



LABORATORY REPORT

Name : Mrs. Nilam G Chaudhari
Sex/Age : Female/40 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 403100655
Reg. Date : 09-Mar-2024 09:32 AM
Collected On :
Report Date : 09-Mar-2024 04:20 PM

Medical Summary

GENERAL EXAMINATION

Height (cms) : 160

Weight (kgs) :63.8

Blood Pressure : 128/88mmHg

Pulse :67 /Min

No Clubbing/Cynosis/Pallor/Pedel Oedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

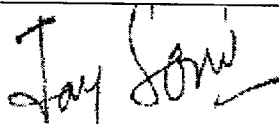
Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy – N/A



This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE

DR. MUKESH LADDHA

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ભારત સરકાર
Unique Identification Authority of India

નામીકરણ ક્રમ સંખ્યા/ Enrolment No.: 1408/30085/28896

To
નીલમ ગુમાનસિંહ ચૌધરી
Nilam Gumansinh Chaudhari
D/O: Gumansinh Chaudhari
Panwadi vyara
49 indraprasth Society
Vyara
Vyara
Tapi Gujarat - 394650
9825899190

Download Date: 01/03/2018

Generation Date: 28/11/2011

Signature Not Verified
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA
Date: 28/11/2011 15:53:48
BT



તમારો આધાર નંબર / Your Aadhaar No. :

4171 4174 7637

મારો આધાર, મારી ઓળખ

સૂચના

- આધાર ઓળખાણનું પ્રમાણ છે, નાગરિકતાનું નહિ.
- ઓળખાણનું પ્રમાણ ઓનલાઇન ઓથેન્ટિકેશન દ્વારા પ્રાપ્ત કરો.
- આ ઇલેક્ટ્રોનિક પ્રક્રિયા દ્વારા બનાવેલા દસ્તાવેજ છે.

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

- આધાર દેશભરમાં માન્ય છે.
- આધાર ભવિષ્યમાં સરકારી અને બિન-સરકારી સેવાઓનો લાભ મેળવવામાં ઉપયોગી યશે.
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.



ભારત સરકાર
Government of India



નીલમ ગુમાનસિંહ ચૌધરી
Nilam Gumansinh Chaudhari
જન્મ તારીખ/DOB: 13/09/1983
સ્ત્રી/ FEMALE

4171 4174 7637

મારો આધાર, મારી ઓળખ



ભારતીય ઓળખાણ અધિકારકર્તા
Unique Identification Authority of India

Address:
D/O: Gumansinh Chaudhari, 49
indraprasth Society, Panwadi vyara,
Vyara, Tapi,
Gujarat - 394650

સરનામું :
ની પુત્રી: ગુમાનસિંહ ચૌધરી, 49 ઇન્દ્રપ્રસ્થ
સોસાયટી, પાનવાડી વ્યારા, વ્યારા, તાપી,
ગુજરાત - 394650

4171 4174 7637



NG

9898410375

Dr. Jay Soni
M.D. (General Medicine)
Reg. No. : G-23899



बिना शुल्क सेवा
बिना शुल्क सेवा

पिता जगदीश चारी
NILAM GUMANSINH CHAUDHARI

सं. नं. 99947

SP

पुस्तक




TEST REPORT

Reg. No : 403100655	Ref Id :	Collected On : 09-Mar-2024 09:33 AM
Name : Mrs. Nilam G Chaudhari		Reg. Date : 09-Mar-2024 09:32 AM
Age/Sex : 40 Years / Female	Pass. No. :	Tele No. : 9898410375
Ref. By :		Dispatch At :
Sample Type : EDTA		Location : CHPL

Parameter	Results	Unit	Biological Ref. Interval
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COMPLETE BLOOD COUNT (CBC)

Hemoglobin (Colorimetric method)	13.3	g/dL	12.5 - 16
Hematocrit (Calculated)	43.10	%	40 - 50
RBC Count (Electrical Impedance)	H 5.81	million/cmm	4.73 - 5.5
MCV (Calculated)	L 74.1	fL	83 - 101
MCH (Calculated)	L 22.9	Pg	27 - 32
MCHC (Calculated)	L 30.9	%	31.5 - 34.5
RDW (Calculated)	13.1	%	11.5 - 14.5
WBC Count Flowcytometry with manual Microscopy	7850	/cmm	4000 - 10000
MPV (Calculated)	10.1	fL	6.5 - 12.0

