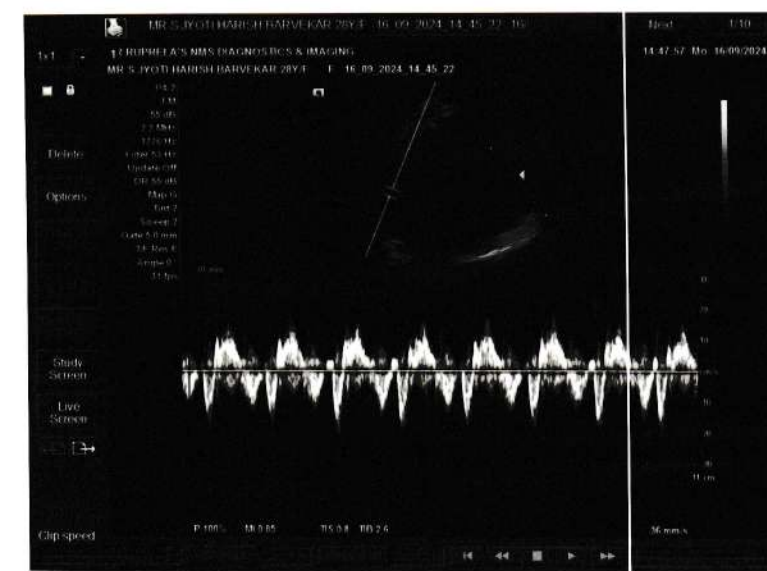
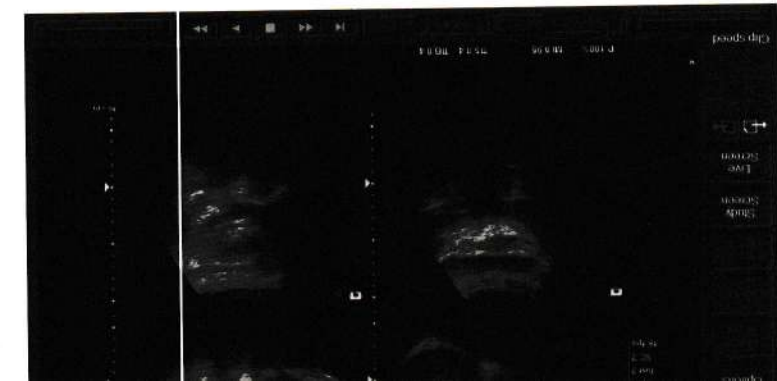
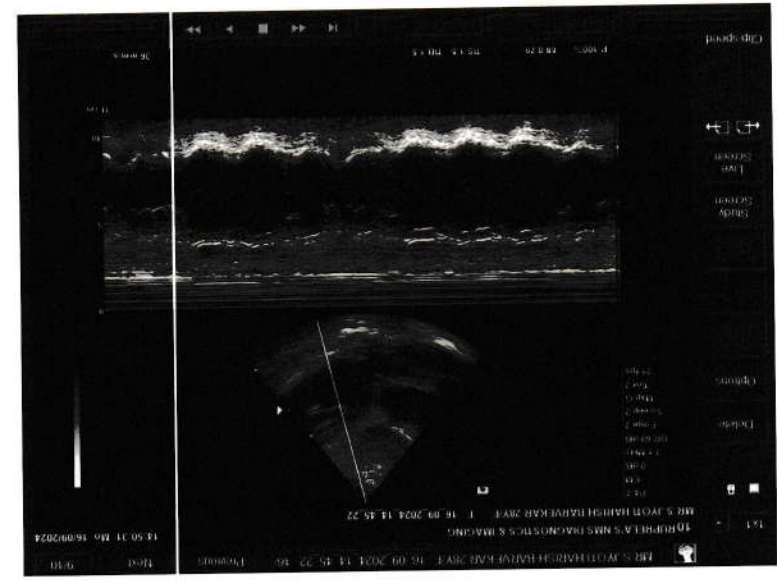
