 10mm/mV
80ms PostJ

PHASE TIME 0:55

LINKED MEDIAN

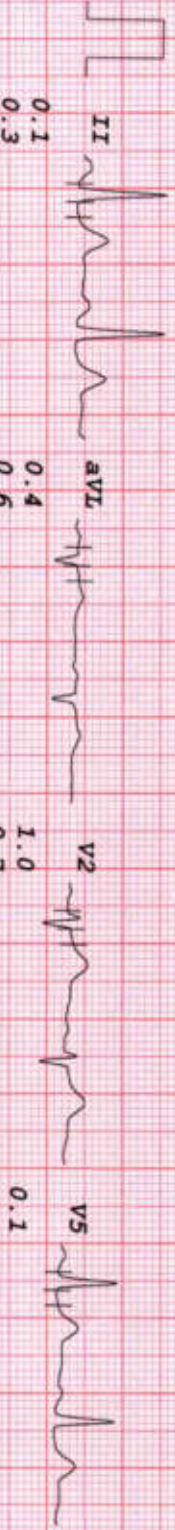
Mag. X 2

V1



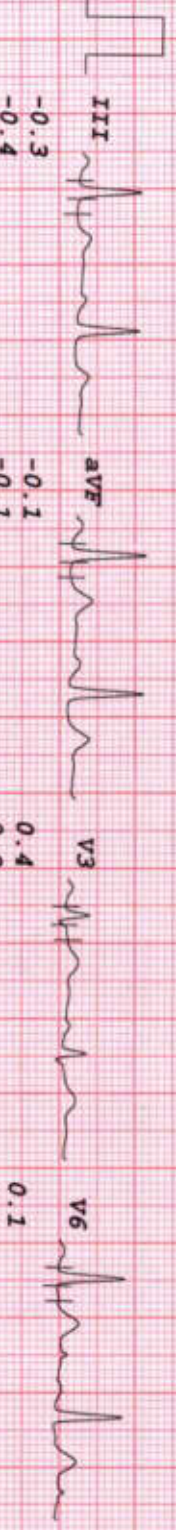
V1
0.3
0.0

V4
0.3
0.3



V2
1.0
0.7

V5
0.1
0.2



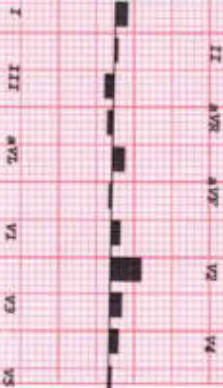
V3
0.4
0.2

V6
0.1
0.4



aVL
0.4
0.6

aVF
-0.1
-0.1



HEALTHCARE BORIVALLI

MRS JYOTI SARAVANAN
 I.D. 1201
 Age 51/F
 Date 14/05/2024

