



To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	POOJA RAUT
DATE OF BIRTH	01-01-1982
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	13-01-2024
BOOKING REFERENCE NO.	23M120947100080952S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. RAUT SANTOSH KUMAR
EMPLOYEE EC NO.	120947
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	SIDHPUR HIGHWAY
EMPLOYEE BIRTHDATE	05-02-1978

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **26-12-2023** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager
HRM Department
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))





प्रति,

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

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा 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	POOJA RAUT
जन्म की तारीख	01-01-1982
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	13-01-2024
बुकिंग संदर्भ सं.	23M120947100080952S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MR. RAUT SANTOSH KUMAR
कर्मचारी की क.कू.संख्या	120947
कर्मचारी का पद	SINGLE WINDOW OPERATOR A
कर्मचारी के कार्य का स्थान	SIDHPUR HIGHWAY
कर्मचारी के जन्म की तारीख	05-02-1978

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 26-12-2023 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा 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 इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

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

नाम
Name Santosh Kumar Raut

भारतीय कोड नं.
Employee Code No. 120947


जारीकर्ता अधिकारी
Issuing Author**




धारक के हस्ताक्षर
of Holder

DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:	Date:	Time:
Patient Name: Pooja		Age / Sex:
		Height:
		Weight:
History:	C/O COMPT Health check.	
Allergy History:		
Nutritional Screening:	Well-Nourished / Malnourished / Obese	
Examination:	VV 2/6 11/8 6/11/8 Vnt com 6/6 6/6 6/6 Colours vision - normal	
Diagnosis:	Refractive error	

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Eye examination:

	RIGHT			LEFT		
	S	C	A	S	C	A
D		0.75	20		0.50	160
N	1.25	0.75	20	1.25	0.50	160


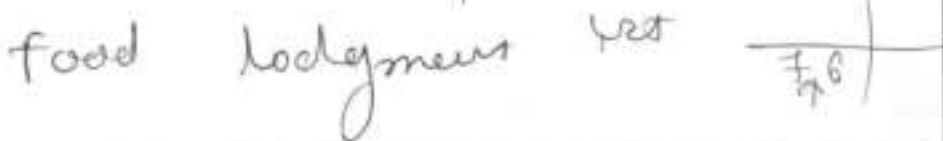
Other Advice:

Follow-up:

Consultant's Sign:



DR. SEJAL J AMIN
B.D.S, M.D.S (PERIODONTIST)
IMPLANTOLOGIST
REG NO: A-12942

UHID:	OSP 33015	Date:	13/1/24	Time:	
Patient Name:	Pooja Raut	Age / Sex:	42 / F	Height:	
		Weight:			
Chief Complain:					
History:	Resetline denton check up				
Allergy History:					
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:					
Extra oral :					
Intra oral – Teeth Present :					
Teeth Absent :	food lodgements rest 				
Diagnosis:					

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Other Advice:

Fcc 'ist $\frac{1}{6}$

Follow-up:

Consultant's Sign:

Sejun

DR. DIPESH FATANIYA
 M.D., IDCCM.
 CRITICAL CARE MEDICINE
 M.NO.-9909906809
 R.NO.G-41495

UHID: <u>OSP 33015</u>		Date: <u>13/1/24</u>	Time:
Patient Name: <u>D'OOVA RAUT</u>		Height:	Weight:
Age/Sex: <u>42/F</u> LMP:			
History:			
C/C/O: <u>Headache up</u> <u>CO Joint pu</u> <u>Arthralgia</u>		History: <u>2 Jelum</u> <u>LSCS</u> <u>Vaccin</u> <u>Cholesterol</u>	
Allergy History:		Addiction:	
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Vitals & Examination:		<u>116</u> <u>11.7</u>	
Temperature:		<u>62</u> (<u>125,000</u>)	
Pulse:			
BP: <u>110/70</u>			
SPO2:			
Provisional Diagnosis:			

Pooja Patel
Age: 42y.

13/1/24

NO COMPLAINTS.

R

O/H
3-4/28-30.

— Will gynae
Rt at present

Keep: 6/1/24.

— SOS Prep.

O/H
\$ Varicella / 20/24.

CO: 13yrs.
\$ No Abcess
No 40 PL

NO DR/HI/THREAT.



LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3270359
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type :	Mobile No :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O23249153

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Haemogram (CBC)			
Haemoglobin	11.7	G%	12.0 - 15.0
Platelet Count	125000	/ μ L	150000.00 - 410000.00
Lipid Profile			
LDL Cholesterol	105.87	mg/dL	0.00 - 100.00

Abnormal Result(s) Summary End

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3270359
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 09:53	Acc. Remarks : Normal	Ref Id2 : O23249153

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin	L 11.7	G%	12.0 - 15.0
RBC (Electrical Impedance)	4.10	millions/cumm	3.80 - 4.80
PCV(Calc)	36.49	%	36.00 - 46.00
MCV (RBC histogram)	89.0	fL	83.00 - 101.00
MCH (Calc)	28.7	pg	27.00 - 32.00
MCHC (Calc)	32.2	gm/dL	31.50 - 34.50
RDW (RBC histogram)	14.60	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	5530	/μL	4000.00 - 10000.00
Neutrophil	[%] 54.0	%	EXPECTED VALUES 40.00 - 70.00 [Abs] 2986 /μL EXPECTED VALUES 2000.00 - 7000.00
Lymphocyte	39.0	%	20.00 - 40.00 2157 /μL 1000.00 - 3000.00
Eosinophil	3.0	%	1.00 - 6.00 166 /μL 20.00 - 500.00
Monocytes	4.0	%	2.00 - 10.00 221 /μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00 0 /μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	L 125000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.38		0.78 - 3.53

SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Total WBC count within normal limits.
Platelet	Thrombocytopenia
Parasite	Malarial Parasite not seen on smear.

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
 M.D. (Pathologist)

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LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	PL ID : 3270359
Bill. Loc. : Aashka hospital		Pl. Loc :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 10:06	Acc. Remarks : Normal	Ref Id2 : O23249153

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour	Pale yellow
Transparency	Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.015	1.005 - 1.030
pH	5.50	5 - 8
Leucocytes (ESTERASE)	Negative	Negative
Protein	Negative	Negative
Glucose	Negative	Negative
Ketone Bodies Urine	Negative	Negative
Urobilinogen	Negative	Negative
Bilirubin	Negative	Negative
Blood	Negative	Negative
Nitrite	Negative	Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/µL	Nil
Yeast	Nil	/µL	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

Notes: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : **POOJA RAUT** Sex/Age : **Female/ 42 Years** Case ID : **40102200247**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3270359**
 Bill. Loc. : **Aashka hospital** Pt. Loc :
 Reg Date and Time : **13-Jan-2024 09:20** Sample Type : **Spot Urine** Mobile No :
 Sample Date and Time : **13-Jan-2024 09:20** Sample Coll. By : Ref Id1 : **OSP33015**
 Report Date and Time : **13-Jan-2024 10:06** Acc. Remarks : **Normal** Ref Id2 : **023249153**

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dl.	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 13-Jan-2024 13:51





LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3270359
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No. :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 13:49	Acc. Remarks : Normal	Ref Id2 : Q23249153
TEST	RESULTS	UNIT BIOLOGICAL REF RANGE
		REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F <small>Photometric Hexokinase</small>	84.70	mg/dL	70 - 100
Plasma Glucose - PP <small>Photometric Hexokinase</small>	75.19	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.

<100 mg/dL : Normal level

100-<126 mg/dL: Impaired fasting glucoseer guidelines

>=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 7 of 13

Printed On : 13-Jan-2024 13:51





LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3270359
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Serum	Mobile No :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 12:13	Acc. Remarks : Normal	Ref Id2 : O23249153

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <small>Colorimetric, CHOD-PGD</small>	179.17	mg/dL	110 - 200
HDL Cholesterol	62.3	mg/dL	48 - 77
Triglyceride <small>Glycerol Phosphate Oxidase</small>	54.99	mg/dL	<150
VLDL <small>Calculated</small>	11.00	mg/dL	10 - 40
Chol/HDL <small>Calculated</small>	2.88		0 - 4.1
LDL Cholesterol <small>Calculated</small>	H 105.87	mg/dL	0.00 - 100.00

NEW ATP III GUIDELINES (MAY 2001). MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note (LL-Very Low, L-Low, H-High, HH-Very High ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3270359
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Serum	Mobile No :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 12:13	Acc. Remarks : Normal	Ref Id2 : O23249153