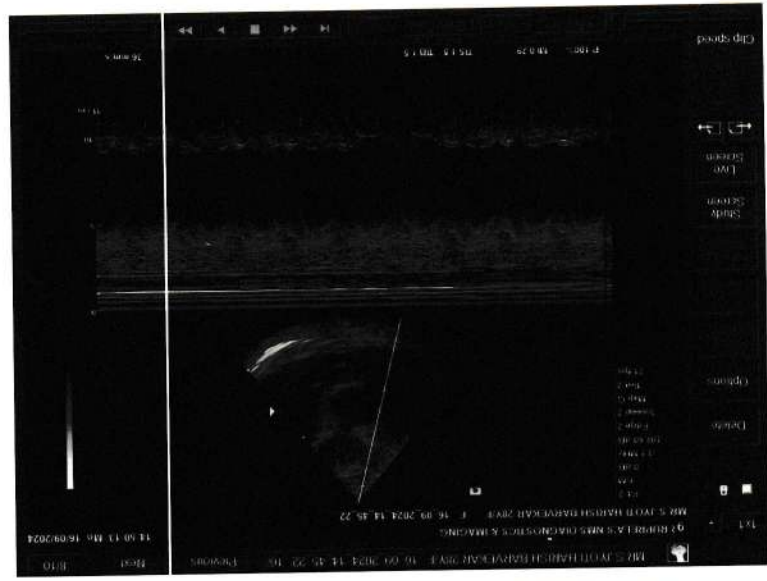
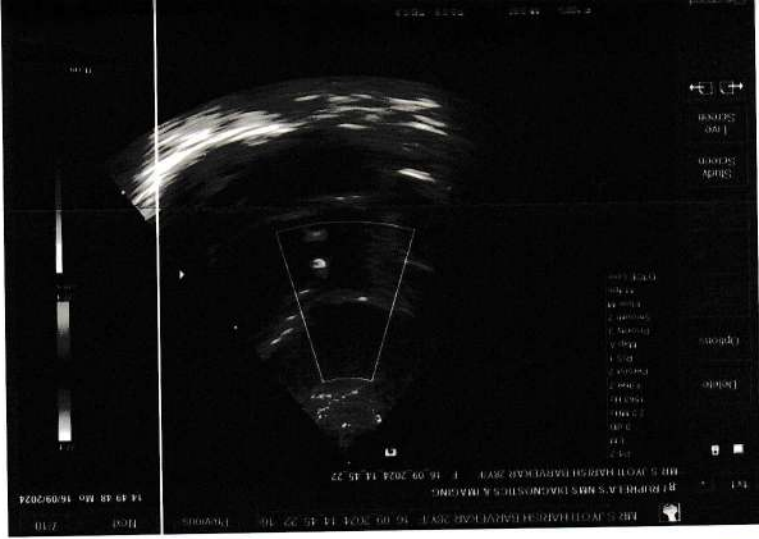