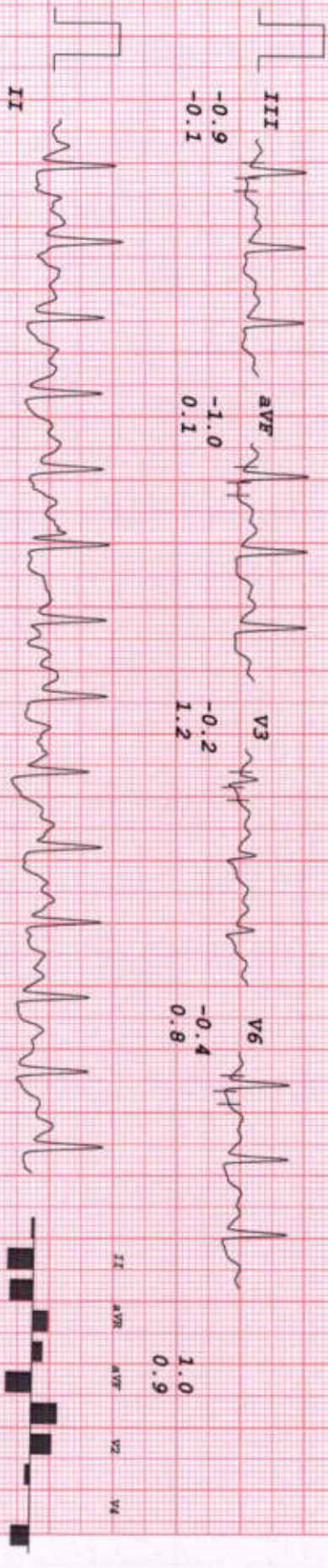
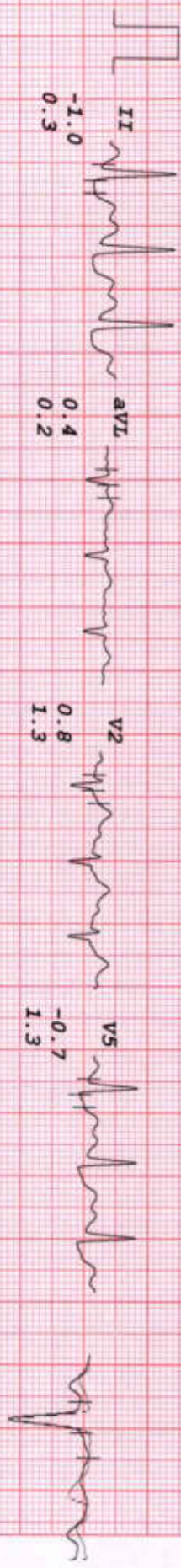
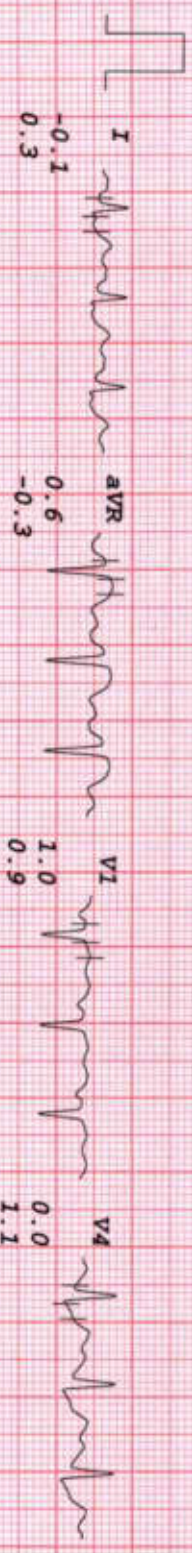
RATE 127bpm
 B.P. 130/80

Bruce
 Stage 1
 TOTAL TIME 2:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 2.7 km/hr
 SLOPE 10 %

LINKED MEDIAN

Mag. X 2



HEALTHCARE BORIVALI

MRS JYOTI SARAVANAN
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Date 14/05/2024

