

| Patient Name | Mino Saiswa | Date | 3/8/24 | | |
|-------------------------|--------------------------------|--|-----------------|----------------------|--------------------|
| Age | | UHID No | | | |
| Sex | Female | Ref By | | | |
| Occupation | Home maker | Phone No | | | |
| | | Email | | | |
| HEALTH ASSESSMENT FORM | | | | | |
| A - GENERAL EXAMINATION | | | | | |
| CHIEF COMPLAINTS | H/o Gall bladder stone NONE | | | | |
| MEDICAL HISTORY | HYPERTENSION | Asthama | Heart Disease | Thyroid Disorder | Allergy |
| | NO. | NO. | NO. | NO. | NO. |
| | Diabetes | Stroke | Kidney Disorder | Tuberculosis | Liver Disorder |
| | NO. | NO. | NO. | NO. | NO. |
| | Other History | NONE | | | |
| SURGICAL HISTORY | Piles | Fissures | Fistula | Hernia | Gall Bladder Stone |
| | NO. | NO. | NO. | NO. | NO. |
| | Other Surgical History | | | | |
| GYNECOLOGICAL HISTORY | AGE MENOPAUSE | MENARCHE AT YEARS OF AGE | Regularity | Duration | OTHER |
| | | 13 yrs. | Yes. | 2-3 days. 26 day. | |
| | Other Gynecological History | NO. | | | |
| BREAST EXAMINATION | | RIGHT | LEFT | | |
| | Skin | } NO. | } NO. | | |
| | Nodule | | | | |
| | Nipple | | | | |
| | Pain | | | | |
| | Other Remarks | | | | |
| CURRENT MEDICATIONS | Sr. No | Complaints | Dosage | Duration | |
| | | 1) Hair fall medication name not known. | | | |
| | | | | | |
| | | | | | |

| NAME | Minu Jaiswal | Weight | 55.5 kg |
|-------------------------------|-----------------------------|-----------------------------|------------------|
| BP | 110/70 mmHg | Height | 156 cm |
| Pulse | 70 bpm | SPO2 | 96% RA |
| Temperature | 37.2 | Peripheral Pulses | fast |
| Oedema | absent | Breath Sound | |
| Heart Sound | | | |
| B - SYSTEMIC EXAMINATION | | | |
| FILL YES/NO | | | |
| CONSTITUTIONAL | | GENITOURINARY SYSTEM | |
| Fever | } no. | Frequency of urine | } no. |
| Chills | | Blood in urine | |
| Recent weight gain | | Incomplete empty of bladder | |
| EYES | | OBS/GYNE. | |
| Eye pain | } no. | Nycturia | } no. |
| Spots before eyes | | Dysuria | |
| Dry eyes | | Urge Incontinence | |
| Wearing glasses | | Abnormal bleed | |
| Vision changes | | Vaginal Discharge | } 0.5ml Fibroids |
| Itchy eyes | | Irregular menses | |
| EAR/NOSE/THROAT | | Midcycle bleeding | |
| Earaches | } no. | MUSCULOSKELETAL | |
| Nose bleeds | | Joint swelling | } no. |
| Sore throat | | Joint pain | |
| Loss of hearing | | Limb swelling | |
| Sinus problems | | Joint stiffness | |
| Dental problems | | | |
| CARDIOVASCULAR | | INTEGUMENTARY(SKIN) | |
| Chest pain | } no. | Acne | } no. |
| Heart rate is fast/slow | | Breast pain | |
| Palpitations | | Change in mole | |
| Leg swelling | | Breast | |
| RESPIRATORY | | NEUROLOGICAL | |
| Shortness of breath | } no. | Confused | } no. |
| Cough | | Sensation in limbs | |
| Orthopnoea | | Migraines | |
| Wheezing | | Difficulty walking | |
| Dyspnoea | | | |
| Respiratory distress in sleep | | PSYCHIATRIC | |
| GASTROINTESTINAL | | Suicidal | } no. to anger |
| Abdominal pain | } Epigastric Pain, Bloating | Change in personality | |
| Constipation | | Anxiety | |
| Heartburn | | Sleep Disturbances | |
| Vomiting | | Depression | |
| Diarrhoea | | Emotional | |
| Melena | | | |
| | | | |

5107184



भारत सरकार
GOVERNMENT OF INDIA

श्रीमती मीनु जाँसेवाल
Minu Jaiswal

जन्म वर्ष / Year of Birth: 1974
लिंग / Gender: Female

5085 4701 5422



आधार - आम आदमी का अधिकार

आधार फाई कार्ड

Dr Sandeep Deshpande
Dr Sandeep Deshpande
MD (CARDIOLOGIST)
REG - 72944

VRX HEALTHCARE PVT. LTD.
Shop No. 34-38, Gayatri Satsang Building,
Behind Vishnu Shivam Mall,
Thakur Village, Kandivli East,
Mumbai, Maharashtra - 400 101
Mobile No.: 7506155999 / 7045955999



Report

VRX HEALTH CARE PVT. LTD.

