

Name : MRS. NEHA SAWANT Sample Received : 18/09/2024 08:36:51

Age/Sex : 55 Yrs. / F Printed : 19/09/2024 17:06:07 Report Released : 19/09/2024 15:35:41

Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

#### COMPLETE BLOOD COUNT

COMPLETE BLOOD COUNT				
Test		Result	Unit	Biological Ref Range
Hemoglobin	:	12.9	g/dL	12-14 g/dL
(SLS) Photometric				
Total RBC (Electrical Impedence)	:	4.89	10^6/μL	3.0-6.0 10^6/μL
Hematocrit (PCV) (Calculated)	:	39.2	%	36-54 %
Mean Corpuscular Volume (MCV) (calulated)	:	80.2	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	:	26.4	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC)	:	32.9	g/dL	31.5-34.5 g/dL
(Calculated) Red Cell Distribution Width (RDW-CV) (Electrical Impedence)	·:	16.60	%	12-15 %
Total Leucocytes Count (Light Scattering)	:	9200	/cumm	4000-11000 /cumm
Neutrophils	:	68	%	40-75 %
(Calculated)				
<b>Eosinophils Percentage</b>	:	02	%	1-6 %
(Calculated)				
Lymphocyte Percentage	:	25	%	20-45 %
(Calculated)				
Basophils Percentage	:	0	%	0-1 %
(Calculated)				
Monocytes Percentage	:	05	%	1-10 %
(Calculated)				
RBC Morphology	:	Normocytic, I	Normochromic	
WBC Morphology	:	Normal Morp	hology	
Platelet Count (Electrical Impedence)	:	307000	/ul	150000-450000 /ul
Platelets on Smear	:	Adequate		Adequate

Sample Type:EDTA whole blood(Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

\*All Samples Processed At Excellas Clinics Mulund Centre .

\*ESR NOT IN NABL scope.

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 15:35:41)

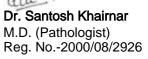
14

mm at 1hr



E.S.R







0-20 mm at 1hr



Name

: MRS. NEHA SAWANT

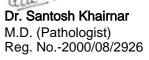
Sample Received : 18/09/2024 08:36:51

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Report Released

Registration ID : 24727

: 18/09/2024 08:36:51 Sample Collection

: MRS. NEHA SAWANT Name

Sample Received : 18/09/2024 08:36:51

Age/Sex : 55 Yrs. / F

: 19/09/2024 17:06:07

: 19/09/2024 15:36:31

Printed : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd Ref. By

## Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test Result Unit Biological Ref. Range GLUCOSE (SUGAR) FASTING, 72 mg/dL Non-Diabetic: < 100 mg/dl (Fluoride Plasma Used) Impaired Fasting Glucose: 100-

125 mg/dl Diabetic: >/= 126 mg/dl

Method: GOD-POD

Plasma Used)

GLUCOSE (SUGAR) PP, (Fluoride

71

mg/dl

Non-Diabetic: < 140 mg/dl

Impaired Glucose Tolerance: 140-

199 mg/dl Diabetic: >/= 200 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 15:36:31)

## HbA1c (Whole Blood)

		1107110 (	TTTIOIO BIOCU)	
Test		Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	:	4.90	%	Non-diabetic: 4-6
				Excellent Control: 6-7
				Fair to good control: 7-8
				Unsatisfactory control: 8-10
				Poor Control: >10
EDTA Whole Blood, Method: HPLC				

Estimated Average Glucose (eAG) 65.1-136.3 mg/dL mg/dl 93 93 mg/dl

EDTA Whole Blood, Method: Calculated

#### Interpretation:

- 1.The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- 2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Assocation) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HBA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- 3.To estimate the eAG from the HbA1c value, the following equation is used: eAG(mg/dl) =28.7\*A1c-46.7.
- 4.Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 15:37:13)









<sup>\*</sup>Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.



