



**Dept. of Radiology**  
(For Report Purpose Only)



REQ. DATE : 27-JAN-2024                      REP. DATE : 27-JAN-2024  
NAME : MRS. DIXIT HEMLATA CHITAMANI  
PATIENT CODE : 106388                      AGE/SEX : 38 YR(S) / FEMALE  
REFERRAL BY : HOSPITAL PATIENT

**CHEST X-RAY PA VIEW**

**OBSERVATION :**

Both lungs appear clear.

Heart and mediastinum are normal.

Diaphragm and both CP angles are normal.

Visualised bones & extra-thoracic soft tissues appear normal.

**IMPRESSION :**

**No significant abnormality noted in the present study.**

**-Kindly correlate clinically.**

**DR. SAURABH PATIL  
(MBBS, MD RADIOLOGY)  
CONSULTANT RADIOLOGIST**



## Dept. of Radiology

(For Report Purpose Only)

**AiMS**  
Hospital & Research Center  
Caring Redefined

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### BILATERAL SONOMAMMOGRAPHY

#### OBSERVATION:

##### RT. BREAST.

Fibro-glandular tissues appear normal.  
Skin and subcutaneous tissue appear normal.  
Nipple shows normal features.  
No significant axillary adenopathy.

##### LT. BREAST.

Fibro-glandular tissue appear normal.  
Skin and subcutaneous tissue appear normal.  
Nipple appear normal.  
No e/o axillary lymphadenopathy.

#### IMPRESSION :

No sonologically demonstrable focal breast lesion.

- Kindly correlate clinically.

  
Dr. SAURABH PATIL  
(MBBS, MD(RADIOLOGY))



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**USG ABDOMEN AND PELVIS**

**OBSERVATION :**

**Liver** : Is normal in size (12.3 cm), shape & echotexture. No focal lesion / IHBR dilatation.

**CBD / PV** : Normal.      **G.B.** : Moderately distended, normal.

**Spleen** : Is normal in size (9.2 cm), shape & echotexture. No focal lesion.

**Pancreas** : Normal in size, shape & echotexture.

**Both kidneys** are normal in size, shape & echotexture, CMD maintained. No calculus/ hydronephrosis / hydroureter on either side.

Right kidney measures : 9.9 x 3.7 cm.  
Left kidney measures : 10.0 x 4.5 cm.

**Urinary bladder** : Moderately distended, normal.

**Uterus** : Anteverted, normal in size (7.6 x 4.9 x 4.2 cms), shape, echotexture. No fibroid. Endometrium show normal appearance. ET = 8.1 mm.

**Both ovaries** : show normal features. Adnexa clear.

**Right ovary** : 3.1 x 1.5 cm  
**Left ovary** : 2.9 x 1.9 cm

No obvious demonstrable small bowel / RIF pathology.  
Normal Aorta, IVC, adrenals and other retroperitoneal structures.  
No ascites / lymphadenopathy / pleural effusion.

**IMPRESSION :**

**No significant abnormality noted in the present study.**

- Kindly co-relate clinically.

**Dr. SAURABH PATIL**  
(MBBS, MD(RADIOLOGY))



# Dept. of Pathology

(For Report Purpose Only)



PRN	: 106388	Lab No	: 11077
Patient Name	: Mrs. DIXIT HEMLATA CHITAMANI	Req.No	: 11077
Age/Sex	: 38Yr(s)/Female	Collection Date & Time	: 27/01/2024 09:48 AM
Company Name	: BANK OF BARODA	Reporting Date & Time	: 27/01/2024 02:04 PM
Referred By	: Dr.HOSPITAL PATIENT	Print Date & Time	: 27/01/2024 02:07 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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## HAEMATOLOGY

### BLOOD GROUP

BLOOD GROUP : "O"  
 RH FACTOR : NEGATIVE


**NOTE** : This is for your information only.  
 Kindly note that any blood or blood product transfusion or therapeutic intervention has to be done after confirmation of blood group by concerned authorities.  
 In infants (< 6 months age), please repeat Blood Group after 6 months of age for confirmation.

