

Dr. Vimmi Goel  
MBBS, MD (Internal Medicine)  
Sr. Consultant Non Invasive Cardiology  
Reg. No: MMC- 2014/01/0113

Preventive Health Check up  
KIMS Kingsway Hospitals  
Nagpur  
Phone No.: 7499913052

 **KIMS-KINGSWAY  
HOSPITALS**

Name: Mrs. Anuja Nagpure. Date: 13/01/24

Age: 36y Sex: MF Weight: 60.7 kg Height: 157.6 inc BMI: \_\_\_\_\_

BP: 110/70 mmHg Pulse: 63 bpm RBS: \_\_\_\_\_ mg/dl

SpO<sub>2</sub> - 100%

LMP - 10/01/24

Dr. Rahul Atara  
BDS, MDS (Endodontics)  
Sr. Consultant Dental Surgeon  
Reg. No. A-16347

 **KIMS-KINGSWAY  
HOSPITALS**

Name: Mrs Aranya Naypure Date: 13.01.24

Age: 36-ya Sex: M/F Weight: \_\_\_\_\_ kg Height: \_\_\_\_\_ inc BMI: \_\_\_\_\_

BP: \_\_\_\_\_ mmHg Pulse: \_\_\_\_\_ bpm RBS: \_\_\_\_\_ mg/dl

O/E Deep caries to

TOPA done to

Apr. Rec to

Vishu



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mrs. ANUJA NAGPURE	<b>Age / Gender</b> : 36 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324069415/UMR2324033713	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 13-Jan-24 08:29 am	<b>Report Date</b> : 13-Jan-24 10:29 am

**HAEMOGRAM**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	<b>11.5</b>	12.0 - 15.0 gm%	Photometric
Haematocrit(PCV)		37.7	36.0 - 46.0 %	Calculated
RBC Count		<b>6.05</b>	3.8 - 4.8 Millions/cumm	Photometric
Mean Cell Volume (MCV)		<b>62</b>	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		<b>19.0</b>	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		<b>30.5</b>	31.5 - 35.0 g/l	Calculated
RDW		<b>20.7</b>		
Platelet count		226	11.5 - 14.0 %	Calculated
WBC Count		6600	150 - 450 10 <sup>3</sup> /cumm	Impedance
<b><u>DIFFERENTIAL COUNT</u></b>				
Neutrophils		61.3	4000 - 11000 cells/cumm	Impedance
Lymphocytes		30.6	50 - 70 %	Flow Cytometry/Light microscopy
Eosinophils		3.4	20 - 40 %	Flow Cytometry/Light microscopy
Monocytes		4.7	1 - 6 %	Flow Cytometry/Light microscopy
Basophils		0.0	2 - 10 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count		4045.8	0 - 1 %	Flow Cytometry/Light microscopy
			2000 - 7000 /cumm	Calculated



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<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Lymphocyte Count		2019.6	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		224.4	20 - 500 /cumm	Calculated
Absolute Monocyte Count		310.2	200 - 1000 /cumm	Calculated
Absolute Basophil Count		0	0 - 100 /cumm	Calculated

**PERIPHERAL SMEAR**

Microcytosis	Microcytosis ++(11%-20%)		
Hypochromasia	Hypochromia ++(11%-20%)		
Anisocytosis	Anisocytosis ++(11%-20%)		
Target Cells	+		
WBC	As Above		
Platelets	Adequate		
<b>ESR</b>	11	0 - 20 mm/hr	Automated Westergren's Method
Comment	Mentzer Index: 10.2 Advise HPLC to rule out hemoglobinopathy. *** End Of Report ***		

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100245

Test results related only to the item tested.

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**Dr. VAIDEHEE NAIK, MBBS,MD**  
**CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. ANUJA NAGPURE	<b>Age / Gender</b> : 36 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324069415/UMR2324033713	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 13-Jan-24 08:27 am	<b>Report Date</b> : 13-Jan-24 10:12 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	86	< 100 mg/dl	GOD/POD, Colorimetric
Post Prandial Plasma Glucose		73	< 140 mg/dl	GOD/POD, Colorimetric
<b>GLYCOSYLATED HAEMOGLOBIN (HBA1C)</b>				
HbA1c		4.9	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC

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

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**Dr. VAIDEHEE NAIK, MBBS,MD**