DIFFERENTIAL WBC COUNT	[%]	EXPECTED VALUES	[Abs]	EXPECTED VALUES
Neutrophils (%)	58	% 40 - 80	4553 /cmm	2000 - 7000
Lymphocytes (%)	30	% 20 - 40	2355 /cmm	1000 - 3000
Eosinophils (%)	02	% 0 - 6	785 /cmm	200 - 1000
Monocytes (%)	10	% 2 - 10	157 /cmm	20 - 500
Basophils (%)	0	% 0 - 2	0 /cmm	0 - 100

PERIPHERAL SMEAR STUDY


RBC Morphology : Normocytic and Normochromic.
 WBC Morphology : Normal

PLATELET COUNTS

Platelet Count (Electrical Impedance) : 356000 /cmm 150000 - 450000
Electrical Impedance
 Platelets : Platelets are adequate with normal morphology.
 Parasites : Malarial parasite is not detected.
 Comment : -

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* This test has been out sourced.

Approved By : 
 Dr. Purvish Darji
 MD (Pathology)

Approved On : 09-Mar-2024 10:09 AM
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Sample Type : EDTA		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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HEMATOLOGY

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Forward Reverse Tube Agglutination

ABO "O"

Rh (D) Positive

Note -

ERYTHROCYTE SEDIMENTATION RATE [ESR]


ESR 1 hour 07 mm/hr ESR AT 1 hour : 3-12
Westergreen method

ERYTHRO SEDIMENTATION RATE, BLOOD -

Erythrocyte sedimentation rate (ESR) is a non-specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants. The ESR is increased in pregnancy from about the 3rd month and returns to normal by the 4th week post partum. ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives). It is especially low (<1mm) in polycythaemia, hypofibrinogenemia or congestive cardiac failure and when there are abnormalities of the red cells such as poikilocytosis, spherocytosis or sickle cells.

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Dr. Purvish Darji
MD (Pathology)

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Age/Sex : 40 Years / Female	Pass. No. :	Tele No. : 9898410375
Ref. By :		Dispatch At :
Sample Type : Serum,Flouride PP		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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BIO - CHEMISTRY

Fasting Blood Sugar (FBS) <i>GOD-POD Method</i>	103.10	mg/dL	70 - 110
Post Prandial Blood Sugar (PPBS) <i>GOD-POD Method</i>	113.6	mg/dL	70 - 140

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Age/Sex : 40 Years / Female	Pass. No. :	Tele No. : 9898410375
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL


Parameter	Result	Unit	Biological Ref. Interval
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Lipid Profile

Cholesterol	195.00	mg/dL	Desirable: <200.0 Borderline High: 200-239 High: >240.0
<i>Enzymatic, colorimetric method</i>			
Triglyceride	112.60	mg/dL	Normal: <150.0 Borderline: 150-199 High: 200-499 Very High : > 500.0
<i>Enzymatic, colorimetric method</i>			
HDL Cholesterol	26.80	mg/dL	Low: <40 High: >60
<i>Accelerator selective detergent method</i>			
LDL	145.68	mg/dL	Optimal: <100.0 Near Optimal: 100-129 Borderline High: 130-159 High : 160-189 Very High : >190.0
<i>Calculated</i>			
VLDL	22.52	mg/dL	15 - 35
<i>Calculated</i>			
LDL / HDL RATIO	5.44		0 - 3.5
<i>Calculated</i>			
Cholesterol /HDL Ratio	7.28		0 - 5.0
<i>Calculated</i>			

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Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL


Parameter	Result	Unit	Biological Ref. Interval
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LFT WITH GGT