\*\*\*END OF REPORT\*\*\*



  
**Technician**

Report Type By :- PEERZADE SHOYEB

  
**Dr. AJAY A GANGSHETTIWAR**  
 M.D.(Pathology) R.No.080412  
**Pathologist**

For Free Home Collection Call : 9545200011

Aims Hospital And Research Center





Dept. of Pathology  
(For Report Purpose Only)



PRN : 106388  
Patient Name : Mrs. DIXIT HEMLATA CHITAMANI  
Age/Sex : 38Yr(s)/Female  
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HAEMATOLOGY

HAEMOGRAM

HAEMOGLOBIN (Hb)	: 10.5	GM/DL	Male : 13.5 - 18.0 Female : 11.5 - 16.5
PCV	: 34.7	%	Male : 40 - 54 Female : 37 - 47
RBC COUNT	: 4.61	Million/cu mm	Male : 4.5 - 6.5 Female : 3.9 - 5.6
M.C.V	: 75.3	cu micron	76 - 96
M.C.H.	: 22.8	pg	27 - 32
M.C.H.C	: 30.3	picograms	32 - 36
RDW-CV	: 16.5	%	11 - 16
WBC TOTAL COUNT	: 9080	/cumm	ADULT : 4000 - 11000 CHILD 1-7 DAYS : 8000 - 18000 CHILD 8-14 DAYS : 7800 - 16000 CHILD 1MONTH-<1YR : 4000 - 10000 150000 - 450000
PLATELET COUNT	: 419000	cumm	150000 - 450000
<u>WBC DIFFERENTIAL COUNT</u>			
NEUTROPHILS	: 59	%	ADULT : 40 - 70 CHILD : 20 - 40
ABSOLUTE NEUTROPHILS	: 5357.20	$\mu$ L	2000 - 7000
LYMPHOCYTES	: 32	%	ADULT : 20 - 40 CHILD : 40 - 70
ABSOLUTE LYMPHOCYTES	: 2905.60	$\mu$ L	1000 - 3000
EOSINOPHILS	: 06	%	01 - 04
ABSOLUTE EOSINOPHILS	: 544.80	$\mu$ L	20 - 500
MONOCYTES	: 03	%	02 - 08
ABSOLUTE MONOCYTES	: 272.40	$\mu$ L	200 - 1000
BASOPHILS	: 00	%	00 - 01
ABSOLUTE BASOPHILS	: 0	$\mu$ L	0 - 100

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AiMs Hospital And Research Center

S.No. 154 Near Aims Square, Aundh, Pune - 411 007. Tel.: 020 67400111 / 67400152 Mob.: 8975044444 | Website : www.aimspune.com



# Dept. of Pathology

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### PERIPHERAL BLOOD SMEAR

RBC MORPHOLOGY : Anisocytosis +, Normocytic with mild hypochromic, Microcytes +  
 WBC MORPHOLOGY : Within Normal Limits  
 PLATELETS : Adequate  
 PARASITES : Not Detected

Method : Processed on 5 Part Fully Automated Blood Cell Counter - sysmex XS-800i.

### ESR

ESR MM ( AT The End of 1 Hr.) By : 22 mm/hr  
 Westergren Method

Male : 0 - 15  
 Female : 0 - 20

\*\*\*END OF REPORT\*\*\*



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## ENDOCRINOLOGY

### TFT (THYROID FUNCTION TEST)

T3-Total (Tri iodothyronine)	: 1.66	ng/mL	0.80 - 2.00
T4 - Total (Thyroxin)	: 8.61	µg/dL	5.1 - 14.1
Thyroid Stimulating Hormones (Ultra TSH)	: 16.01	µIU/mL	0.27 - 4.20

Method :- serum by ECLIA

#### NOTE:-

Three common ways in which there may be inadequate amounts of the thyroid hormone for normal metabolism. Primary hypothyroidism, in which there is a raised TSH & a low T3. This is due to failure of the thyroid gland, possibly due to autoantibody disease, possibly due to toxic stress or possibly due to iodine deficiency. The second, the most common cause of thyroid failure, occurs at the pituitary level. In this condition there is inadequate thyroid stimulating hormone (TSH) produced from the pituitary and so one tends to see low or normal TSH, low T4s and variable T3s. This condition is most common in many patients with chronic fatigue syndrome, where there is a general suppression of the hypothalamic-pituitary-adrenal axis. The third type of under-functioning is due to poor conversion of there are normal or possibly slightly raised levels of TSH, normal levels of T4 but low levels of thyroid problem routinely TSH, a Free T4 and a Free T3 are also advisable. Any patients who are taking T3 as part of their thyroid supplement need to have their T3 levels monitored as well as T4. T3 is much more quickly metabolized than T4 and blood tests should be done between 4-6 hours after their morning dose.