Name : MS. MINU JAISWAL
Age/Gender : 40 Years 0 Months /F
Referred By : MEDIWHEEL

UHID : VRX-42696
Registered On : 03/08/2024 09:23
Collected On : 03/08/2024 09:37
Reported On : 03/08/2024 15:27

Investigations Observed Value Bio. Ref. Interval METHOD

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40

CBC-COMplete BLOOD COUNT

| Investigations | Observed Value | Bio. Ref. Interval | METHOD |
|--------------------------|----------------------------|------------------------|--------|
| HAEMOGLOBIN | 12.4 | 12.0 - 15.0 gm/dl | |
| RBC COUNT | 4.08 | 3.8 - 4.8 Millions/Cmm | |
| PACKED CELL VOLUME | 37.4 | 40.0 - 50.0 % | |
| MEAN CORP VOL (MCV) | 91.67 | 83.0 - 101.0 fL | |
| MEAN CORP HB (MCH) | 30.39 | 27.0 - 32.0 pg | |
| MEAN CORP HB CONC (MCHC) | 33.16 | 31.5 - 34.5 g/dl | |
| RDW | 13.1 | 11.6 - 14.0 % | |
| WBC COUNT | 6.4 | 4.0 - 10.0 *1000/cmm | |
| NEUTROPHILS | 65 | 40 - 80 % | |
| LYMPHOCYTES | 29 | 20 - 40 % | |
| EOSINOPHILS | 02 | 1 - 6 % | |
| MONOCYTES | 04 | 2 - 10 % | |
| BASOPHILS | 0 | | |
| PLATELETS COUNT | 140 | 150 - 410 *1000/Cmm | |
| PLATELETS ON SMEAR | Just Adequate | | |
| MPV | 16.5 | 6.78 - 13.46 % | |
| PDW | 15.9 | 9 - 17 % | |
| RBC MORPHOLOGY | NORMOCYTIC NORMOCHROMIC | | |

REMARKS

EDTA Whole Blood - Tests done on Automated NIHON KOHDEN MEK-7300K 5 Part Analyzer. (Haemoglobin by Photometric and WBC, RBC, Platelet count by Impedance method, WBC differential by Floating Discriminator Technology and other parameters are calculated)
All Abnormal Haemograms are reviewed and confirmed microscopically. Differential count is based on an approximately 10,000 cells.

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N. Jain

Dr. Vipul Jain
M.D.(PATH)



ENTERED BY - SANTOSH M

CHECKED BY - SNEHA G

Physio Lounge & Diagno Lounge (VRX Health Care Pvt. Ltd.)



Report

VRX HEALTH CARE PVT. LTD.

| | | | |
|-------------|------------------------|---------------|--------------------|
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|---|----------------|----------------------------|------------|
| MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40 | | | |
| ESR | 13 | < 20 mm at the end of 1Hr. | WESTERGREN |
| INTERPRETATION | | | |
| <p>ESR(Erythrocyte Sedimentation Rate)-The ESR measures the time required for erythrocytes from a whole blood sample to settle to the bottom of a vertical tube. Factors influencing the ESR include red cell volume, surface area, density, aggregation, and surface charge. The ESR is a sensitive, but nonspecific test that is frequently the earliest indicator of disease. It often rises significantly in widespread inflammatory disorders due to infection or autoimmune mechanisms. Such elevations may be prolonged in localized inflammation and malignancies.</p> <p>Increased ESR: may indicate pregnancy, acute or chronic inflammation, tuberculosis, rheumatic fever, paraproteinemias, rheumatoid arthritis, some malignancies, or anemia.</p> <p>Decreased ESR: may indicate polycythemia, sickle cell anemia, hyperviscosity, or low plasma protein.</p> | | | |

--- End of the Report ---

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VRX

Dr. Vipul Jain
M.D.(PATH)



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CHECKED BY - SNEHA G

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Report

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|-------------|------------------------|---------------|--------------------|
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| Investigations | Observed Value | Bio. Ref. Interval | METHOD |
|----------------|----------------|--------------------|--------|
|----------------|----------------|--------------------|--------|