Pap
~~Peripheral~~ Smear नहीं करना है।









भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 0013/18001/62440

To
ज्योति हरीश बर्वेकर
Jyoti Harish Barvekar
C/O: Harish Barvekar
Gali No 4
Near Shiv Mandir
Raja Talab
Raipur
Raipur Chhattisgarh - 492001
7799300953

Signature Not Verified
Digitally signed by AS
UNIQUE IDENTIFICATION
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Date: 2021.12.19 07:29:27
UTC



आपका आधार क्रमांक / Your Aadhaar No. :

7911 3676 4022

VID : 9190 3994 6792 4912

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



ज्योति हरीश बर्वेकर
Jyoti Harish Barvekar
जन्म तिथि/DOB: 15/10/1997
महिला/ FEMALE

7911 3676 4022

VID : 9190 3994 6792 4912

मेरा आधार, मेरी पहचान

Issue Date: 14/12/2012



Government of India



सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन ऑथेंटिकेशन से पहचान प्रमाणित करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
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- आधार देश भर में मान्य है।
- आधार कई सरकारी और गैर सरकारी सेवाओं को पाना आसान बनाता है।
- आधार में मोबाइल नंबर और ईमेल ID अपडेट रखें।
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पता:
द्वारा: हरीश बर्वेकर, गली न 4, शिव मंदिर के पास, राजा
तालाब, रायपुर, रायपुर,
छत्तीसगढ़ - 492001

Address:
C/O: Harish Barvekar, Gali No 4, Near Shiv
Mandir, Raja Talab, Raipur, Raipur,
Chhattisgarh - 492001

Download Date: 15/12/2021



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1947 | help@uidai.gov.in | www.uidai.gov.in

Dr. Shailendra Ruprela

DR RUPRELA'S NMS DIAGNOSTICS & IMAGING CENTER

FAFADIH, RAIPUR

32/Mrs Jyoti Harish Barvekar 28Yrs/Female 61 Kgs/155 Cms

BP: 106/70 mmHg

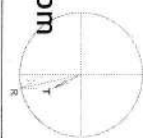
HR: 85 bpm

Ref.: AROCFEMI HEALTH CARE LTD.

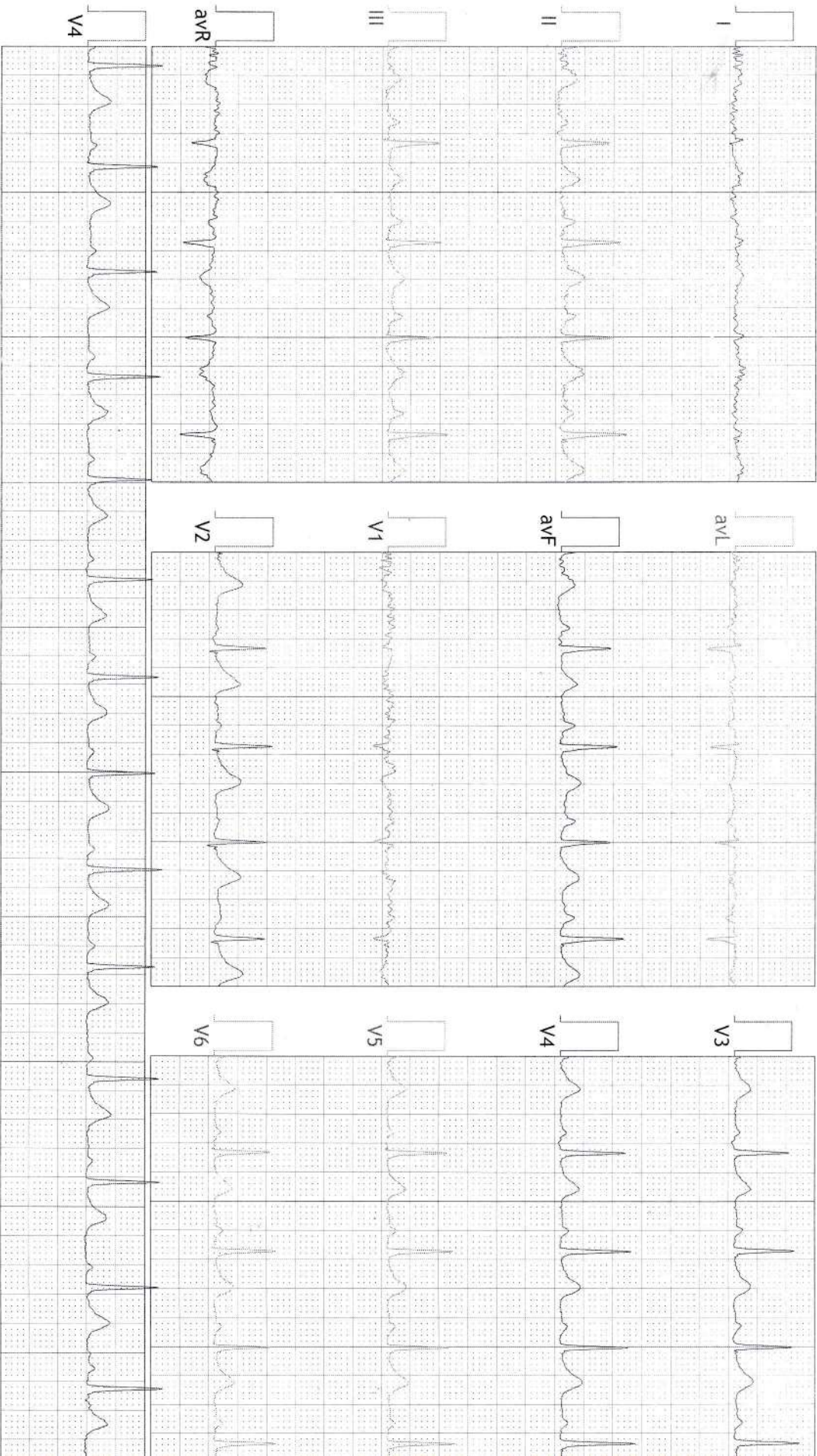
Test Date: 16-Sep-2024(14:43:00)

Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec

25mm/Sec



PR Interval: 162 ms
QRS Duration: 96 ms
QT/QTc: 359/429ms
P-QRS-T Axis: 86 - 77 - 64 (Deg)



FINDINGS: Normal Sinus Rhythm

Vent Rate : 85 bpm; PR Interval : 162 ms; QRS Duration: 96 ms; QT/QTc Int : 359/429 ms

P-QRS-T axis: 86 • 77 • 64 • (Deg)

Comments :

Dr. Shaitendra
Dr. Shaitendra
P.D. Medicine
Reg. No.: CG MC-511/2005



Dr. Ruprela's
NMS Diagnostics & Imaging

"अचूक निदान" स्वस्थ जीवन की ओर...

NAME: MRS.JYOTI HARISH BARVEKAR
REF.BY: ARCOFEMI HEALTHCARE LTD.

AGE/SEX : 28 Y/F
DATE: 16.09.2024

ECHO – CARDIOGRAPHY

M-MODE MEASUREMENTS:

| | Patient value (cm) | normal value (cm) |
|-------------------------|------------------------|-------------------|
| Aortic Root | 3.2 | 2.0-3.7 |
| Left Atrial Dimension | 2.6 | 1.9-4.0 |
| Left Ventricular ED | 4.8 | 3.7-5.6 |
| Left Ventricular ES | 3.0 | 2.2-4.0 |
| Interventricular Septal | ED : 0.9 ES : 0.8 | 0.6-1.2 |
| LEFT VENT PW | ED : 0.9 ES : 0.8 | 0.6-1.2 |

2 D ECHO

| | |
|------------------|--------------------------------|
| CHAMBERS | - All cardiac chambers normal. |
| VALVE | - NORMAL |
| SEPTAE | - IVS/IAS INTACT |
| RWMA | - NO |
| EF (OVARALL)(LV) | - 60 % |
| CLOT/ VEGETATION | - NIL |
| PER. EFFUSION | - NIL |

CONTINUOUS WAVE & PULSE WAVE DOPPLER

| Valve | Regurgitation | Gradient(mm Hg) |
|-----------------|---------------|-----------------|
| Mitral Valve | NIL | Not Significant |
| Aortic Valve | NIL | Not Significant |
| Tricuspid Valve | NIL | PASP= |
| Pulmonary Valve | Nil | Not Significant |

PULSE WAVE DOPPLER

MITRAL VALVE INFLOW > Waves DT m sec

IMPRESSION -

- NO RWMA AT REST, LVEF=60%
- NORMAL BIVENTRICULAR FUNCTION
- NORMAL CHAMBERS DIMENSION.
- NO CLOT/VEGETATION/PERICARDIAL EFFUSION.
- NORMAL VALVES


DR AJAY HALWAI
MBBS,MD,PGDCC



NAME : MRS. JYOTI HARISH BARVEKAR

AGE : 28 Y/SEX/F

Ref. By : ARCOFEMI HEALTHCARE LTD.