The Guideline for pregnancy reference ranges for total T3, T4, Ultra TSH Level in pregnancy

	Total T3	Total T4	Ultra TSH
First Trimester	0.86 - 1.87	5.60 - 12.4	0.30 - 4.50
2 nd Trimester	1.0 - 2.60	5.60 - 15.5	0.50 - 4.60
3 rd Trimester	1.0 - 2.60	5.60 - 15.5	0.80 - 5.20

The guidelines for age related reference ranges for T3, T4, & Ultra TSH

	Total T3	Total T4	Ultra TSH
Cord Blood	0.30 - 0.70	1-3 day 8.2-19.9	Birth- 4 day: 1.0-38.9
New Born	0.75 - 2.60	1 Week 6.0-15.9	2-20 Week : 1.7-9.1
1-5 Years	1.0-2.60	1-12 Months 6.8 - 14.9	20 Week- 20 years 0.7 - 6.4
5-10 Years	0.90 - 2.40	1-3 Years 6.8-13.5	
10-15 Years	0.80 - 2.10	3-10 Years 5.5-12.8	

\*\*\*END OF REPORT\*\*\*

Technician

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 Pathologist

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 Print Date & Time : 27/01/2024 02:07 PM

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### BIOCHEMISTRY

#### BSL-F & PP

Blood Sugar Level Fasting : 113 MG/DL 60 - 110  
 Blood Sugar Level PP : 117 MG/DL 70 - 140

#### RFT (RENAL FUNCTION TEST)

##### BIOCHEMICAL EXAMINATION

UREA (serum) : 21 MG/DL 0 - 45  
 UREA NITROGEN (serum) : 9.81 MG/DL 7 - 21  
 CREATININE (serum) : 0.7 MG/DL 0.5 - 1.5  
 URIC ACID (serum) : 3.2 MG/DL Male : 3.5 - 7.2  
 Female : 2.6 - 6.0

##### SERUM ELECTROLYTES

SERUM SODIUM : 140 mEq/L 136 - 149  
 SERUM POTASSIUM : 4.3 mEq/L 3.8 - 5.2  
 SERUM CHLORIDE : 104 mEq/L 98 - 107



*[Signature]*  
 Technician

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*[Signature]*  
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 Print Date & Time : 27/01/2024 02:08 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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## BIOCHEMISTRY

### LIPID PROFILE

CHOLESTEROL (serum)	: 150	MG/DL	Male : 120 - 240 Female : 110 - 230
TRIGLYCERIDE (serum)	: 83	MG/DL	0 - 150
HDL (serum)	: 42	MG/DL	Male : 42 - 79.5 Female : 42 - 79.5
LDL (serum)	: 91	MG/DL	0 - 130
VLDL (serum)	: 16.60	MG/DL	5 - 51
CHOLESTROL/HDL RATIO	: 3.57		Male : 1.0 - 5.0 Female : 1.0 - 4.5
LDL/HDL RATIO	: 2.17		Male : <= 3.6 Female : <= 3.2

### NCEP Guidelines

	Desirable	Borderline	Undesirable
Total Cholesterol (mg/dl)	Below 200	200-240	Above 240
HDL Cholesterol (mg/dl)	Above 60	40-59	Below 40
Triglycerides (mg/dl)	Below 150	150-499	Above 500
LDL Cholesterol (mg/dl)	Below 130	130-160	Above 160

Suggested to repeat lipid profile with low fat diet for 2-3 days prior to day of test and abstinence from alcoholic beverages if applicable.  
 Cholesterol & Triglycerides reprocessed, & confirmed.