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40

URINE ROUTINE

| | | | |
|------------------|-------------|---------|--|
| COLOUR | PALE YELLOW | | |
| APPEARANCE | CLEAR | | |
| SPECIFIC GRAVITY | 1.015 | | |
| REACTION (PH) | 6.0 | | |
| PROTEIN | Absent | | |
| SUGAR | Absent | | |
| KETONE | Absent | | |
| BILE SALT | Absent | | |
| BILIRUBIN | Absent | | |
| OCCULT BLOOD | Absent | | |
| PUS CELLS | 1-2 | < 6 hpf | |
| EPITHELIAL CELLS | 2-4 | < 5 hpf | |
| RBC | NIL | < 2 hpf | |
| CASTS | NIL | | |
| CRYSTALS | NIL | | |
| AMORPHOUS DEBRIS | Absent | | |
| BACTERIA | NIL | | |
| YEAST CELLS | Absent | | |
| SPERMATOOZOA | Absent | | |

--- End of the Report ---

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Report

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| | | | |
|--------------|-------------------------|---------------|--------------------|
| Name | : MS. MINU JAISWAL | UHID | : VRX-42696 |
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| Referred By | : MEDIWHEEL | Collected On | : 03/08/2024 09:37 |
| | | Reported On | : 03/08/2024 15:27 |

| Investigations | Observed Value | Bio. Ref. Interval | METHOD |
|---|----------------|--------------------|--|
| <u>MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40</u> | | | |
| BLOOD GROUP | O POSITIVE | | SLIDE AGGLUTINATION - FORWARD GROUPING |

--- End of the Report ---

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Report

VRX HEALTH CARE PVT. LTD.

| | | | |
|--------------|------------------------|---------------|--------------------|
| Name | : MS. MINU JAISWAL | UHID | : VRX-42696 |
| Age / Gender | : 40 Years 0 Months /F | Registered On | : 03/08/2024 09:23 |
| Referred By | : MEDIWHEEL | Collected On | : 03/08/2024 12:25 |
| | | Reported On | : 03/08/2024 15:27 |

| | | | |
|----------------|----------------|--------------------|--------|
| Investigations | Observed Value | Bio. Ref. Interval | METHOD |
|----------------|----------------|--------------------|--------|

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40

FASTING BLOOD SUGAR

| | | | |
|--------------|--------|-------------|--------|
| FBS | 84.83 | < 100 mg/dl | GODPOD |
| URINE SUGAR | ABSENT | | GODPOD |
| URINE KETONE | ABSENT | | GODPOD |

INTERPRETATION

SAMPLE : FLUORIDE, PLASMA

Plasma Glucose Fasting : Non-Diabetic : < 100 mg/dl

Diabetic : \geq 126 mg/dl

Pre-Diabetic : 100 – 125 mg/dl

Plasma Glucose Post Lunch : Non-Diabetic : < 140

Diabetic : \geq 200 mg/dl

Pre-Diabetic : 140- 199 mg/dl.

Random Blood Glucose : Diabetic : \geq 200 mg/dl

References : ADA(American Diabetic Association Guidelines 2016)

Technique : Fully Automated PENTRA C-200 Clinical Chemistry Analyser.

**All Test Results are subjected to stringent international External and Internal Quality Control Protocols

PPBS

| | | | |
|--------------|--------|-------------|--------|
| PPBS | 97.32 | < 140 mg/dl | GODPOD |
| URINE SUGAR | ABSENT | | GODPOD |
| URINE KETONE | ABSENT | | GODPOD |

INTERPRETATION

SAMPLE : FLUORIDE, PLASMA

Plasma Glucose Fasting : Non-Diabetic : < 100 mg/dl

Diabetic : \geq 126 mg/dl

Pre-Diabetic : 100 – 125 mg/dl

Plasma Glucose Post Lunch : Non-Diabetic : < 140

Diabetic : \geq 200 mg/dl

Pre-Diabetic : 140- 199 mg/dl.

Random Blood Glucose : Diabetic : \geq 200 mg/dl

References : ADA(American Diabetic Association Guidelines 2016)

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Dr. Vipul Jain
M.D.(PATH)



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Physio Lounge & Diagno Lounge (VRX Health Care Pvt. Ltd.)



Report

VRX HEALTH CARE PVT. LTD.

Name : MS. MINU JAISWAL
 Age/Gender : 40 Years 0 Months /F
 Referred By : MEDIWHEEL

UHID : VRX-42696
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 Collected On : 03/08/2024 09:37
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Investigations Observed Value Bio. Ref. Interval METHOD

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40

Lipid Test

| Investigations | Observed Value | Bio. Ref. Interval | METHOD |
|--------------------------|----------------|--------------------|--------|
| TOTAL CHOLESTEROL | 126.5 | 130 - 200 mg/dl | |
| TRIGLYCERIDES | 90.54 | 25 - 160 mg/dl | |
| HDL CHOLESTEROL | 42.72 | 35 - 80 mg/dl | |
| LDL CHOLESTEROL | 65.67 | < 100 mg/dl | |
| VLDL CHOLESTEROL | 18.11 | 7 - 35 mg/dl | |
| LDL-HDL RATIO | 1.54 | < 3.5 mg/dl | |
| TC-HDL CHOLESTEROL RATIO | 2.96 | 2.5 - 4.0 mg/dl | |

INTERPRETATION

SAMPLE : SERUM, PLAIN

Note : Non HDL is the best risk predictor of all cholesterol measures, both for CAD(Coronary Artery Diseases) events and for strokes. High Risk patients like Diabetics, Hypertension .With family history of IHD, Smokers, the Desirable reference values for cholesterol & Triglyceride are further reduced by 10 mg % each.