Total Protein	7.79	gm/dL	1Day: 3.4-5.0 1Day to 1Month: 4.6-6.8 2 to 12Months: 4.8-7.6 ≥1Year : 6.0-8.0 Adults : 6.6-8.7
<i>Biuret Reaction</i>			
Albumin	4.71	g/dL	
<i>By Bromocresol Green</i>			
Globulin (Calculated)	3.08	g/dL	2.3 - 3.5
A/G Ratio (Calculated)	1.53		0.8 - 2.0
SGOT	22.10	U/L	0 - 40
<i>UV without P5P</i>			
SGPT	27.20	U/L	0 - 40
<i>UV without P5P</i>			
Alakaline Phosphatase	130.2	IU/l	42 - 98
<i>P-nitrophenyl phosphatase-AMP Buffer, Multiple-point rate</i>			
Total Bilirubin	0.43	mg/dL	0.3 - 1.2
<i>Vanadate Oxidation</i>			
Direct Bilirubin	0.10	mg/dL	0.0 - 0.4
<i>Vanadate Oxidation</i>			
Indirect Bilirubin	0.33	mg/dL	0.0 - 1.1
<i>Calculated</i>			
GGT	45.20	U/L	< 38
<i>SZASZ Method</i>			

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Age/Sex : 40 Years / Female **Pass. No.** : **Reg. Date** : 09-Mar-2024 09:32 AM
Ref. By : **Tele No.** : 9898410375
Sample Type : Serum **Dispatch At** :
Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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BIO - CHEMISTRY

Uric Acid <i>Enzymatic, colorimetric method</i>	5.76	mg/dL	2.6 - 6.0
Creatinine <i>Enzymatic Method</i>	0.68	mg/dL	0.6 - 1.1
BUN <i>UV Method</i>	7.60	mg/dL	6.0 - 20.0

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Ref. By :		Dispatch At :
Sample Type : EDTA		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

*Hb A1C	5.4	% of Total Hb	Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : 6.5 % or higher
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Boronate Affinity with Fluorescent Quenching

Mean Blood Glucose	108.28	mg/dL
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Calculated
Degree of Glucose Control Normal Range:

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

* Some danger of hypoglycemic reaction in Type I diabetics.

* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

EXPLANATION :-

*Total haemoglobin A1 c is continuously synthesised in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.


*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

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 Dr. Purvish Darji
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Approved On : 09-Mar-2024 04:39 PM

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**TEST REPORT**

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Age/Sex : 40 Years / Female	Pass. No. :	Tele No. : 9898410375
Ref. By :		Dispatch At :
Sample Type : Urine Spot		Location : CHPL

Test	Result	Unit	Biological Ref. Interval
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URINE ROUTINE EXAMINATION**PHYSICAL EXAMINATION**

Quantity	20 cc	
Colour	Pale Yellow	
Clarity	Clear	Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)


pH	6.0	4.6 - 8.0
Sp. Gravity	1.025	1.001 - 1.035
Protein	Nil	Nil
Glucose	Nil	Nil
Ketone Bodies	Nil	Nil
Urobilinogen	Nil	Nil
Bilirubin	Nil	
Nitrite	Nil	Nil
Blood	Trace	Nil

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	1 - 2/hpf	Nil
Erythrocytes (Red Cells)	3 - 5/hpf	Nil
Epithelial Cells	Occasional	Nil
Crystals	Absent	Absent
Casts	Absent	Absent
Amorphous Material	Absent	Absent
Bacteria	Absent	Absent
Remarks	-	

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Dr. Purvish Darji
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Age/Sex : 40 Years / Female	Pass. No. :	Tele No. : 9898410375
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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IMMUNOLOGY

THYROID FUNCTION TEST

T3 (Triiodothyronine) <small>CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY</small>	1.02	ng/mL	0.86 - 1.92
-------------------------------------------------------------------------------------------	------	-------	-------------

Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus.

In the circulation, 99.7% of T3 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.

In hypothyroidism and hyperthyroidism, F T3 (free T3) levels parallel changes in total T3 levels. Measuring F T3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

T4 (Thyroxine) <small>CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY</small>	8.20	µg/dL	3.2 - 12.6
-----------------------------------------------------------------------------------	------	-------	------------

Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus. In the circulation, 99.95% of T4 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to triiodothyronine (T3).


In hypothyroidism and hyperthyroidism, F T4 (free T4) levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

1. The anticonvulsant drug phenytoin may interfere with total and F T4 levels due to competition for TBG binding sites.
2. F T4 values may be decreased in patients taking carbamazepine.
3. Thyroid autoantibodies in human serum may interfere and cause falsely elevated F T4 results.