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**BLOOD GROUP** 

Test Result Unit Biological Ref. Range

Blood Group : 'B' Rh POSITIVE

Slide and Tube Aggllutination Test

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 15:37:54)

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





Dr. Santosh Khairnar M.D. (Pathologist) Reg. No.-2000/08/2926



24727 180924 Registration ID : 24727 Sample Collection : 18/09/2024 08:36:51

Name : MRS. NEHA SAWANT Sample Received : 18/09/2024 08:36:51

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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

#### LIPID PROFILE

Test Result Unit Biological Ref. Range

Total Cholesterol : 190 mg/dl Desirable: <200

Borderline high = 200-239

High: > 239

Serum, Method: CHOD-PAP

S. Triglyceride : 86 mg/dl Desirable: <161

Borderline High: 161 - 199

High: > 200 - 499/ Very High:>499

Serum, Method: GPO-Trinder

HDL Cholesterol : 41 mg/dl 42.0-88.0 mg/dl

serum,Direct method

LDL Cholesterol : 131.80 mg/dl Optimal: <100;

Near Optimal: 100-129; Borderline High: 130-159;

High: 160-189; Very high: >190

Serum, (Calculated)

VLDL Cholesterol : 17.2 mg/dl 5-30 mg/dl

Serum, Method: Calculated

LDL/HDL Ratio : 3.2 Optimal: <2.5

Near Optimal: 2.5-3.5

High >3.5

Serum, Method: Calculated

TC/HDL Ratio : 4.6 Optimal: <3.5

Near Optimal: 3.5 - 5.0

High >5.0

Serum, Method: Calculated

Test Done on - Automated Biochemistry Analyzer (EM 200).

#### Interpretation

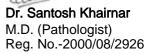
- 1.Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
- 2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
- 3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

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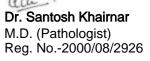
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LIVER FUNCTION TEST				
Test		Result	Unit	Biological Ref. Range
S. Bilirubin (Total)	:	0.56	mg/dl	0-2.0 mg/dl
Serum, Method: Diazo (walter & Gerarde)				
S. Bilirubin (Direct)	:	0.11	mg/dl	0-0.4 mg/dl
Serum, Method: Diazo (walter & Gerarde)				
S. Bilirubin (Indirect)	:	0.45	mg/dl	0.10-1.0 mg/dl
Serum, Method: Calculated				
Aspartate Transaminase (AST/SGOT)	:	17.5	IU/L	0-31 IU/L
Serum, Method: UV Kinetic with P5P				
Alanine Transaminase (ALT/SGPT)	:	13.0	IU/L	0-34 IU/L
Serum, Method: UV Kinetic with P5P				
S. Alkaline Phosphatase	:	93.7	IU/L	42-98 IU/L
Serum, Method: IFCC with AMP buffer				
Total Proteins	:	7.0	gm/dl	6.4-8.3 gm/dl
Serum, Method: Biuret				
S. Albumin	:	3.8	gm/dl	3.5-5.2 gm/dl
Serum, Method: BCG S. Globulin		2.2	am/dl	2.2.2.5 am/dl
	:	3.2	gm/dl	2.3-3.5 gm/dl
Serum, Method: Calculated  A/G Ratio		1.19		0.90-2.00
	•	1.19		0.90-2.00
Serum, Method: Calculated  Gamma GT		22	U/L	0-38 U/L
Serum, Method: G glutamyl carboxy nitroanilide	•	<b></b>	U/L	0-30 0/L

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 15:39:50)









Test Done on - Automated Biochemistry Analyzer (EM 200).

<sup>\*</sup>All Samples Processed At Excellas Clinics Mulund Centre .



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Name : MRS. NEHA SAWANT Sample Received : 18/09/2024 08:36:51

Age/Sex : 55 Yrs. / F Printed : 19/09/2024 17:06:07 Report Released : 19/09/2024 15:40:46

Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

#### **SERUM CREATININE**

Test Result Unit Biological Ref. Range

S. Creatinine : **0.48** mg/dl 0.60-1.1 mg/dl

Serum, Method: Enzymatic

Test Done on - Automated Biochemistry Analyzer (EM 200).