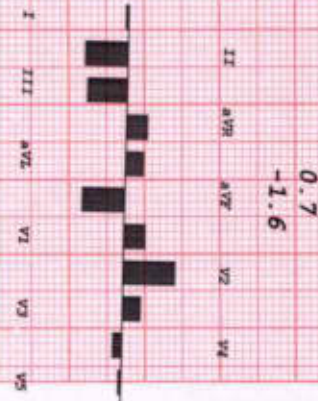
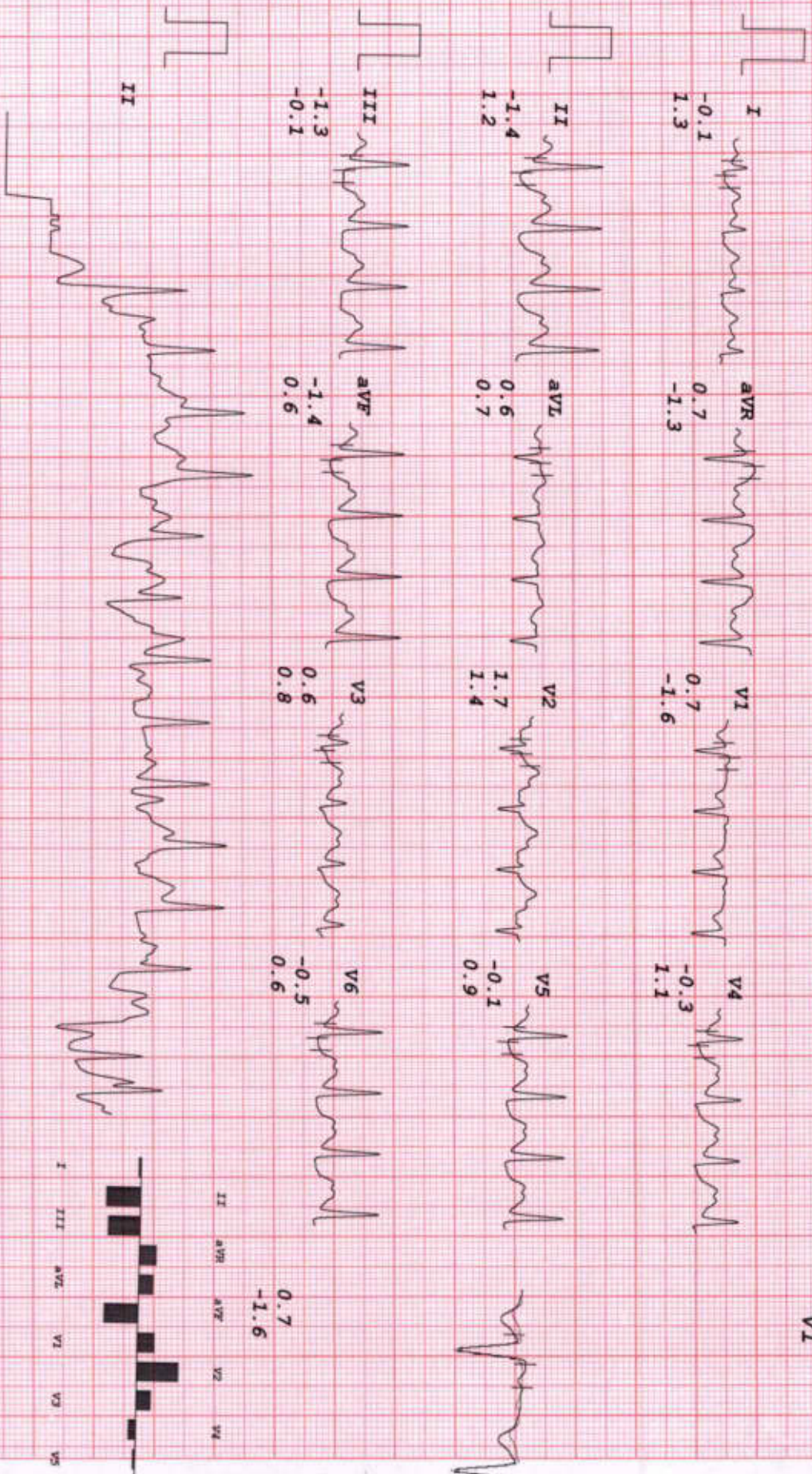
RATE 150bpm
B.P. 140/80