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with PSP</i>	20.90	U/L	14 - 59	
S.G.O.T. <i>UV with PSP</i>	18.44	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	77.65	U/L	46 - 116	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	18.28	U/L	0 - 38	
Proteins (Total) <i>Colorimetric, Biuret</i>	7.93	gm/dL	6.40 - 8.30	
Albumin <i>Bromocresol purple</i>	4.75	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	3.18	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.5		1.0 - 2.1	
Bilirubin Total <i>Photometry</i>	0.42	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <i>Diazotization reaction</i>	0.25	mg/dL	0 - 0.50	
Bilirubin Unconjugated <i>Calculated</i>	0.17	mg/dL	0 - 0.8	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 9 of 13

Printed On : 13-Jan-2024 13:51



Neuberg Supratech Reference Laboratories Private Limited

"KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006
079-40408181 / 61618181 contact@supratechlabs.com www.neubergsupratech.com



LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3270359
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Serum	Mobile No :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 12:13	Acc. Remarks : Normal	Ref Id2 : O23249153

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <small>GLDH</small>	12.7	mg/dL	7.00 - 18.70	
Creatinine	0.69	mg/dL	0.50 - 1.50	
Uric Acid <small>Uricase</small>	3.64	mg/dL	2.6 - 6.2	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 13-Jan-2024 13:51

Page 10 of 13





LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3270359
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 10:06	Acc. Remarks : Normal	Ref Id2 : O23249153

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C	5.07	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	98.81	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.
 Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
 Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
 Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.
 In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.
 The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah
 M.D. (Pathologist)

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LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	PL ID : 3270359
Bill. Loc. : Aashka hospital		PL Loc :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Serum	Mobile No :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 10:42	Acc. Remarks : Normal	Ref Id2 : O23249153

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3)	80.87	ng/dL	70 - 204	
Thyroxine (T4) <small>CMIA</small>	5.93	ng/dL	4.87 - 11.72	
TSH <small>CMIA</small>	1.39	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PPTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy

First trimester
Second trimester
Third trimester

Reference range (microu/ml)

0.24 - 2.00
0.43-2.2
0.8-2.5

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 12 of 13

Printed On : 13-Jan-2024 13:51





LABORATORY REPORT



Name : POOJA RAUT	Sex/Age : Female/ 42 Years	Case ID : 40102200247
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3270359
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 13-Jan-2024 09:20	Sample Type : Serum	Mobile No. :
Sample Date and Time : 13-Jan-2024 09:20	Sample Coll. By :	Ref Id1 : OSP33015
Report Date and Time : 13-Jan-2024 10:42	Acc. Remarks : Normal	Ref Id2 : O23249153

Interpretation Note:

Ultra sensitive thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

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

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note (L-Very Low, LL-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 13 of 13

Printed On : 13-Jan-2024 13:51



PATIENT NAME: POOJA RAUT
GENDER/AGE: Female / 42 Years
DOCTOR: DR. HASIT JOSHI
OPDNO: OSP33015

DATE: 13/01/24

2D-ECHO

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 34mm	
LEFT ATRIUM	: 34mm	
LV Dd / Ds	: 44/31mm	EF 55%
IVS / LVPW / D	: 10/9mm	
IVS	: INTACT	
IAS	: FLOPPY	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 0.9/0.6m/s	
AORTIC	: 1.0m/s	
PULMONARY	: 0.8m/s	
COLOUR DOPPLER	: MILD MR/TR	
RVSP	: 32mmHg	
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.	

CARDIOLOGIST
DR. HASIT JOSHI (9825012235)



REPORT REPORT REPORT

Aashka Hospitals Ltd.
Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



aashka
HOSPITAL



PATIENT NAME: POOJA RAUT

GENDER/AGE: Female / 42 Years

DATE: 13/01/24

DOCTOR:

OPDNO: OSP33015

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.

No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.

Both hilar shadows and C.P. angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

REPORT REPORT REPORT

PATIENT NAME: POOJA RAUT

GENDER/AGE: Female / 42 Years

DATE: 13/01/24

DOCTOR:

OPDNO: OSP33015

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: H/o surgery.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.1 x 4.5 cms in size.

Left kidney measures about 10.2 x 4.4 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.

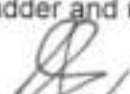
No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 460 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 4.3 mm. No evidence of uterine mass lesion is seen.

Bilateral adnexa appears normal.