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Sample Type : Serum		Location : CHPL

TSH 3.230 μ IU/ml 0.35 - 5.50
CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

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-releasing 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 μ IU/mL

Second Trimester : 0.2 to 3.0 μ IU/mL


Third trimester : 0.3 to 3.0 μ IU/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 -----

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Sex/Age : Female/40 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 403100655
Reg. Date : 09-Mar-2024 09:32 AM
Collected On :
Report Date : 09-Mar-2024 03:47 PM

Electrocardiogram

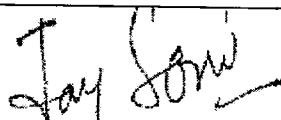
Findings

Normal Sinus Rhythm.

Within Normal Limit.



This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE

DR. MUKESH LADDHA

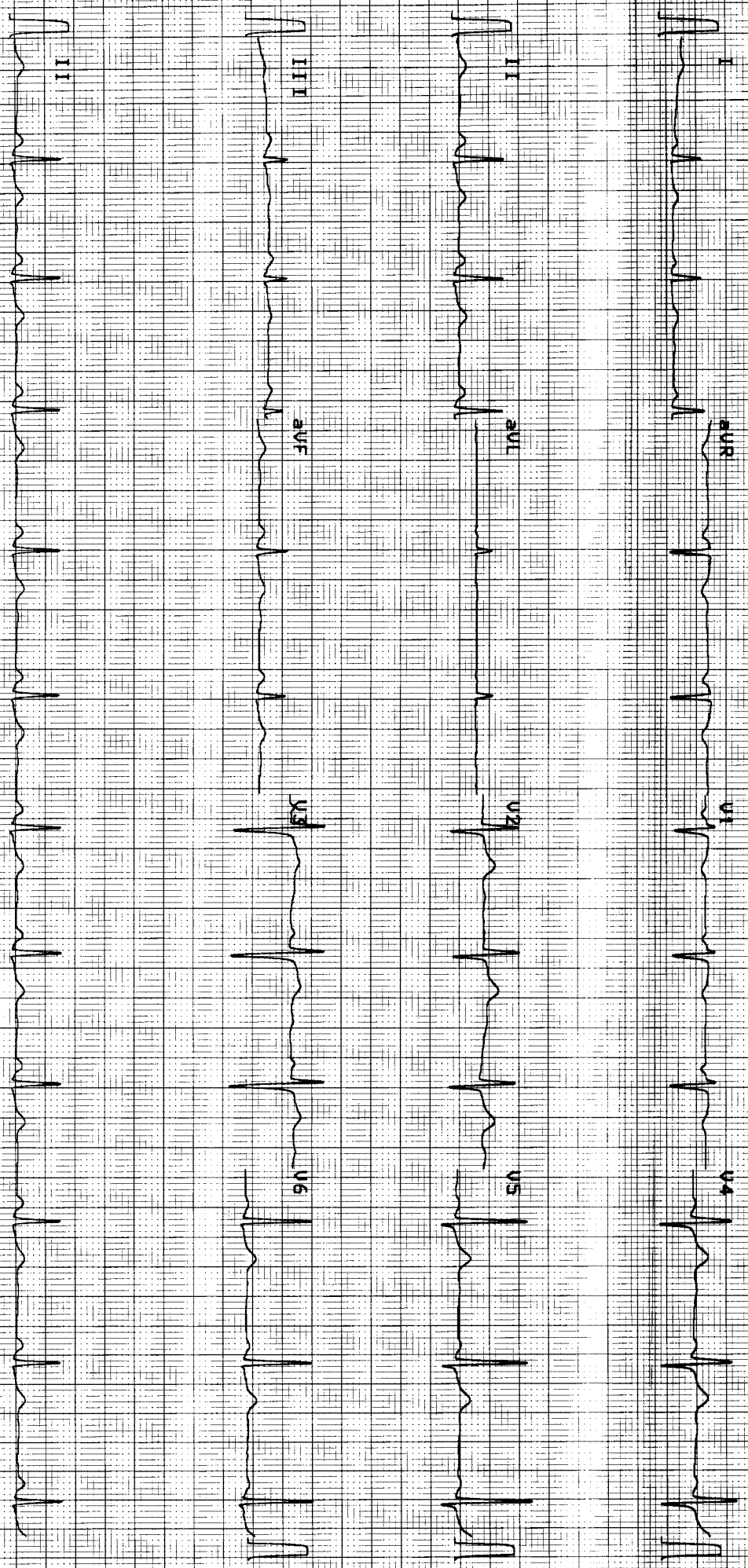
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NILM
 CHRUOHARI
 18
 Female
 40 years / 64 kg
 150 cm