Bruce
PR-EXERCISE
TOTAL TIME 6:03
PHASE TIME 0:03

ST @ 10mm/mV
80ms PostJ
Speed 4.9 km/hr
SLOPE 14 %

LINKED MEDIAL

Mag. X 2



HEALTHCARE BORIVALI

MRS JYOTI SARAYANAN
I.D. 1201
Age 51/F
Date 14/05/2024

RATE 117bpm
B.P. 140/80

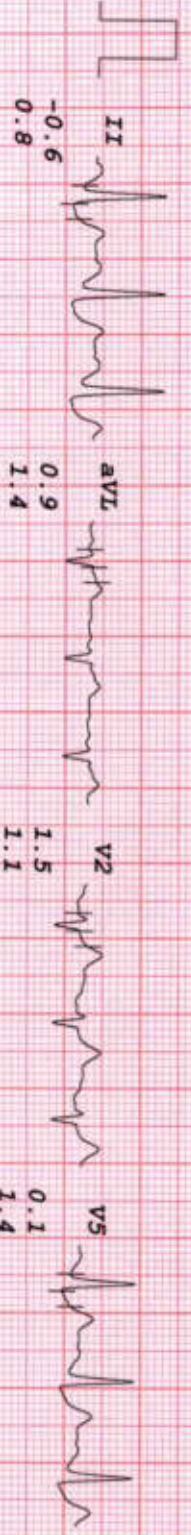
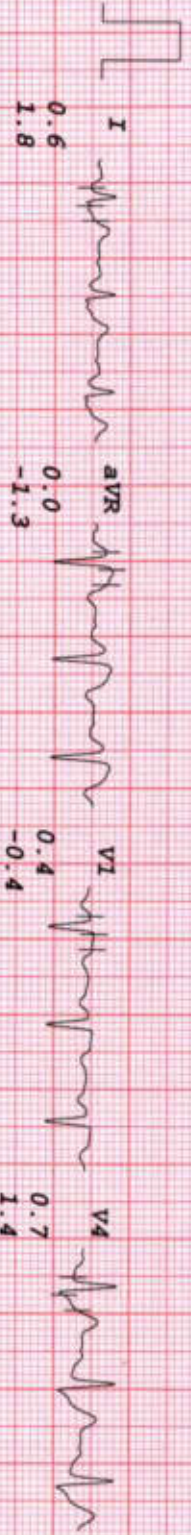
Bruce
RECOVERY
TOTAL TIME 7:10
PHASE TIME 1:00

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAL

Mag. X 2

III



HEALTHCARE BORIVALLI

MRS JYOTI SARAVANAN

I.D. 1201
Age 51/F
Date 14/05/2024

RATE 97bpm
R.P. 140/80

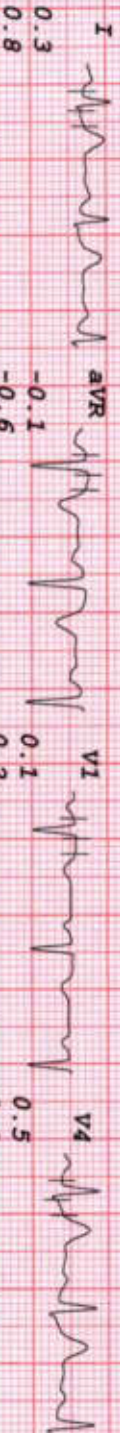
Brice
RECOVERY
TOTAL TIME 8:12
PHASE TIME 2:02