**CONSULTANT PATHOLOGIST**

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Phone: +91 012 6789100

CIN: U74999MH2018PTC303510





**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. ANUJA NAGPURE	<b>Age /Gender</b> : 36 Y(s)/Female
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**LIPID PROFILE**

Parameter	Specimen	Results	Method
Total Cholesterol	Serum	149	Enzymatic(CHE/CHO/PO D)
Triglycerides		65	Enzymatic (Lipase/GK/GPO/POD)
HDL Cholesterol Direct		51	Phosphotungstic acid/mgcl-Enzymatic (microslide)
LDL Cholesterol Direct		78.42	Enzymatic
VLDL Cholesterol		13	Calculated
Tot Chol/HDL Ratio		3	Calculation

Initiate therapeutic	Consider Drug therapy	LDC-C
CHD OR CHD risk equivalent	>100	>130, optional at 100-129
Multiple major risk factors conferring 10 yrs CHD risk >20%		
Two or more additional major risk factors, 10 yrs CHD risk <20%	>130	10 yrs risk 10-20 % >130
No additional major risk or one additional major risk factor	>160	10 yrs risk <10% >160
		>190, optional at 160-189

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

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**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mrs. ANUJA NAGPURE

**Bill No/ UMR No** : BIL2324069415/UMR2324033713

**Received Dt** : 13-Jan-24 08:29 am

**Age /Gender** : 36 Y(s)/Female

**Referred By** : Dr. Vimmi Goel MBBS,MD

**Report Date** : 13-Jan-24 10:12 am

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
<b>RFT</b>				
Blood Urea	Serum	7	15.0 - 36.0 mg/dl	Urease with indicator dye
Creatinine		0.54	0.52 - 1.04 mg/dl	Enzymatic ( creatinine amidohydrolase)
GFR		122.3	>90 mL/min/1.73m square.	Calculation by CKD-EPI 2021
Sodium		145	136 - 145 mmol/L	Direct ion selective electrode
Potassium		4.49	3.5 - 5.1 mmol/L	Direct ion selective electrode
<b>THYROID PROFILE</b>				
<b>T3</b>		0.986	0.55 - 1.70 ng/ml	Enhanced chemiluminescence
<b>Free T4</b>		1.27	0.80 - 1.70 ng/dl	Enhanced Chemiluminescence
<b>TSH</b>		1.69	0.50 - 4.80 uIU/ml	Enhanced chemiluminescence

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

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**CONSULTANT PATHOLOGIST**

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**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. ANUJA NAGPURE	<b>Age / Gender</b> : 36 Y(s)/Female
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<b>Received Dt</b> : 13-Jan-24 08:29 am	<b>Report Date</b> : 13-Jan-24 10:12 am

**LIVER FUNCTION TEST(LFT)**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Total Bilirubin	Serum	0.47	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin		0.26	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.21	0.1 - 1.1 mg/dl	Dual wavelength spectrophotometric pNPP/AMP buffer
Alkaline Phosphatase		78	38 - 126 U/L	Kinetic with pyridoxal 5 phosphate
SGPT/ALT		13	13 - 45 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		21	13 - 35 U/L	Biuret (Alkaline cupric sulphate)
Serum Total Protein		8.17	6.3 - 8.2 gm/dl	Bromocresol green Dye Binding
Albumin Serum		4.51	3.5 - 5.0 gm/dl	Calculated
Globulin		3.66	2.0 - 4.0 gm/dl	
A/G Ratio		1.23		

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

Suggested Clinical Correlation \* If necessary, Please discuss

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CONSULTANT PATHOLOGIST**





**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mrs. ANUJA NAGPURE	<b>Age / Gender</b> : 36 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324069415/UMR2324033713	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 13-Jan-24 08:37 am	<b>Report Date</b> : 13-Jan-24 11:43 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
<b>URINE MICROSCOPY</b>			
<b>PHYSICAL EXAMINATION</b>			
Volume	Urine	30 ml	
Colour.		Pale yellow	
Appearance		Clear	Clear
<b>CHEMICAL EXAMINATION</b>			
Reaction (pH)	Urine	6.5	4.6 - 8.0
Specific gravity		1.005	1.005 - 1.025
Urine Protein		Negative	Negative
Sugar		Negative	Negative
Bilirubin		Negative	Negative
Ketone Bodies		Negative	Negative
Nitrate		Negative	Negative
Urobilinogen		Normal	Normal
<b>MICROSCOPIC EXAMINATION</b>			
Epithelial Cells	Urine	0-1	0 - 4 /hpf
R.B.C.		0-1	0 - 4 /hpf
Pus Cells		0-1	0 - 4 /hpf
Casts		Absent	Absent
Crystals		Absent	Absent
<b>USF(URINE SUGAR FASTING)</b>			
Urine Glucose	Urine	Negative	STRIP