HR 67/min
 RR 93/ms
 P 108 ms
 PR 138 ms
 QR5 76 ms
 QT 370 ms
 QTc 394 ms
 (Bazett)

Axis: P 54°
 QR5 47°
 T 51°

P (II) 0.13 mV
 S (V1) -0.78 mV
 R (V5) 1.52 mV
 Sokol. 2.30 mV



10 mm/mV

10 mm/mV

25 mm/s

CURVVIS HEALTHCARE

RT 102P 1.23.0

SCHILLER

Part No.2.157017M

CE 0123

R.88



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Client Name : Mediwheel	Report Date : 09-Mar-2024 04:46 PM

X RAY CHEST PA

Both lung fields appear clear.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

COMMENT: No significant abnormality is detected.

This is an electronically authenticated report



DR DHAIVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494





R

NILAM CHAUDHARI 40Y/F

09/03/2024

CUROVIS HEALTHCARE



LABORATORY REPORT

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Ref. By :
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USG ABDOMEN

Liver appears normal in size & in echogenicity. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic biliary or portal radicals. PV is normal in caliber.

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & echopattern.

Both kidneys are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass on either side.

Urinary bladder is partially distended. No evidence of calculus or mass lesion.

Uterus appears normal. No adnexal mass is seen.

No evidence of ascites.

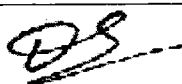
No evidence of lymph adenopathy.

No evidence of dilated small bowel loops.

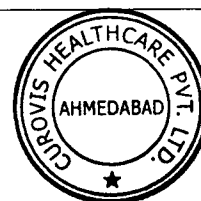
COMMENTS :