\*\*\*END OF REPORT\*\*\*

Technician

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 Req.No : 11077

Collection Date & Time : 27/01/2024 09:48 AM  
 Reporting Date & Time : 27/01/2024 02:33 PM  
 Print Date & Time : 27/01/2024 02:33 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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## CLINICAL PATHOLOGY

### URINE ROUTINE

#### PHYSICAL EXAMINATION

QUANTITY : 20 ML  
 COLOUR : PALE YELLOW  
 APPEARANCE : SLIGHTLY HAZY  
 REACTION : ACIDIC  
 SPECIFIC GRAVITY : 1.015

#### CHEMICAL EXAMINATION

PROTEIN : ABSENT  
 SUGAR : ABSENT  
 KETONES : ABSENT  
 BILE SALTS : ABSENT  
 BILE PIGMENTS : ABSENT  
 UROBILINOGEN : NORMAL

#### MICROSCOPIC EXAMINATION

PUS CELLS : 1-2 /hpf  
 RBC CELLS : ABSENT /hpf  
 EPITHELIAL CELLS : 1-2 /hpf  
 CASTS : ABSENT /hpf  
 CRYSTALS : ABSENT  
 OTHER FINDINGS : ABSENT  
 BACTERIA : ABSENT

\*\*\*END OF REPORT\*\*\*

Technician

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Dr. AJAY A GANGSHETTIWAR  
 M.D.(Pathology) R.No.080412  
 Pathologist

For Free Home Collection Call : 9545200011

AiMS Hospital And Research Center



# Sahyadri Speciality Labs

e-mail : labinfo@sahyadrihospitals.com www.sahyadrihospital.com



Patient : Mrs. DIXIT HEMLATA MRN : 2878595  
Age/Gender : 38 Years / Female Visit No : OP-1 Date: 27/01/2024  
Consultant : - Sample Collected : 27/01/2024 12:11 PM  
Location : OPD Sample Revd. in Lab : 27/01/2024 12:15 PM  
Sponsor : AIMS Hospital & Research Center (In association with Olive Healthcare Services Pvt Ltd and AIMS Trust) Reported On : 27/01/2024 01:16 PM  
Collected At : SSL Labs Processed At : SSL Main Lab  
Referring Doctor :



Bill No : 242371713 Status : Approved

Test Name	Test Value	Unit	Reference Interval	Method
GLYCOSYLATED Hb (HbA1C) (24012701431) Sample Type -> EDTA Whole Blood				
Blood Glycosylated Hb (HbA1c)	6.0	%	Non-diabetic (Normal) : < 5.7 Pre-diabetes : > or = 5.7 to < 6.5 Diabetes : > or = 6.5	HPLC-NGSP

#### Note :

- The HbA1c test is used to monitor long term glucose control in patients with diabetes. It provides a retrospective index of the integrated plasma glucose values over an extended period 12 weeks of time and is not subject to the wide fluctuations observed when assaying blood glucose concentrations. It is a measure of the risk for the development of complications in diabetes mellitus.
- Patients with hemolytic disease or other conditions with shortened red blood cell survival exhibit a substantial reduction in HbA1c.

End Of Report

Dr. Gauri Atul Naik  
MBBS,MD(Pathology)  
Reg. No. : 88825

Entered By : 70002487



Sahyadri Speciality Labs, Main Lab, Pune accredited by NABL vide Certificate No. MC-2048 Scope available on request

प्रति,

समन्वयक,  
Mediwheel (Arcolomi Healthcare Limited)  
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ोदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	CHINTAMANI ASHOK DIXIT
जन्म की तारीख	18-11-1983
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	27-01-2024
बुकिंग संदर्भ सं.	23M170144100083558S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MS. DIXIT HEMLATA CHINTAMANI
कर्मचारी की क.कुसंख्या	170144
कर्मचारी का पद	SINGLE WINDOW OPERATOR B
कर्मचारी के कार्य का स्थान	PUNE,ASHOK NAGAR
कर्मचारी के जन्म की तारीख	15-07-1985

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ोदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 11-01-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले विकिल्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनबॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ोदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcolomi Healthcare Limited)से संपर्क करें।)



ID : 2401270004

Name :  
Sex :  
Divisions :

HR 92 bpm  
P Dur/PR int 108/169ms  
QRS Dur 102ms  
QT/QTc int 343/421 ms  
P/ORS/T axis 80/65/66°

Data Time : 2024-01-27 10:35

Age :  
BP :  
Bed No. :