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

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Suggested Clinical Correlation \* If necessary, Please discuss

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF IMMUNO HAEMATOLOGY**

<b>Patient Name</b> : Mrs. ANUJA NAGPURE	<b>Age / Gender</b> : 36 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324069415/UMR2324033713	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 13-Jan-24 08:29 am	<b>Report Date</b> : 13-Jan-24 11:15 am

**BLOOD GROUPING AND RH**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	
BLOOD GROUP.	EDTA Whole Blood & Plasma/ Serum	" B "	Gel Card Method
Rh (D) Typing.		" Positive "(+Ve)	
		*** End Of Report ***	

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. VAIDEHEE NAIK, MBBS,MD**  
**CONSULTANT PATHOLOGIST**

**DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE**

NAME	ANUJA NAGPURE	STUDY DATE	13-01-2024 09:39:45
AGE/ SEX	36Y 3M5D / F	HOSPITAL NO.	UMR2324033713
ACCESSION NO.	BIL2324069415-10	MODALITY	DX
REPORTED ON	13-01-2024 12:23	REFERRED BY	Dr. Vimmi Goel

**X-RAY CHEST PA VIEW**

Both the lung fields are clear.

Heart and Aorta are normal

GA Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

**IMPRESSION:**

No pleuro-parenchymal abnormality seen.



**DR R.R KHANDELWAL**

**SENIOR CONSULTANT**

**MD, RADIODIAGNOSIS [MMC-55870]**

PATIENT NAME:	MRS. ANUJA NAGPURE	AGE /SEX:	36 YRS/F
UMR NO:	2324033713	BILL NO:	2324069415
REF BY	DR. VIMMI GOEL	DATE:	13/01/2024

USG WHOLE ABDOMEN

LIVER is normal in size, shape and shows normal echotexture.  
No evidence of any focal lesion seen. Intrahepatic biliary 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.

PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in shape, size and echotexture. No focal lesion seen.

Both KIDNEYS are normal in shape, size and echotexture.

Left renal pelvis slightly dilated.

No evidence of calculus or hydronephrosis seen.

URETERS are not dilated.

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

Uterus is anteverted and normal.

No focal myometrial lesion seen.

Endometrial echo-complex appear normal.

No adnexal mass lesion seen.

There is no free fluid or abdominal lymphadenopathy seen.

**IMPRESSION -**

No significant abnormality seen.

Suggest clinical correlation / further evaluation.



**DR. R.R. KHANDELWAL**  
**SENIOR CONSULTANT**  
**MD RADIO DIAGNOSIS [MMC-55870]**



Kingsway Hospitals  
24 Kingsway, Mohan Nagar,  
Near Kasturchand Park, Nagpur

Station  
Telephone: ..

### EXERCISE STRESS TEST REPORT

Patient Name: Mrs. Anuja , Nagpure  
Patient ID: 033713  
Height:  
Weight:  
Study Date: 13.01.2024  
Test Type: Treadmill Stress Test  
Protocol: BRUCE

DOB: 09.10.1987  
Age: 36yrs  
Gender: Female  
Race: Indian  
Referring Physician: Mediwheel HCU  
Attending Physician: Dr. Vimmi Goel  
Technician: --

Medications:  
--

Medical History:  
NIL

Reason for Exercise Test:  
Screening for CAD

#### Exercise Test Summary:

Case Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	01:29	0.00	0.00	61	120/80	
	WARM-UP	00:26	0.00	0.00	77		
EXERCISE	STAGE 1	03:00	1.70	10.00	108	120/80	
	STAGE 2	03:00	2.50	12.00	155	130/80	
	STAGE 3	01:30	3.40	14.00	176		
RECOVERY		01:00	0.00	0.00	133		
		02:00	0.00	0.00	94	130/80	
		01:09	0.00	0.00		130/80	


The patient exercised according to the BRUCE for 7:30 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 63 bpm rose to a maximal heart rate of 179 bpm. This value represents 97 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 130/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

#### Interpretation:

Summary: Resting ECG: normal.  
Functional Capacity: normal.  
HR Response to Exercise: appropriate.  
BP Response to Exercise: normal resting BP - appropriate response.  
Chest Pain: none.  
Arrhythmias: none.  
ST Changes: Insignificant ST-T changes seen..  
Overall impression: Normal stress test.