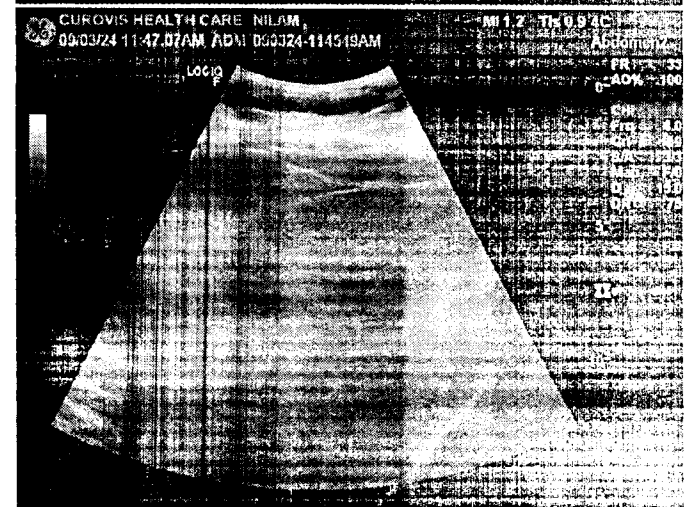
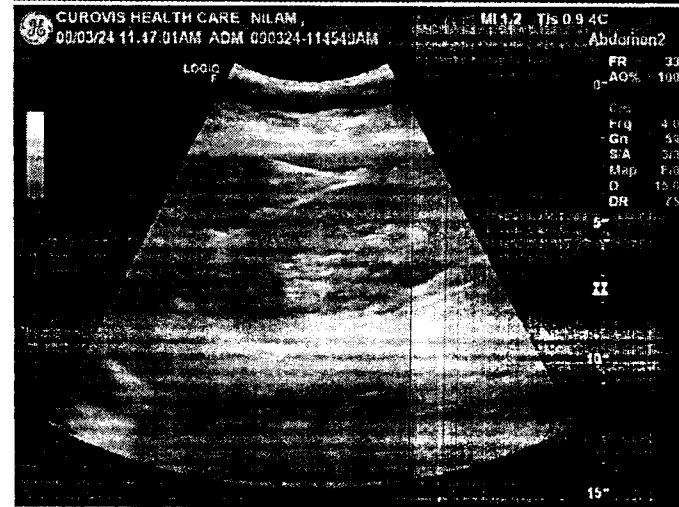
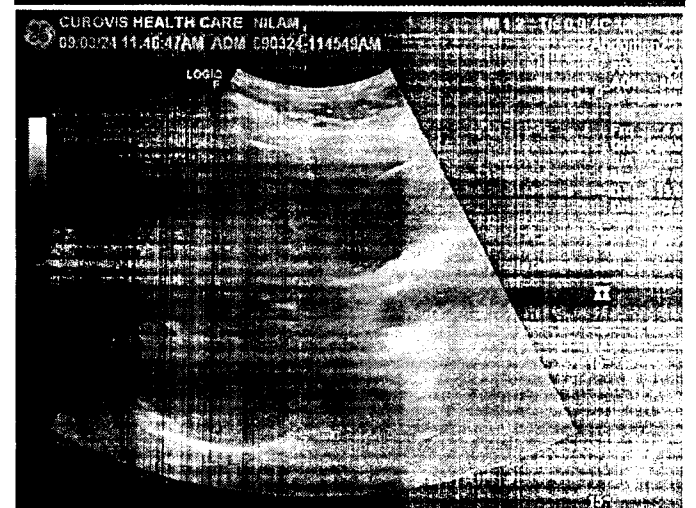
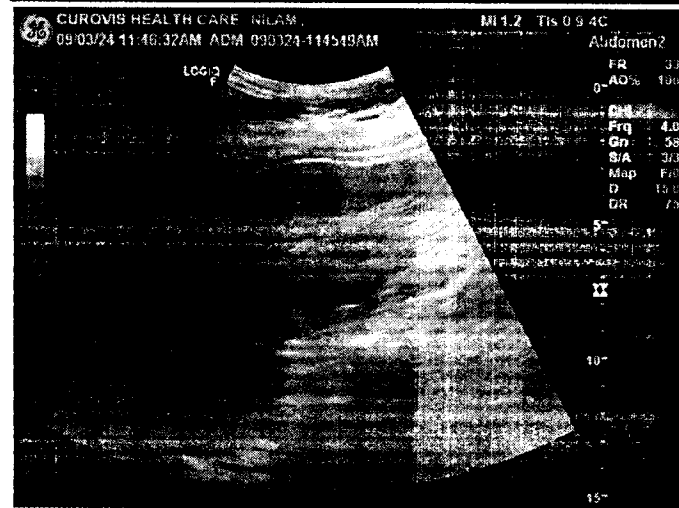