DATE : 16.09.2024

Complain Of: No Complaints

Ocular H/O: Nil

Family Ocular H/O: Nil

Drug Allergy (If Any): Not Aware

DISTANCE VISION:

(With / without PGP)

RE

6/9

LE

6/9

NEAR VISION:

(With / without PGP)

RE

N/6

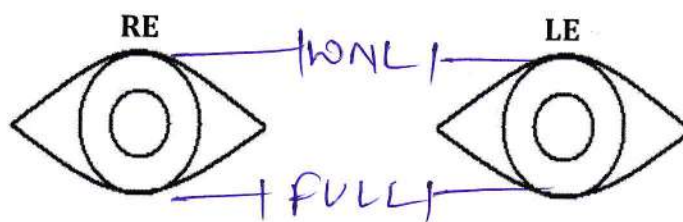
LE

N/6

REFRACTION:

| EYE | SPH | CYL | AXIS | ADD | VISION |
|-----|-------|-------|-------|-----|--------|
| RE | -0.50 | _____ | _____ | 6/6 | N/6 |
| LE | -0.50 | _____ | _____ | 6/6 | N/6 |

EXTERNAL EYE EXAMINATION:




EOM: NAD

SQUINT EVALUATION: ABSENT

NYSTAGMUS: ABSENT

COLOR VISION TEST: NORMAL

NYCTALOPIA (Night Blindness): ABSENT


Dr. Vaibhav Sharma
Ophthalmologist
Reg. No. MCI/1037782



Dr. Ruprela's
NMS Diagnostics & Imaging

"अचूक निदान" स्वस्थ जीवन की ओर...

NAME : MRS JYOTI HARISH BARVEKAR
REF. BY : ARCOFEMI HEALTHCARE LTD.

AGE : 28 Y/F
DATE : 16.09.2024

X-RAY CHEST PA 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.
- The cardiac size is normal.
- The domes of the diaphragms are normal in position, and show smooth outline.
- Both hila are normal in size, have equal density and bear normal relationship.
- The heart and trachea are central in position and no mediastinal abnormality is visible.
- **IMPRESSION : No evidence of pulmonary, pleural or cardiac pathology is noted.
Radiograph of chest is within normal limits.**





Dr. Ruprela's
NMS Diagnostics & Imaging
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AGE : 28 Y/F
DATE : 16.09.2024

SONOGRAPHY OF ABDOMEN AND PELVIS

The Real time, B mode, gray scale sonography of the abdominal organs was performed.

LIVER : The liver is normal in size, shape and has smooth margins. It is uniformly isoechoic , has normally distributed and normal size biliary and portal radicles and is without solid or cystic mass lesion or calcification.

GALL BLADDER : The gall bladder is seen as a well distended, pear shaped bag with uniformly thin and regular walls, without, gall stones or mass lesions.

COMMON BILE DUCT : The common bile duct is normal in caliber.

PANCREAS : The pancreas is normal in size, shape, contours and echotexture.
No evidence of solid or cystic mass lesion is noted.

KIDNEYS : The kidneys are normal in size and have smooth renal margins.
Cortical echotexture is normal.

The central echocomplex does not show evidence of calculus or hydronephrosis.

URINARY BLADDER : The urinary bladder is well distended. No calculi/mass

SPLEEN : The spleen is normal in size and shape. Its echotexture is homogeneous.
No evidence of focal lesion is noted.

PELVIS :

The uterus is anteverted , & appears normal.