#### Conclusions:

TMT is negative for inducible ischemia.  
Insignificant ST-T changes seen.

  
**Dr. VIMMI GOEL**  
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Reg. No: 20140170113



Rate 61  
PR 131  
QRSD 99  
QT 401  
QTc 404

- Sinus rhythm.....
- Multifocal ventricular premature complexes.....normal P axis, V-rate 50-99
- Low voltage, precordial leads.....short R-R, variable morphology
- Baseline wander in lead(s) V5.....precordial leads <1.0mv

FBC DEPT.

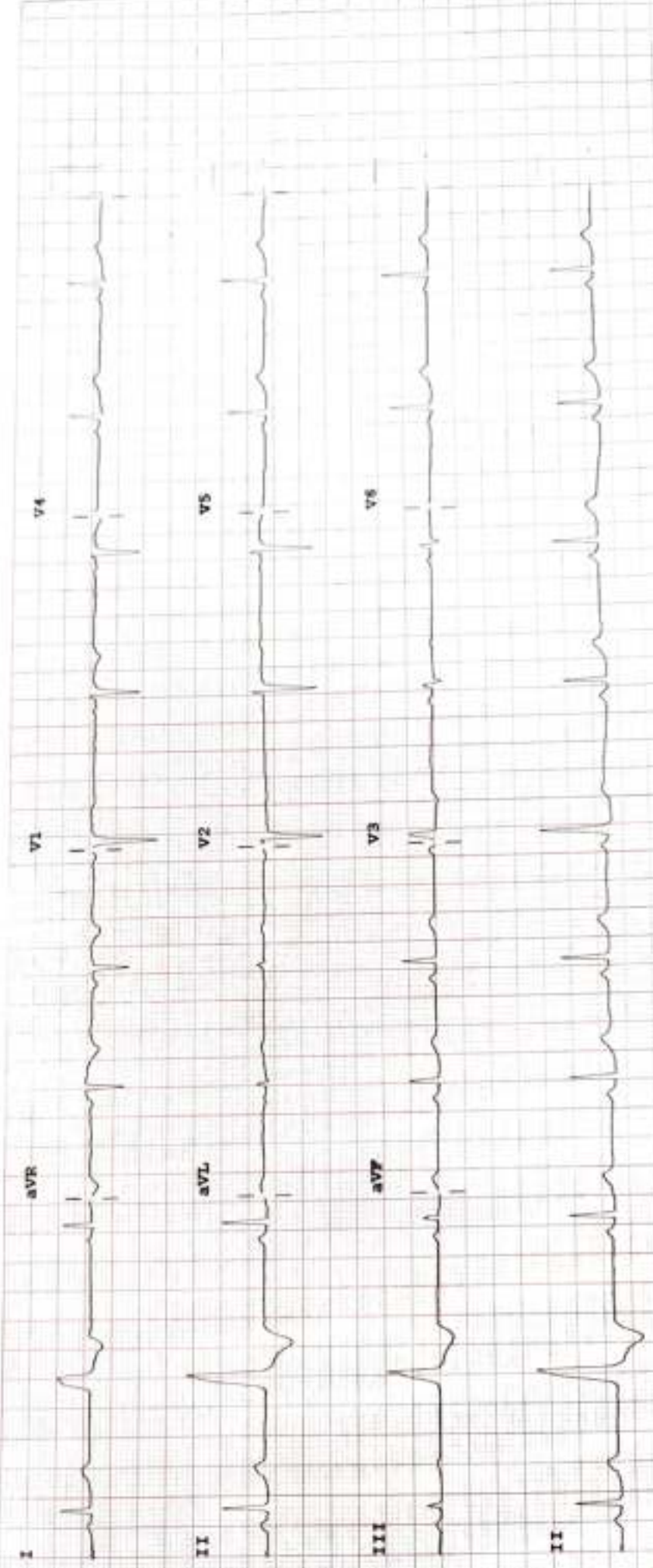
--AXIS--

P 63  
QRS 50  
T 42

12 Lead: Standard Placement

- ABNORMAL ECG -

Unconfirmed Diagnosis



Speed: 25 mm/sec  
Limb: 10 mm/mV  
Chest: 10.0 mm/mV

Device:

100B CL P7