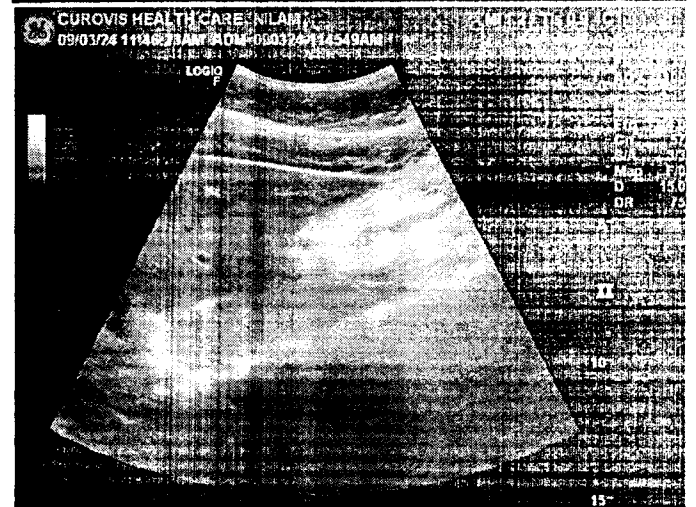
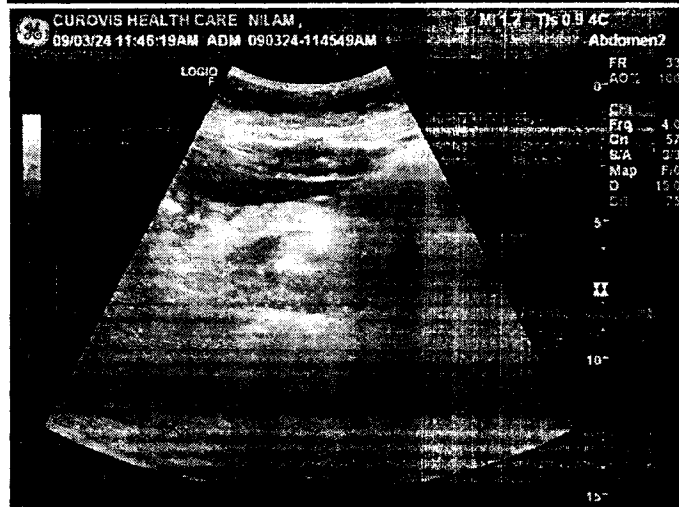
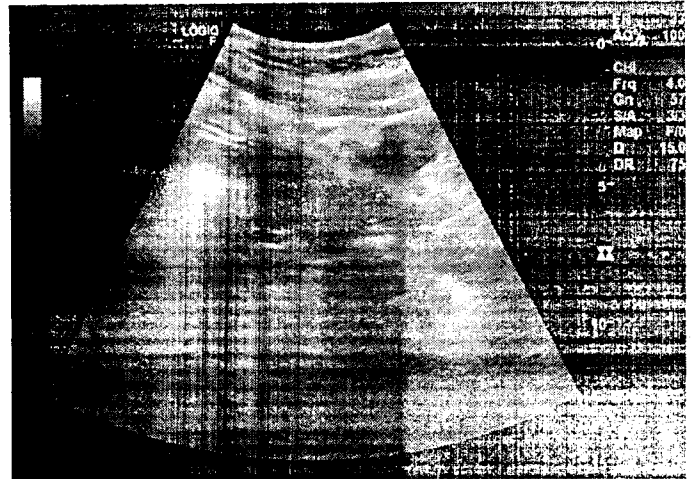
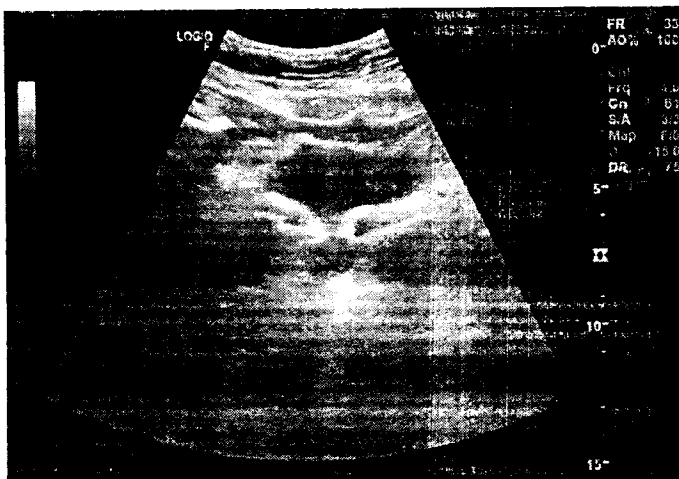
NO SIGNIFICANT ABNORMALITY DETECTED.