RV5/SV1 amp 1.288/0.624mV  
RV5+SV1 amp 1.912mV  
RV6/SV2 amp 1.093/0.330mV

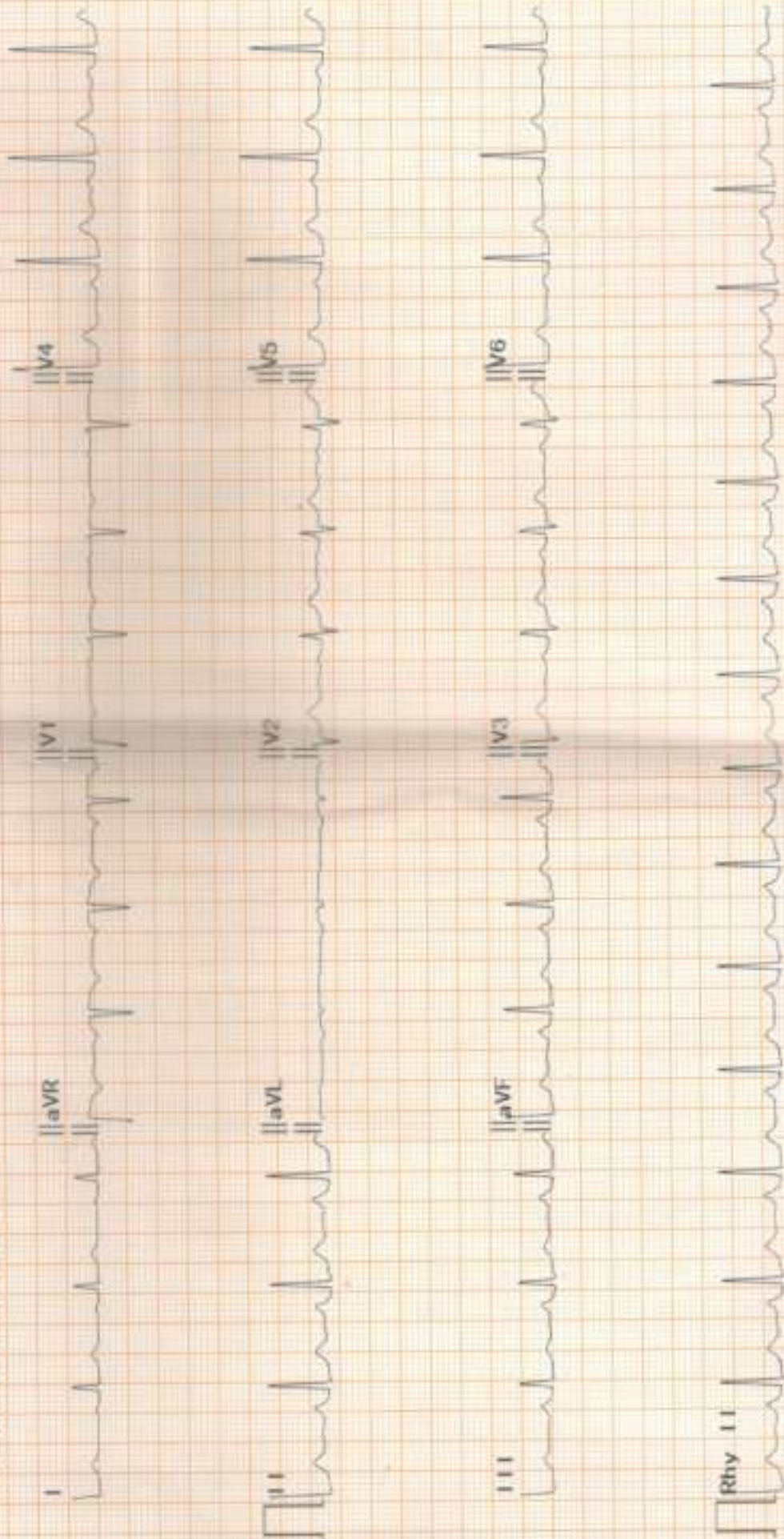
Hospital :

Height : cm  
Weight : kg  
Hospital No. :

Minnesota Code  
4-5-0 (V6)  
9-4-1 (V3)

Diagnosis Info  
800: Sinus Rhythm  
121: Counter Clock Wise R

\*\*\*Normal ECG\*\*\*



Diagnosis for reference, ask your doctor to confirm  
AUTO PRINT 3X4+1R 92bpm 10 mm/mV 0.50Hz-25Hz AG 50Hz 25 mm/sec Confirmed by