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# **BLOOD UREA NITROGEN (BUN)**

Test Result Unit Biological Ref. Range

Urea : **16.26** mg/dl 21-43 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 7.60 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

\*All Samples Processed At Excellas Clinics Mulund Centre

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# **SERUM URIC ACID**

Test Result Unit Biological Ref. Range

S. Uric Acid : 4.44 mg/dl 2.6-6.0 mg/dl

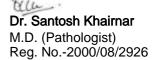
Serum, Method: Uricase - POD

Test Done on - Automated Biochemistry Analyzer (EM 200).

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 15:41:12)











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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

**BUN CREAT RATIO (BCR)** 

Test Result Unit Biological Ref. Range

BUN/Creatinine ratio : 15.83 5-20

Serum, Method: Calculated

NOTE:

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

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Name : MRS. NEHA SAWANT Sample Received : 18/09/2024 08:36:51

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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

### THYROID FUNCTION TEST

Test Result Unit Biological Ref. Range

Total T3 : 0.9 ng/dl 0.70-2.04 ng/dl

Serum, Method: CLIA

Total T4 : 14.94 μg/dl 5.1-14.1 μg/dl

Serum, Method: CLIA

TSH (Thyroid Stimulating Hormone) : 0.09 µIU/ml 0.5-8.9 µIU/ml

Serum, Method: CLIA

Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis, estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age, marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

### **EXAMINATION OF URINE**

Test Result Unit Biological Ref. Range

PHYSICAL EXAMINATION

Quantity : 30 ml

Colour : Pale yellow

Appearance : Clear

 Reaction (pH)
 :
 5.0
 4.5 - 8.0

 Specific Gravity
 :
 1.010
 1.010 - 1.030

**CHEMICAL EXAMINATION** 

Protein Absent Absent Glucose Absent Abesnt Absent **Ketones Bodies** Abesnt Occult Blood Absent Absent Bilirubin Absent Absent Normal Urobilinogen Absent

**MICROSCOPIC EXAMINATION** 

 Epithelial Cells
 :
 0 - 2
 / hpf

 Pus cells
 :
 1 - 2
 / hpf

Red Blood Cells : Absent / hpf

Casts : Absent / lpf Absent / lpf Crystals : Absent Absent

OTHER FINDINGS

Yeast Cells : Absent Absent Absent Absent

Mucus Threads : Absent Spermatozoa : Absent

Deposit : Absent Absent Absent Absent Absent

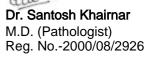
sample type:Urine

Method: Visual and Microscopic

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 15:43:51)











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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

### 2D Echo Color Doppler

#### **REASON FOR STUDY: AHC**

## **CONCLUSION:**

- NORMAL SIZE LA, LV, RA AND RV\_
- GOOD LV FUNCTION. L.V.E.F:55% WITH NO RWMA.\_
- GOOD RV FUNCTION. TAPSE: 23 MM\_
- STRUCTURALLY NORMAL MITRAL, TRICUSPID, AORTIC AND PULMONARY LEAFLETS.
- NO CLOTS IN LA AND LV.
- NO EVIDENCE OF LEFT VENTRICULAR HYPERTROPHY\_
- NO EVIDENCE OF PERICARDIAL EFFUSION.
- NO EVIDENCE OF PULMONARY HYPERTENSION.

#### **CONVENTIONAL DOPPLER:**

- E TO A RATIO OF LESS THAN ONE IN LV.
- INFLOW SUGGESTIVE OF ABNORMAL RELAXATION OF LV.