ST @ 10mm/mV
80ms PostJ

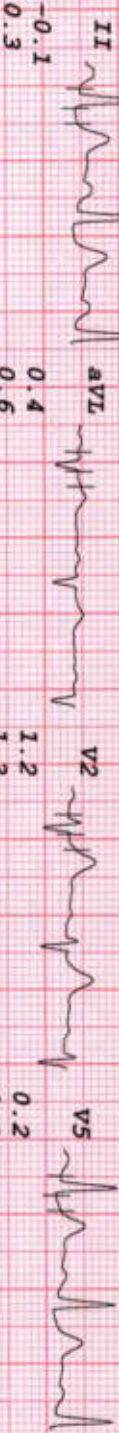
LINKED MEDIAN

Mag. X 2

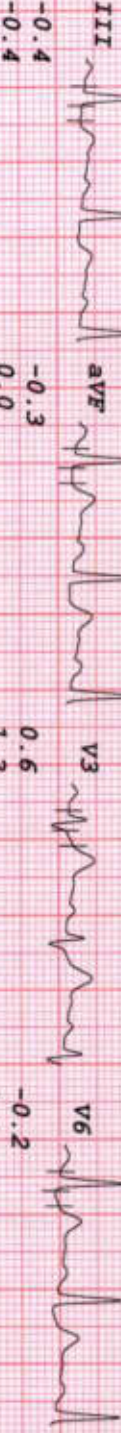
V1



V1 0.1
V4 0.5
V2 1.2
V5 0.2

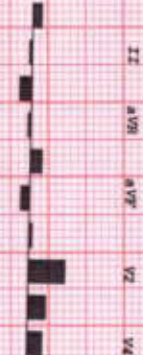


V2 1.2
V5 0.2



V3 0.6
V6 -0.2
V4 1.3
V5 1.1

0.1
0.2



HEALTHCARE BORIVALLI

MRS JYOTI SARAVANAN
I.D. 1201
Age 51/F
Date 14/05/2024

RATE 93bpm
B.P. 140/80

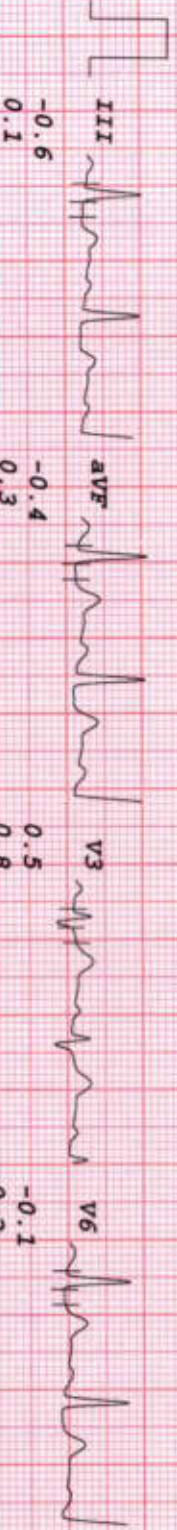
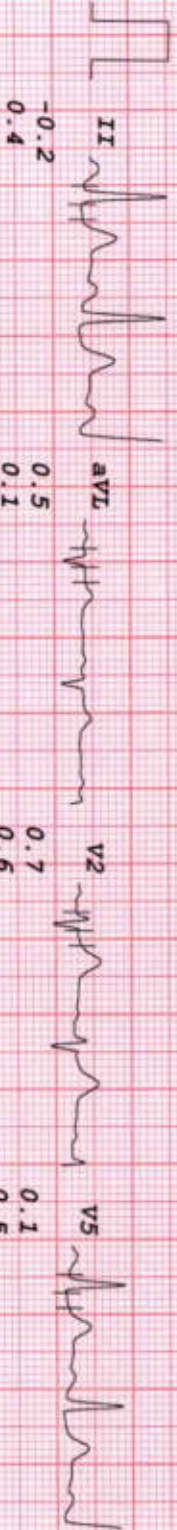
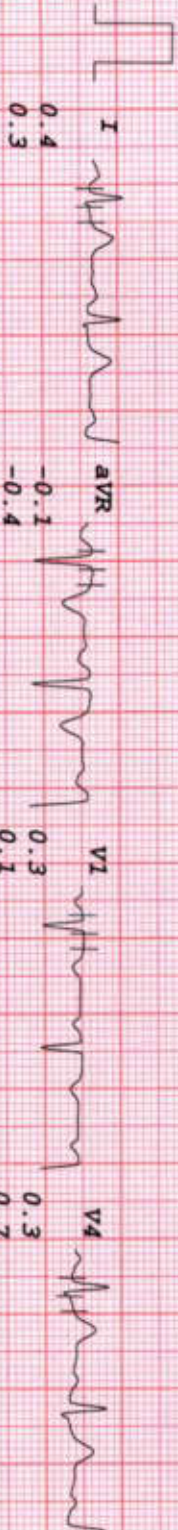
Bruce
RECOVERY
TOTAL TIME 9:05
PHASE TIME 2:55

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAL

Mag. X 2

V1



I III aVR aVF V1 V3 V5

II aVL aVF V2 V4