*VLDL and LDL Calculated.

(References : Interpretation of Diagnostic Tests by Wallach's)

Technique : Fully Automated Pentra C-200 Biochemistry Analyzer.

**All Test Results are subjected to stringent international External and Internal Quality Control Protocols.

--- End of the Report ---

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Dr. Vipul Jain
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Report

VRX HEALTH CARE PVT. LTD.

| | | | |
|-------------|------------------------|---------------|--------------------|
| Name | : MS. MINU JAISWAL | UHID | : VRX-42696 |
| Age/Gender | : 40 Years 0 Months /F | Registered On | : 03/08/2024 09:23 |
| Referred By | : MEDIWHEEL | Collected On | : 03/08/2024 09:37 |
| | | Reported On | : 03/08/2024 15:27 |

| Investigations | Observed Value | Bio. Ref. Interval | METHOD |
|--|----------------|--------------------|------------------------|
| <u>MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40</u> | | | |
| URIC ACID | 3.49 | 2.6 - 6.0 mg/dl | URICASE |
| BUN | | | |
| UREA | 17.98 | 15 - 40 mg/dl | |
| BLOOD UREA NITROGEN | 8.40 | 7.3 - 18.8 mg/dl | |
| CREATININE | 0.85 | 0.5 - 1.4 mg/dl | Jaffe/Alkaline Picrate |
| TOTAL PROTEINS | | | |
| TOTAL PROTEINS | 7.34 | 6.0 - 7.8 g/dl | BIURET |
| ALBUMIN | 4.25 | 3.5 - 5.2 g/dl | BIURET |
| GLOBULIN | 3.09 | 2.0 - 3.5 g/dl | BIURET |
| AG RATIO | 1.38 | 1.0 - 2.0 g/dl | BIURET |
| BUN / CREAT RATIO | | | |
| BUN (Blood Urea Nitrogen) | 8.40 | 7.9 - 21.1 mg/dL | |
| Creatinine | 0.85 | 0.5 - 1.4 mg/dL | |
| BUN/Creatinine Ratio | 9.88 | 5.0 - 23.5 | |

--- End of the Report ---

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Dr. Vipul Jain
M.D.(PATH)



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CHECKED BY - SNEHA G

Physio Lounge & Diagno Lounge (VRX Health Care Pvt. Ltd.)



Report

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Age/Gender : 40 Years 0 Months /F
Referred By : MEDIWHEEL

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Investigations Observed Value Bio. Ref. Interval METHOD

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40

LIVER FUNCTION TEST

| Investigations | Observed Value | Bio. Ref. Interval | METHOD |
|----------------------|----------------|---|--------|
| SGOT | 21.59 | < 34 U/L | |
| SGPT | 10.13 | 10 - 49 U/L | |
| TOTAL BILIRUBIN | 0.56 | 0.3 - 1.2 mg/dl | |
| DIRECT BILIRUBIN | 0.19 | Adult: < 0.2 mg/dl Infant: 0.2 - 8 mg/dl | |
| INDIRECT BILIRUBIN | 0.37 | < 1.2 mg/dl | |
| TOTAL PROTEINS | 7.34 | 6.0 - 8.3 g/dl | |
| ALBUMIN | 4.25 | 3.5 - 5.2 g/dl | |
| GLOBULIN | 3.09 | 2.0 - 3.5 g/dl | |
| A/G RATIO | 1.38 | 1.0 - 2.0 mg/dl | |
| ALKALINE PHOSPHATASE | 64.23 | 42 - 98 U/L | |
| GGT | 13.4 | < 38 U/L | |

REMARKS

SAMPLE : SERUM, PLAIN
PERFORMED ON FULLY AUTOMATED PENTRA C-200 BIOCHEMISTRY ANALYZER.

--- End of the Report ---

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NRJain

Dr. Vipul Jain
M.D.(PATH)

APPROVED 

ENTERED BY - SANTOSH M

CHECKED BY - SNEHA G

Physio Lounge & Diagno Lounge (VRX Health Care Pvt. Ltd.)



Report

VRX HEALTH CARE PVT. LTD.