**COLOUR DOPPLER:** SHOWS NO EVIDENCE OF MR,AR,TR OR PR.

# **IMPRESSION:**

GOOD LV SYSTOLIC FUNCTION. TYPE I DD



Dr. Yogesh Solanki DrNB Interventional Cardiology Reg.No -2015/05/3063





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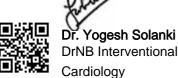
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	OBSERVED
MITRAL VALVE:	
ANTERIOR LEAFLETS EXCURSION	NORMAL
POSTERIOR LEAFLETS EXCURSION	NORMAL
E.P.S.S	
TRICUSPID VALVE:	
EXCURSION	NORMAL
OTHER FINDINGS	
AORTIC VALVE:	
CUSPS OPENING	NORMAL
PULMONARY VALVE:	
EXCURSION	NORMAL
DIMENSIONS	
AORTIC ROOT	31
LEFT ATRIUM	31
LVID (D)	44
LVID (S)	27
IVST (D)	10
PWT (D)	09
RVID (D)	

	VELOCITY(M/SEC)	STENOSIS GRADIENT	REGURGITATION
		PEAK/MEAN (MMHG)	GRADING
MITRAL			0/111
TRICUSPID			0/111
AORTIC	1	4	0/IV
PULMONARY			0/IV

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

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 18/09/2024 15:11:23)



**DrNB** Interventional

Reg.No -2015/05/3063





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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

### X RAY CHEST PA VIEW

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

# IMPRESSION:

No significant abnormality detected.





Dr. Reshma Gokran MD (Radiologist) Reg. No-2009/09/3296

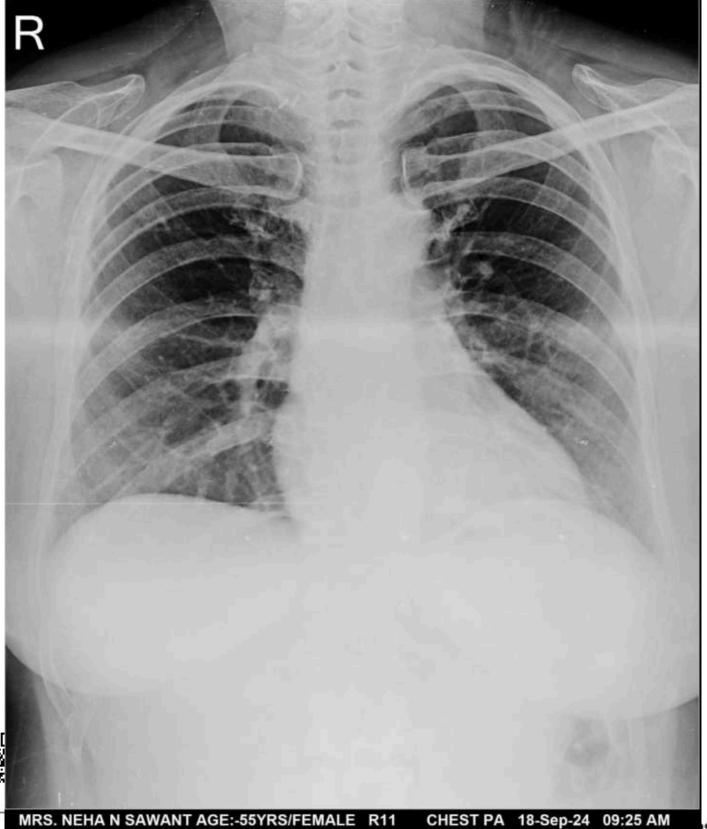


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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

#### **USG ABDOMEN & PELVIS - FEMALE**

Liver:- is normal in size, shape and echotexture. No focal or diffuse lesion is seen.

The portal and hepatic veins are normal. There is no IHBR dilatation seen.

**Gall Bladder:-** is partially distended **and shows echogenic focus measuring 2.3 mm**. No GB wall thickening or pericholecystic fluid is seen.

CBD is normal.

Pancreas:-is normal in size, shape and echotexture. There is no focal lesion seen.