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494





NILAM 090324-114549AM

09/03/2024

CUROVIS HEALTH CARE



LABORATORY REPORT

Name :	Mrs. Nilam G Chaudhari	Reg. No :	403100655
Sex/Age :	Female/40 Years	Reg. Date :	09-Mar-2024 09:32 AM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	09-Mar-2024 04:47 PM

BILATERAL MAMMOGRAM :-

(Dedicated digital mammography with Craniocaudal and media lateral oblique view was performed.)

- Normal fibroglandular breast parenchyma is noted in breast on either side.
- No evidence of clustered micro calcification.
- No evidence of mass or architectural distortion is seen.
- No evidence of skin thickening or nipple retraction is seen.
- No evidence of axillary lymphadenopathy.

COMMENT :

- **No significant abnormality detected. (BIRADS - I).**
- **No direct or indirect sign of malignancy seen.**

BIRADS Categories:

- 0 Need imaging evaluation.
- I Negative
- II Benign finding
- III probably benign finding.
- IV Suspicious abnormality.
- V Highly suggestive of malignancy.

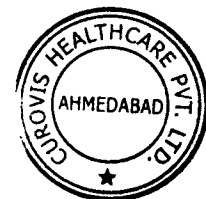
The false negative mammography is approximately 10%. Management of a palpable abnormality must be based upon clinical grounds.

----- End Of Report -----

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494



L-CC

R-CC

L-MLO

R-MLO

NILAM CHAUDHARI 40Y/F

09/03/2024

CUROVIS HEALTHCARE



LABORATORY REPORT

Name : Mrs. Nilam G Chaudhari
 Sex/Age : Female/40 Years
 Ref. By :
 Client Name : Mediwheel

Reg. No : 403100655
 Reg. Date : 09-Mar-2024 09:32 AM
 Collected On :
 Report Date : 09-Mar-2024 02:06 PM

Eye Check - Up

No Eye Complaints

RIGHT EYE

SP: -1.00

CY: -0.50

AX: 23

LEFT EYE

SP : -1.00

CY : -0.50

AX :163

	Without Glasses	With Glasses
Right Eye	6/5	N.A
Left Eye	6/5	N.A

Near Vision: Right Eye - N/6, Left Eye - N/6

Fundus Examination - Within Normal Limits.

ColorVision : Normal


Comments: Normal

----- End Of Report -----

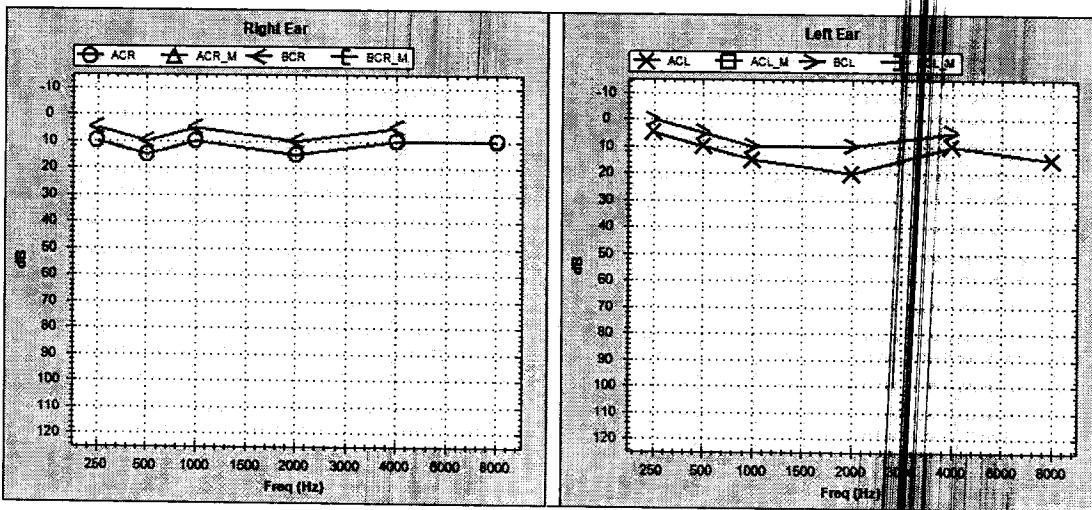


This is an electronically authenticated report

Dr. Jay Soni
 M.D, GENERAL MEDICINE

		LABORATORY REPORT	
Name :	Mrs. Nilam G Chaudhari	Reg. No :	403100655
Sex/Age :	Female/40 Years	Reg. Date :	09-Mar-2024 09:32 AM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	09-Mar-2024 02:06 PM

AUDIOGRAM



EAR	MODE	Air Conduction		Bone Conduction		Colour Code
		Masked	UnMasked	Masked	UnMasked	
LEFT		□	×	◁	▷	Blue
RIGHT		△	○	◁	▷	Red

NO RESPONSE : Add ↓ below the respective symbols

Threshold in dB	RIGHT	LEFT
AIR CONDUCTION	10.5	10.5
BONE CONDUCTION		
SPEECH		

Comments: -Bilateral Hearing Sensitivity Within Normal Limits

----- End Of Report -----



This is an electronically authenticated report

Jay Soni

Dr. Jay Soni
M.D., GENERAL MEDICINE

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