The uterine margins is smooth and does not reveal any contour abnormalities.

The uterine myometrium shows homogeneous echotexture.

The ovaries on the either side show normal echotexture.

The endometrial echo is in the midline.

No adnexal mass is seen.

No fluid is noted in the cul-de-sac.

IMPRESSION :

The sonography of abdomen and pelvis within normal limits.

Thanks for reference with regards.

Kindly Note

✓ **Please Intimate us for any typing mistakes and send the report for correction within 7 days.**

✓ The science of Radiological diagnosis is based on the interpretation of various shadows produced by both the normal and abnormal tissues and are not always conclusive . Further biochemical and radiological investigation & clinical correlation is required to enable the clinician to reach the final diagnosis .

The report and films are not valid for medico - legal purpose

Dr. Shailendra Ruprela

MD , Medicine

Reg. No. : CGMC-511/2006

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG, BILASPUR ROAD, RAIPUR-492009 (Chhattisgarh)

Ph.: 0771-4048886, Mob.: 9406396296, Email : nmsdiagnostic.service@gmail.com



Dr. Ruprela's

NMS Diagnostics & Imaging

"अचूक निदान" स्वस्थ जीवन की ओर...

NAME : MRS. JYOTI HARISH BARVEKAR
AGE/SEX : 28 Y/ F
REFERRED BY : ARCOFEMI HEALTHCARE LTD.
DATE : 16.09.2024

PERIPHERAL SMEAR EXAMINATION

RBC : Macrocytic normochromic .

WBC: Total counts within normal range. No toxic granulation seen.
Band cells-9%, Neutrophils-46%, Lymphocytes-43%, Monocytes-2%.

Platelets: Appears adequate on smear.

Haemoparasite: No haemoparasite seen.


Dr. Avishesh Kumar Singh
MD (Pathologist)



VID :- E/14566

PID No. :- 202416917130081

Name :- Mrs Jyoti Barvekar

Age/Sex :- 28 Y / F

Ref. By. :- ARCOFEMI HEALTHCARE LIMITED

Sample Received on/at :

16/09/2024 8:54AM

Reported on/at

17/09/2024 10:52AM

BIOCHEMISTRY

| Investigation | Observed Value | Unit | Biological Reference Range |
|----------------------------------|----------------|-------|----------------------------|
| GGT/GammaGT | | | |
| Gamma GT | 17.5 | U/L | 11 - 34 |
| Szasz method | | | |
| BLOOD SUGAR F | | | |
| Glucose Fasting | 85 | mg/dl | 60 - 110 |
| LFT (LIVER FUNCTION TEST) | | | |
| Bilirubin (Total) | 0.62 | mg/dL | <1.0 |
| (Serum, Diazo) | | | |
| Bilirubin (Direct) | 0.17 | mg/dL | 0 - 0.3 |
| (Serum, Diazo) | | | |
| Bilirubin (Indirect) | 0.45 | mg/dL | UPTO 1.0 |
| (Serum, Calculated) | | | |
| SGOT (AST) | 20 | U/L | 5 - 31 |
| (Serum, Enzymatic) | | | |
| SGPT (ALT) | 24 | U/L | 10 - 40 |
| (Serum, Enzymatic) | | | |
| Alkaline Phosphatase | 180 | U/L | 80 - 290 |
| (Serum, pNPP) | | | |
| Total Proteins | 7.45 | g/dL | 6.4 - 8.3 |
| (Serum, Biuret) | | | |
| Albumin | 4.34 | g/dL | 3.7 - 5.6 |
| Globulin | 3.11 | g/dL | 1.8 - 3.6 |
| (Serum) | | | |
| A/G Ratio | 1.40 | g/dl | 1.1 - 2.2 |
| (Serum) | | | |
| Gamma GT | 17.5 | U/L | 11 - 34 |
| Szasz method | | | |