UHID : AM10.2400000001
Patient Name : MRS. MINU JAISWAL
Age : 41 Yrs
Gender : FEMALE
Ref. Doctor : SELF
Client Name : DIAGNO LOUNGE(ADVANCED DIAGNOSTIC CENTRE)KANDIVALI

Bill No. : A063726
Registered On : 03/08/2024,04:24 PM
Collected On : 03/08/2024,04:31 PM
Reported On : 04/08/2024,02:03 AM
SampleID : 

REPORT

Biochemistry

| Test Name | Result | Unit | Biological Reference Interval |
|---|--------|------|---|
| HbA1c (Glycylated Haemoglobin) WB-EDTA | | | |
| HbA1c (Glycylated Haemoglobin) | 4.5 | % | Normal <5.7 % Pre Diabetic 5.7 - 6.4 % Diabetic >6.5 % Target for Diabetes on therapy < 7.0 % Re-evaluation of therapy > 8.0 % Reference ADA Diabetic Guidelines 2013 |

Method : HPLC (High Performance Liquid Chromatography)

Mean Blood Glucose 82.5 mg/dL

Method : Calculated

Note

Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

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Scan to Validate



APARNA-JAIRAM
Entered By

APARNA-JAIRAM
Verified By

Dr Suvarna Deshpande
MD (Path)
Reg.No.83385


Dr Aparna Jairam
MD (Path)
Reg.No.76516

"Sample Processed At Asavlee Dr Aparna's Pathology Laboratory"

Physio Lounge & Diagno Lounge (VRX Health Care Pvt. Ltd.)





Report

VRX HEALTH CARE PVT. LTD.

UHID : AM10.24000000001
Patient Name : MRS. MINU JAISWAL
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Collected On : 03/08/2024,04:31 PM
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SampleID : 

REPORT

Biochemistry

| Test Name | Result | Unit | Biological Reference Interval |
|---|----------------------------|------|-------------------------------|
| Correlation of A1C with average glucose | | | |
| A1C (%) | Mean Blood Glucose (mg/dl) | | |
| 6 | 126 | | |
| 7 | 154 | | |
| 8 | 183 | | |
| 9 | 212 | | |
| 10 | 240 | | |
| 11 | 269 | | |
| 12 | 298 | | |

Interpretation :

1.The HbA1c levels correlate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose. This Methodology is better than the routine chromatographic methods & also for the diabetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb variants and uremia does not INTERFERE with the results in this methodology.

2.It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts.& every 3 - 4 months in well controlled diabetics.

3.Mean blood glucose (MBG) in first 30 days (0-30)before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels

Biochemistry

| Test Name | Result | Unit | Biological Reference Interval |
|-------------------------|--------|------|-------------------------------|
| G.G.T.P. U.V.Kinetic | 13.4 | U/L | 7-35 |

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APARNA-JAIRAM
Verified By

Dr Suvarna Deshpande
MD (Path)
Reg.No.83385


Dr Aparna Jairam
MD (Path)
Reg.No.76516

"Sample Processed At Asavlee Dr Aparna's Pathology Laboratory"

Physio Lounge & Diagno Lounge (VRX Health Care Pvt. Ltd.)





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Reported On : 04/08/2024,02:03 AM
SampleID :

REPORT

Immunology

| Test Name | Result | Unit | Biological Reference Interval |
|---|--|--------|-------------------------------|
| Total T3 Method : ECLIA | 78.6 | ng/dL | 58-159 |
| Total T4 Method : ECLIA | 8.2 | mcg/dl | 4.2-11.2 |
| TSH-Ultrasensitive Method : Chemiluminescent Microparticle Immunoassay | 2.482 | uIU/ml | 0.2-5.7 |
| Trimester Ranges | T3- 1st Trimester - 138-278 ng/dl 2nd Trimester- 155-328 ng/dl 3rd Trimester - 137-324 ng/dl | | |
| | T4- 1st Trimester - 7.31-15.0 mcg/dl 2nd Trimester- 8.92-17.38 mcg/dl 3rd Trimester - 7.98-17.7 mcg/dl | | |
| | TSH- 1st Trimester - 0.04-3.77 uIU/ml 2nd Trimester- 0.30-3.21 uIU/ml 3rd Trimester - 0.6-4.5 uIU/ml | | |

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Mumbai, Maharashtra - 400 101
Mobile No. : 7506155999 / 7045955999

Scan to Validate



APARNA-JAIRAM
Entered By

APARNA-JAIRAM
Verified By

Dr Suvarna Deshpande
MD (Path)
Reg.No.83385

Dr Aparna Jairam
MD (Path)
Reg.No.76516

"Sample Processed At Asavlee Dr Aparna's Pathology Laboratory"

Physio Lounge & Diagno Lounge (VRX Health Care Pvt. Ltd.)





Report

VRX HEALTH CARE PVT. LTD.