**2D ECHO / COLOUR DOPPLER**

**NAME : MRS. HEMLATA DIXIT**  
**REF BY : HOSPITAL PATIENT**

**38Yrs/F**

**OPD**  
**27-Jan-24**

**M - Mode values**

**Doppler Values**

AORTIC ROOT (mm)	24	TAPSE (mm)	
LEFT ATRIUM (mm)	34	PULMONARY PG (mmHg)	6
RV (mm)		AORTIC VEL (m/sec)	1.2
LVID - D (mm)	46	PG (mmHg)	6
LVID - S (mm)	27	MITRAL E VEL (m/sec)	0.6
IVS - D (mm)	10	A VEL (m/sec)	0.7
LVPW - D (mm)	10	TRICUSPID VEL, (m/sec)	
EJECTION FRACTION (%)	60%	PG (mmHg)	

**REPORT**

Normal LV size & wall thickness.  
No regional wall motion abnormality  
Normal LV systolic function, LVEF 60%  
Normal sized other cardiac chambers.

Pliable mitral valve., No Mitral regurgitation.  
Normal mitral diastolic flows.

Trileaflet aortic valve. No aortic stenosis / regurgitation.

Normal Tricuspid & pulmonary valve. Trivial tricuspid regurgitation,  
PA pressure = 24 mmHg - normal

Intact IAS & IVS  
No PDA, coarctation of aorta.  
No clots, vegetations, pericardial effusion noted.

**IMPRESSION :**

Normal study.  
No regional wall motion abnormality.  
Normal biventricular function, LVEF 60%  
Normal PA pressure.

  
**DR. RAJDATT DEORE**  
MD,DM-CARDIOLOGIST  
MMC 2005/03/1520

*(NORMAL 2D-ECHO & COLOR DOPPLER DOESN'T RULE OUT ISCHAEMIC HEART DISEASE)*



**DIXIT, HEMLATA**

Patient ID: 60695  
 27.01.2024  
 38yrs  
 10-45-31

Test Reason: Screening for CAD  
 Medical History: NO HISTORY

Ref MD: Ordering MD:

Technician: RUPALI Test Type: Treadmill Stress Test  
 Comment:

**Tabular Summary**

BRUCE: Total Exercise Time: 07:30  
 Max HR: 181 bpm 99% of max, predicted 182 bpm HR at rest: 90  
 Max BP: 150/95 mmHg BP at rest: 120/80 Max RPP: 25950 mmHg<sup>2</sup>/bpm  
 Maximum Workload: 10.10 METS  
 Max ST: -0.26 mV, 0.06 mV/s in V4; EXERCISE STAGE 3 -06:59  
 Arrhythmia: A:15  
 ST/HR Index: 2.84 uV/bpm  
 Reasons for Termination: Dyspnea  
 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: none. Overall Impression: Normal stress test.

Conclusion: GOOD EFFORT TOLERANCE  
 ACHIEVED 99 % THR ON RX.  
 NORMAL BP RESPONSE  
 NO SIGNIFICANT ST-T CHANGES NOTED FOR THE GIVEN WORKLOAD

**STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA**

DR. RAJDATI DEORE  
 MD, DM - CARDIOLOGIST  
 MMC 2005/03/1520

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg <sup>2</sup> /bpm)	VE (l/min)	ST Level (uV mV)	Comment
PRETEST	SUPINE	00:22	0.00	0.00	1.0	85	120/80	10200	0	0.04	
	STANDING	00:19	0.00	0.00	1.0	92			0	0.04	
	HYPERV.	01:05	0.50	0.00	1.3	116	120/80	13920	0	0.04	
EXERCISE	STAGE 1	03:00	1.70	10.00	4.6	133	120/80	15960	0	-0.07	
	STAGE 2	03:00	2.50	12.00	7.0	162	120/80	19440	0	-0.14	
	STAGE 3	01:31	3.40	14.00	10.1	181	135/85	24435	0	-0.19	
RECOVERY		02:53	0.00	0.00	1.0	110	150/95	16500	0	0.03	