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

Dr. Avishesh Kumar Singh
M.D. (Pathologist)

VID :- E/14566
PID No. :- 202416917130081
Name :- Mrs Jyoti Barvekar
Age/Sex :- 28 Y / F
Ref. By. :- ARCOFEMI HEALTHCARE LIMITED

Sample Received on/at : 16/09/2024 8:54AM
Reported on/at 17/09/2024 10:52AM

Lipid Profile (Fasting Sample Required)

| | | | |
|---------------------|------|-------|-----------------------------------------------------------------------------------------|
| Cholesterol - Total | 148 | mg/dL | Desirable <200 Borderline High : 200-239 High :>=240 |
| Triglycerides Level | 120 | mg/dL | Normal : <150 Borderline High :150-199 High : 200-499 Very High : >=500 |
| HDL Cholesterol | 35 | mg/dl | Major risk factor for heart Disease :<40 Negative risk factor for heart Disease:>=60 |
| LDL Cholesterol | 89 | mg/dL | |
| VLDL Cholesterol | 24 | mg/dL | 6-38 |
| LDL/HDL RATIO | 2.54 | | 2.5-3.5 |
| CHOL/HDL RATIO | 4.23 | | 3.5 - 5 |

Note : Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

RFT (RENAL FUNCTION TEST)

Renal (Kidney) Function Test

| | | | |
|-------------------------------|------|--------|------------|
| Urea (Serum) | 23.0 | mg/dL | 15 - 43 |
| Creatinine (Serum, Jaffe) | 0.81 | mg/dL | 0.57 - 1.4 |
| Sodium | 140 | mmol/L | 135 - 145 |
| Potassium | 4.25 | mmol/L | 3.5 - 5.1 |
| Uric Acid (Serum, Uricase) | 3.26 | mg/dL | 2.6 - 6 |
| Chlorides | 101 | mmol/L | 98 - 107 |

The performance of the Roche cobas c 111 was evaluated using sigma metrics. The calculations were performed using James O. Westgard methodology.[2] This approach uses an assays total allowable error (TEa), accuracy (bias), and precision (SD) to calculate a Sigma metric to characterize the performance of that assay.

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



Dr. Avishesh Kumar Singh
M.D. (Pathologist)



VID :- E/14566
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HBA1C

| | | | | |
|-------------|------|---|-----------------------------|---------------------------------|
| HbA1c Value | 4.48 | % | 4-6=Normal Control | 6-7=Good 7-8=Fair Control |
| | | | 8-10=Unsatisfactory Control | >10%=Poor Control |

Glycosylated Hemoglobin/Glycated Hemoglobin/GlycoHemoglobin/HbA1c. [1]

Its primary use is to monitor diabetic patient's compliance and long term blood glucose level control . It is an index of diabetic control (direct relationship between poor control and development of complications). It predicts development and progression of diabetic microvascular complications.

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

Dr. Avishesh Kumar Singh
M.D. (Pathologist)



VID :- E/14566

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CLINICAL PATHOLOGY

| Investigation | Observed Value | Unit | Biological Reference Range |
|---------------------------------------|----------------|------|----------------------------|
| URINE R/M | | | |
| <u>Physical Examination</u> | | | |
| Specific Gravity | 1.020 | | 1.003-1.030 |
| Appearance | Clear | | Clear |
| Colour | Pale Yellow | | Pale Yellow |
| pH (Reaction) | Acidic | | Acidic |
| Glucose | NIL | | NIL |
| <u>Microscopic Examination</u> | | | |
| PUS CELLS | 1-2 | /hpf | 0-5 |
| Epithelial Cells | 0-2 | /hpf | 0-5 |
| RBC | Absent | /hpf | Absent |
| Bacteria | Absent | | Absent |
| Crystals | Absent | | Absent |
| Casts | Absent | | Absent |
| <u>Chemical Examination</u> | | | |
| Protein | NIL | | NIL |

Test Done by Urisys 1100 (ROCHE) Fully Automatic.