UHID : AM10.24000000001
 Patient Name : MRS. MINU JAISWAL
 Age : 41 Yrs
 Gender : FEMALE
 Ref. Doctor : SELF
 Client Name : DIAGNO LOUNGE(ADVANCED DIAGNOSTIC CENTRE)KANDIVALI

Bill No. : A063726
 Registered On : 03/08/2024,04:24 PM
 Collected On : 03/08/2024,04:31 PM
 Reported On : 04/08/2024,02:03 AM
 SampleID :

REPORT

Immunology

| Test Name | Result | Unit | Biological Reference Interval |
|---|---|------|-------------------------------|
| 1.Total T3(Total Tri- ido- thyronine) | Is one of the bound form of thyroid hormones produced by thyroid gland.Its production is tightlyregulated by TRH(Thyrotropin Releasing Hormone) from hypothalamus and TSH (Thyroid stimulating hormone) from anterior pituitary gland.In euthyroid state,thyroid gland secretes 10- 15% of T3,which in circulation is heavily protein bound and is the principle bioactive form.T4 is converted to T3 by deiodinases in peripherally (Mainly Liver),and in target organs . Total T3 levels are increased in primary and central hyperthyroidism and T3 toxicosis& its levels are decreased in the primary and central hypothyroidism.but its normal in case of subclinical hypothyroidism and hyperthyroidism alterations in Total T 3 levels can also occur in conditions like Non -Thyroidal illness,pregnancy, certain drugs and genetic conditions. | | |
| 2.Total T4 (Total tetra- iodo-thyronine or total thyroxin) | is one of the bound form of thyroid hormones produced by thyroid gland .its production is tightly regulated TRH(Thyrotropin Releasing Hormone) from hypothalamus and TSH (Thyroid stimulating hormone) from anterior pituitary gland .In euthyroid state,thyroid gland secretes 85- 90% of Thyroxine,which is circulated is heavily protein bound and has more half life than T 3 .Total T4 levels are increased in primary and central hyperthyroidism and its levels are decreased in primary and central hypothyroidism but its normal in case of subclinical hypothyroidism and hyper thyroidism and T3 Toxicosis is alterations in Total T4 Levels can also occur in conditions like Non -Thyroidal illness, pregnancy,certain drugs and genetic conditionS. | | |
| 3.TSH (Thyroid stimulating hormone or Thyrotropin) | is produced by anterior pituitary in response to its stimulation by TRH (Thyrotropin releasing hormone) released from hypothalamus .TSH and TRH releases are regulated by thyroid hormone through a feedback mechanism. There are several cases causes that can lead to thyroid gland dysfunction or dysregulation which eventually results in hypothyroidism or hypothyroidism based on the thyroid hormones and TSH levels it can be classified as subclinical primary or central hypothyroidism or hypothyroidism apart from this certain other conditions can also lead to diagnostic confusions in the interpretation of a thyroid function test .They are pregnancy, Levothyroxine therapy certain other drug therapy assay interference alterations in the thyroid hormones binding proteins concentration and its binding capacity conditions of non-thyroidal illness and certain genetic conditions . TSH secretions exhibits diurnal pattern, so its advices able to check it during morning. Measurement of TSH alone may be misleading in conditions like recent treatment for thyrotoxicosis, TSH assay interference, central hypothyroidism. TSH Secreting pituitary adenoma,resistance to thyroid hormone ,and disorders of thyroid hormones transport or metabolism.TSH receptor present in thyroid gland can be stimulated or inhibited by autoantibodies produced during autoimmune thyroid disorders which can lead to functional abnormalities of thyroid gland.The American Thyroid association determined that only TSH assays with third generation functional sensitivity (Sensitivity =0.01 mIU/L) are sufficient for use as screening tests for hypothyroidism their recommendation in consistent with the National Academy of Clinical Biochemistry Laboratory Medicine practice guideline for assessment of thyroid function. | | |

----- End of Report -----

Results are to be correlated clinically

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 Mumbai, Maharashtra - 400 101
 Mobile No.. 7506155999 / 7045955999

Scan to Validate



APARNA-JAIRAM
 Entered By

APARNA-JAIRAM
 Verified By

Dr Suvarna Deshpande
 MD (Path)
 Reg.No.83385

Aparna
 Dr Aparna Jairam
 MD (Path)
 Reg.No.76516

"Sample Processed At Asavlee Dr Aparna's Pathology Laboratory"

Physio Lounge & Diagno Lounge (VRX Health Care Pvt. Ltd.)





Patient Name: MS. MINU JAISWAL

Age: 40 Yrs/ F.

Ref. by: MEDIWHEEL

Date: 03/08/2024

SONOGRAPHY OF ABDOMEN AND PELVIS

TECHNIQUE: Real time, B mode, gray scale sonography of the abdominal and pelvic organs was performed with convex transducer.