COMMENT: Normal sonographic appearance of liver, pancreas, spleen, kidneys, para aortic region, bladder and uterus.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST



PATIENT NAME: POOJA RAUT

GENDER/AGE: Female / 42 Years

DATE: 13/01/24

DOCTOR:

OPDNO: OSP33015

BILATERAL MAMMOGRAM

Dedicated digital mammography with Craniocaudal and medio lateral oblique view was performed.

Fibrofatty and glandular parenchyma is noted on either side. No definite evidence of mass, abnormal microcalcification or architectural distortion is seen. No evidence of skin thickening or nipple retraction is seen.

COMMENT: Normal mammography and sonography of breast on either side (BIRADS - Category - I).

BIRADS Categories:

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

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

Screening mammogram:

Women with no symptoms

AGE: 35-39: Baseline study.

AGE: 40-49: Every 1-2 years

AGE: 50 and above: Every year


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

REPORT REPORT REPORT

13.01.2024 12:04:51 PM
MAASHA HOSPITAL LTD.
SARDASAN
GANDHINAGAR

Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

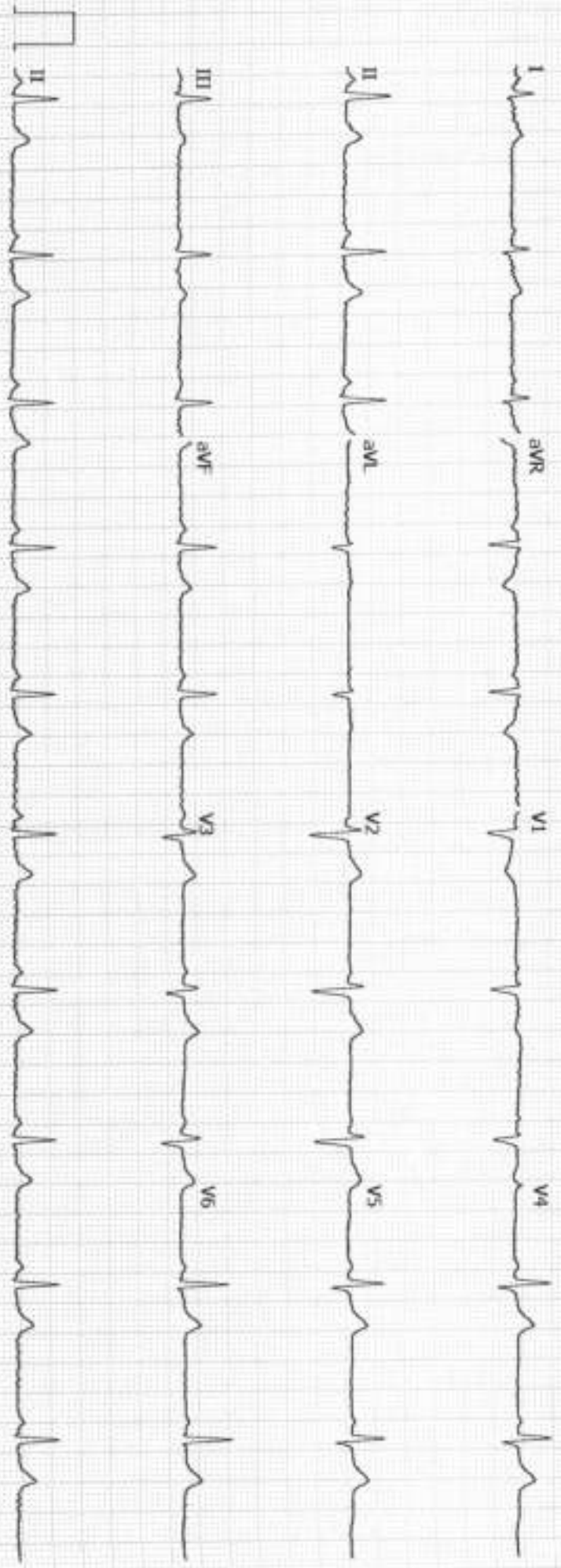
Room:

60 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 80 ms
QT / QTcBaz : 402 / 402 ms
PR : 124 ms
P : 74 ms
RR / PP : 1000 / 1000 ms
P / QRS / T : 72 / 74 / 50 degrees

Normal sinus rhythm
Normal ECG



Unconfirmed