**Spleen:-** is normal in size (6.7 cms) and echotexture. No focal lesion is seen.

**Kidneys:-** Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney - 10.1 x 3.8 cms and shows a cyst measuring 5.8 x 4.8 mm in mid pole.

Left kidney - 9.0 x 4.0 cms.

Urinary Bladder:- is well distended and shows normal wall thickness.

There is no intraluminal lesion within.

**Uterus & Ovaries :-** shows post menopausal changes.

No ascites is seen. No significant lymphadenopathy is seen.

#### **IMPRESSION:**

- · Gall bladder sludge ball/soft calculus.
- · Right simple renal cyst.

#### (Old reports not available)

Thanks for the Referral

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 17:02:27)









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#### **USG BOTH BREAST**

- Both breasts show normal fibroglandular & fibro fatty parenchyma.
- There is no solid, cystic lesion or abnormal dilatation of ducts noted on either.
- · No significant axillary lymphadenopathy is seen.

# **IMPRESSION:**

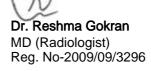
· No significant abnormality is seen

Thanks for referral

BIRADS CATEGORY: (0 = requires additional evaluation, 1 = Negative, 2 = benign findings, 3 = probably benign findings, 4 = suspicious abnormality, 5 = highly suggestive of malignancy).

(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 19/09/2024 17:02:55)









Report Released

: 19/09/2024 16:36:33

: 55 Yrs. / F

Age/Sex

: 18/09/2024 08:36:51 Registration ID : 24727 Sample Collection

: 19/09/2024 17:06:07

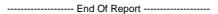
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## **OPTHALMIC EVALUATION**

Examination	Right Eye	Left Eye	
Distance Vision (With Glass)	6/6	6/6	
Near Vision (With Glass)	N/6	N/6	
Color Vision	Noi	Normal	
Remarks	Noi	Normal	

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Registration ID : 24727 Sample Collection : 18/09/2024 08:36:51

ame : MRS. NEHA SAWANT Sample Received : 18/09/2024 08:36:51

Age/Sex : 55 Yrs. / F Printed : 19/09/2024 17:06:07 Report Released : 18/09/2024 14:58:31

Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

### **CERVICAL CYTOLOGY REPORT**

# PAPANICOLAOU SMEAR (CONVENTIONAL)

# Specimen:-

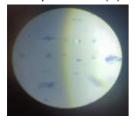
- 1. 2 unstained air dried smear received.
- 2. Stained with papanicolaou method and examined.

### Smear shows:

- Many superficial squamous, intermediate squamous and few squamous metaplastic cells.
- Background shows few endocervical cells alongwith mild inflammatory infiltrate.
- · No cellular atypia or malignancy noted.

**Impression**: No interaepithelial lesion or malignancy

**Comments:** The smears are reported using bethesda system for cervical cytology(2014) Interpretation(s).



(Collected At: 18/09/2024 08:36:51, Received At: 18/09/2024 08:36:51, Reported At: 18/09/2024 14:58:31)

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





Dr. Santosh Khairnar M.D. (Pathologist) Reg. No.-2000/08/2926



MED	DICAL EXAMINATION R	EPORT	
Name Mr./Mrs./ Miss	Meha 1		
Sex	Male/ Female		
Age (yrs.) 55	UHID:		
Date	18/09/2024	Bill No. :	
Marital Status	Married/ No. of Children / Unmarried/ Widow : 2		
Present Complaints	- No complaints		
Past Medical: History Surgical: - olclo	KICIO HTN4 Hy (Teb-T	Pothyroidism fince 5 your hyronom ++ mes (-or met-xc (12-5) 1-00)	
Personal History	Diet: Veg □ / Mixed □ / Addiction: Smoking □ / Tobacco Chewing □ / Alcohol □/ 3 / Lo Any Other		
Family History Father =  Mother =  Siblings =	HT/DM/IHD/Stroke/Any Other — Pussed away  Mother = HT/DM/IHD/Stroke/Any Other — Poster  Siblings = HT/DM/IHD/Stroke/Any Other — Boother		
History of Allergies	Drug Allergy 7 PO	Hypothyroidis (on Res)	
History of Medication	For HT / DM / IHD / Hypothyroi Any Other	idism y some as	
On Examination (O/E)	G.E.: NAD R.S.: Clear C.V.S.: 5132 1		
	C.N.S.: cens clour.  P/A: soft mit  Any Other Positive Findings:	MAP	