LIVER: The liver is normal in size, shape and has smooth margins. The hepatic parenchyma shows homogeneous echotexture without solid or cystic mass lesion or calcification. No evidence of intrahepatic biliary radical dilatation.

PORTAL VEIN: Portal vein appears normal.

GALL BLADDER: The gall bladder is well distended. **Multiple (50-60) gall bladder calculi measuring approx. 2-3 mm each are seen within the lumen with sludge.** There is no evidence wall thickening or pericholecystic collection.

COMMON BILE DUCT: The visualised common bile duct is normal in caliber. No evidence of calculus is seen in the common bile duct.

PANCREAS: The head and body of pancreas is normal in size, shape, contours and echo texture.

SPLEEN: The spleen is normal in size and shape. Its echotexture is homogeneous.

KIDNEYS:

| Right kidney | Left kidney |
|--------------|--------------|
| 8.9 x 3.8 cm | 9.7 x 4.2 cm |

The kidneys are normal in size and have smooth renal margins. Cortical echotexture is normal. The central echo complex does not show evidence of hydronephrosis. No evidence of hydroureter or calculi, bilaterally.

URINARY BLADDER: The urinary bladder is well distended. It shows uniformly thin walls and sharp mucosa. No evidence of calculus is seen. No evidence of mass or diverticulum is noted.
Pre void: 10 cc

.....Continue On Page 2





(MS. MINU JAISWAL PG2)

PELVIS:

The uterus is anteverted. It measures 6.7 x 4.0 x 7.9 cm in the longitudinal, antero-posterior and transverse dimensions, respectively. The uterine margins are smooth and do not reveal any contour abnormalities.

The endometrial echo is in the midline and measures 3.6 mm.

Bilateral ovaries are normal in size and echo pattern.

Right ovary measures 2.6 x 1.6 cm.

Left ovary measures 3.0 x 1.9 cm.

No adnexal mass is seen.

There is no free fluid in the cul-de-sac. There is no obvious evidence of significant lymphadenopathy.

IMPRESSION:

- Cholelithiasis without cholecystitis.
- GB sludge

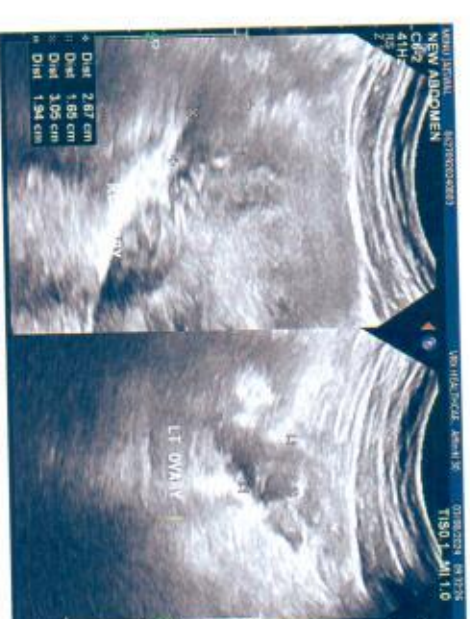
Thanks for the reference.

With regards,

**DR. FORAM AJMERA
CONSULTANT RADIOLOGIST.**

VRX HEALTHCARE PVT. LTD.
Shop No 34-38, Gayatri Satsang Building,
Behind Vishnu Shivam Mall,
Thakur Village, Kandivali East,
Mumbai, Maharashtra - 400 101
Mobile No.: 7506155999 / 7045955900







| | | |
|------------------------|------------------|-------------------------|
| Patient's name: | MS. MINU JAISWAL | F / 40 Yrs |
| Referred By: | MEDIWHEEL | Date: 03/08/2024 |

SONOMAMMOGRAPHY OF BOTH BREASTS

TECHNIQUE: Real time, B mode, gray scale sonography of both the breasts was performed with linear transducer.

FINDINGS:

The breast parenchyma shows predominantly fibro glandular component.

Nipple and subareolar regions appear normal. No abnormal duct dilatation is seen.

No obvious focal lesion seen in both breasts.

Retro mammary region appears normal.

Few reactive lymph nodes with intact fatty hilum and normal cortical thickness are seen in the axillae bilaterally.