DIXIT, HEMLATA

Patient ID: 60695

27.01.2024

10:57:37

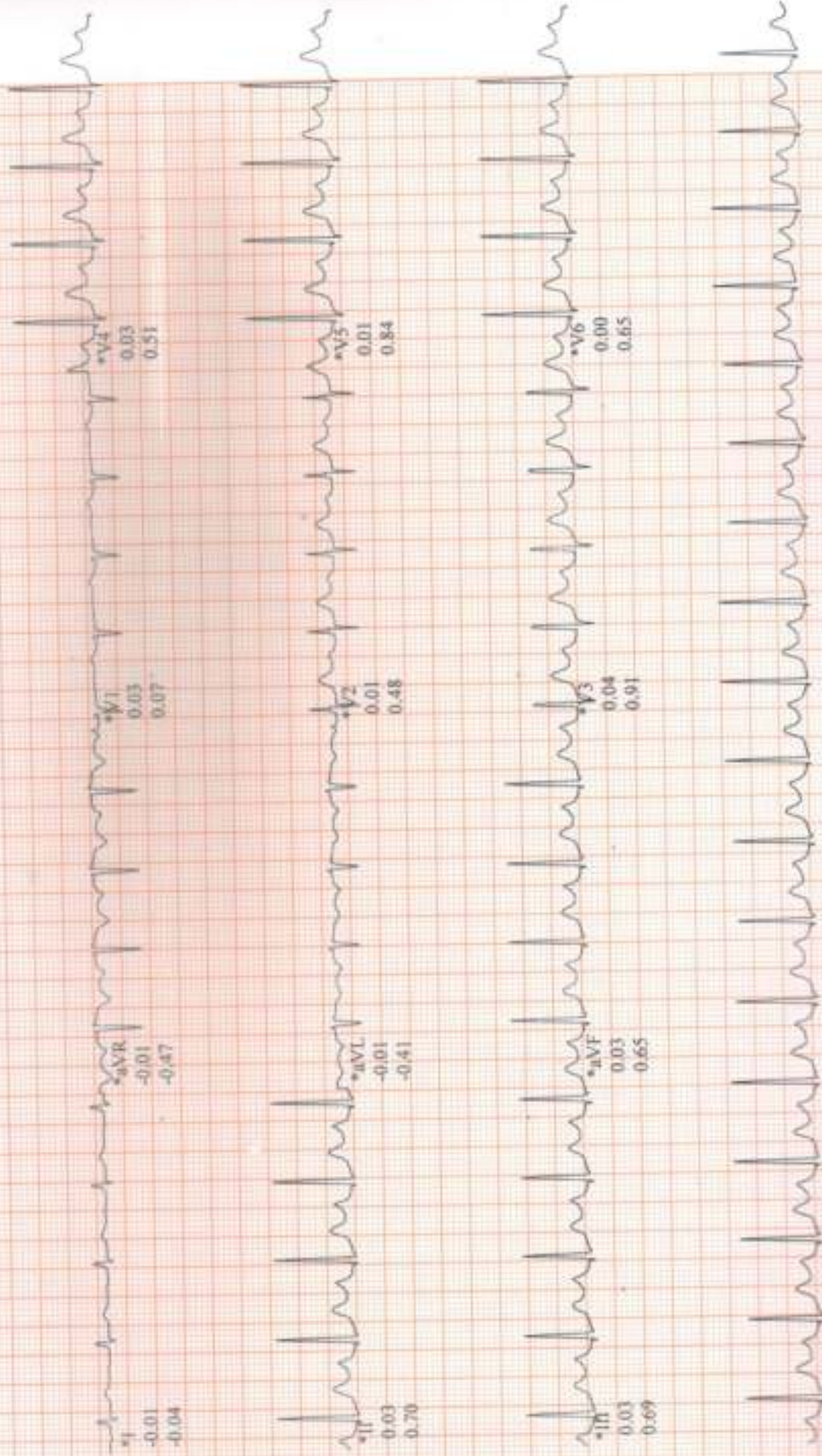
110 bpm  
150/95 mmHg

Linked Medications  
RECOVERY

#1  
02-50

BRUCE  
0.0 mph  
0.0 %

Lead  
ST Level (mV)  
ST Slope (mV/s)



II  
Raw Data

\*Computer Synthesized Rhythms