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

Dr. Avishesh Kumar Singh
M.D. (Pathologist)

VID :- E/14566

PID No. :- 202416917130081

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Complete Blood Count (Haemogram)

| Investigation | Observed Value | Unit | Biological Reference Range |
|-----------------------------------|----------------|---------------------|----------------------------|
| CBC | | | |
| <u>Erythrocytes</u> | | | |
| Haemoglobin (Hb) | 13.3 | gm/dL | 12.5 - 16.5 |
| Erythrocyte (RBC) Count | 5.06 | mill/cu.mm | 4.2 - 5.6 |
| PCV (Packed Cell Volume) | 42.6 | % | 36 - 47 |
| MCV (Mean Corpuscular Volume) | 84 | fl | 78 - 95 |
| MCH (Mean Corpuscular Hb) | 26.2 | pg | 26 - 32 |
| MCHC (Mean Corpuscular Hb Concn.) | 31.1 | g/dL | 32 - 36 |
| RDW (Red Cell Distribution Width) | 13.5 | % | 11.5 - 14 |
| <u>Leucocytes</u> | | | |
| Total Leucocytes (WBC) Count | 8600 | cells/cu.mm | 4000 - 11000 |
| Neutrophils | 57 | % | 40 - 75 |
| Lymphocytes. | 34 | % | 20 - 40 |
| Monocytes | 08 | % | 2-10 |
| Eosinophils | 01 | % | 1-6 |
| Basophils | 00 | % | 0 - 1 |
| <u>Platelets-</u> | | | |
| Platelet count | 185 | x10 ⁹ /L | 150 - 450 |
| MPV (Mean Platelet Volume) | 8.0 | fL. | 6 - 9.5 |
| PCT (Platelet Haematocrit) | 0.148 | % | 0.15 - 500 |
| PDW (Platelet Distribution Width) | 16.0 | % | 11 - 18 |

EDTA Whole Blood - Tests done on Automated ABX Micros ES60(HORIBA) Cell Counter. WBC, RBC & Platelet count by impedance method, WBC differential by VCS technology & other parameters calculated) All abnormal Haemograms are reviewed & confirmed microscopically. Differential count is based on approximately 10,000 cells.

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



Dr. Avishesh Kumar Singh
M.D. (Pathologist)



VID :- E/14566

PID No. :- 202416917130081

Name :- Mrs Jyoti Barvekar

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17/09/2024 10:52AM

Hematology

| Investigation | Observed Value | Unit | Biological Reference Range |
|--------------------------------------------|----------------|------|----------------------------|
| Blood Group & RH Type Screening | | | |
| ABO Group | "B" | | |
| Rh Type | "POSITIVE" | | |

Method: Column agglutination technology (CAT) is an automated. System for blood grouping which is superior in sensitivity to conventional tube method.

ESR

| | | | |
|-------------------------------------------------------------------------------|----|-----------|--------|
| ESR - Erythrocyte Sedimentation Rate (Citrate Blood) Method: Westergren | 15 | mm at 1hr | 0 - 20 |
|-------------------------------------------------------------------------------|----|-----------|--------|

Interpretation:

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma.

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

Dr. Avishesh Kumar Singh
M.D. (Pathologist)



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17/09/2024 10:52AM

PATHOLOGY

| Investigation | Observed Value | Unit | Biological Reference Range |
|--------------------------------------|----------------|------|----------------------------|
| Urine Sugar Fasting | | | |
| Urine Sugar (Fasting) | NEGATIVE | | Absent |
| Thyroid Panel 1 (T3, T4, TSH) | | | |
| Remark | | | |

Method Used : ELFA (Enzyme Linked Fluorescence Assay) on Mini Vidas most Efficient Analyzer Internationally accepted most advanced technology with high quality result.

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

Dr. Avishesh Kumar Singh
M.D. (Pathologist)