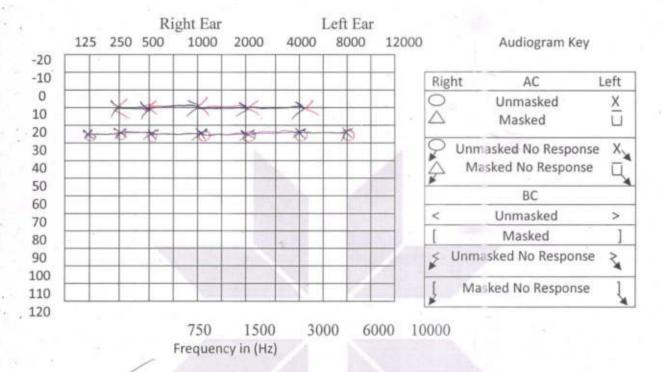
Height ISe cms	Weight 61-6 Kgs
BMI 27.4	
Pulse (per min.) fr min	Blood Pressure (mm of Hg) 19 ol 10 mm of Hg
5 P02- 98-11 on RD	Gynaecology
Examined by	Dr.
Complaint & Duration	
Other symptoms (Mict, bowels etc)	
Menstrual History	MenarcheCycleLoss
	Pain I.M.B P.C.B
	L.M.P Vaginal Discharge
	Cx. SmearContraception
Obstetric History	
Examination :	
Breast	
Abdomen	
P.S.	
P.V.	
Gynaecology Impression & Recommendation	
Recommendation	EXCELLAS CLINICS PVT. LTD.  B-1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Near Santoshi Mata Mandir, Mulund (West), Mumbai - 400080
Physician Impression	
Examined by:	- Overweight = To Reduce Weight - Underweight = To Increase Weight



NAME : MRS. NEHA SAWANT AGE/SEX: 55 YRS/FEMALE

REF BY: BOB DATE: 18/09/2024

#### AUDIOGRAM



Responses: Reliable / Fairly Reliable / Not Reliable

Speech Audiometry

Test Conduction : Satisfactory / Not Satisfactory

If any other specify

Procedure : Standard / Play

Audiological Interpretations:

Test	P.T.A.
Ear	dBHL
Right	25
Left	25

BILATERAL HEARING CONDUCTION SENSITIVITY WITHIN NORMAL LIMITS EXCELLAS GUDIOS PVT. LTD

Bal, Vikas Paradine Commercial, Below Axis LBS \*\*\*rn. Near Santo Diata Mandir. Mulund (WAUDIOLOGIST- 400089

**Excellas Clinics Private Ltd** PR Interval: 158 ms B1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Mulund (W), QRS Duration: 92 ms HR: 68 bpm 9521/Neha Sawant 55Yrs/Female Kgs/ Cms QT/QTc: 390/417ms Ref.: Test Date: 18-Sep-2024(09:22:42) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec P-QRS-T Axis: 47 - 19 - 33 (Deg) avR avL avF V2 VINODBHAI SOLANYI DR. YOGESH VINODBHAI SOLANK MBBS (MUM) MD GENERAL MEDIC... DANB INTERVENTIONAL CARDIOLOGY V3 V4 V5 V6 Print Date: 18-Sep-2024(Page:1 of 1) http://www.rmsindia.com @ RMS ECG (VESTA\_v3.0.1)