IMPRESSION:

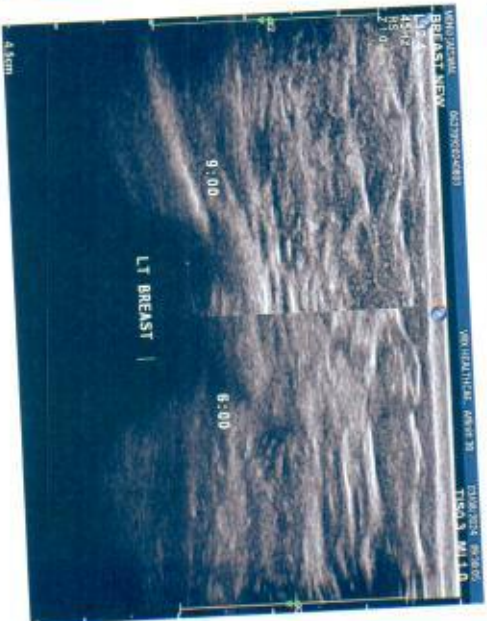
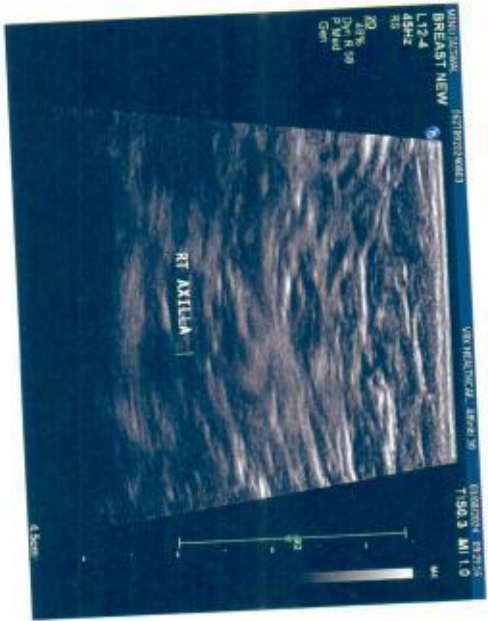
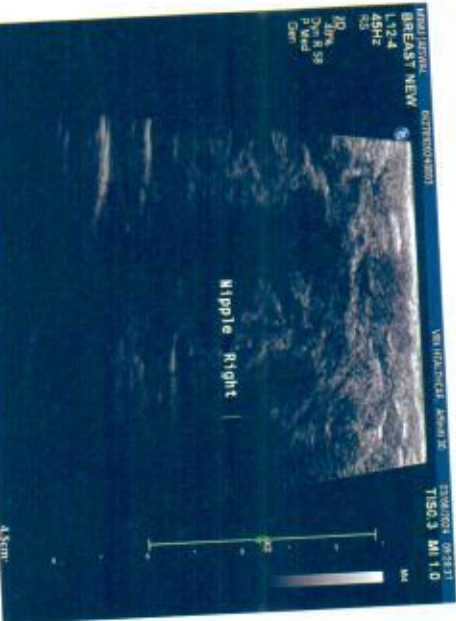
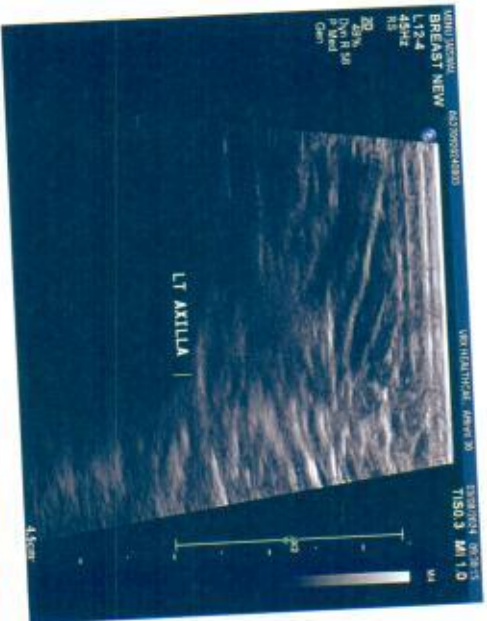
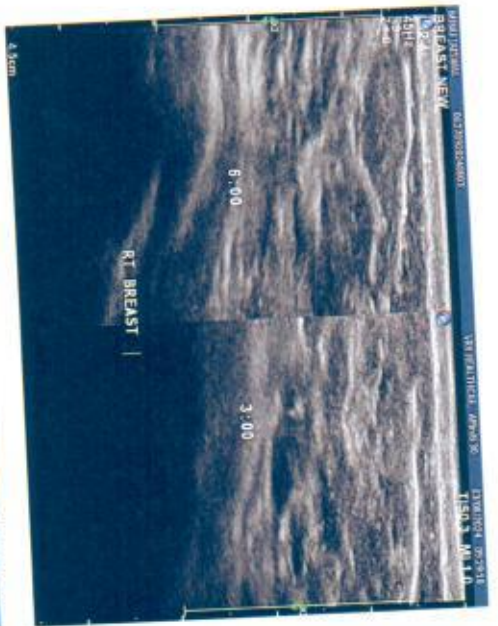
- No significant abnormality noted in both breasts.
- BIRADS 1

Thanks for the reference.

With regards,

**DR.FORAM AJMERA
CONSULTANT RADIOLOGIST.**

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11 JAISWAL, MINU
DOB 05/06/1984 40 Years Female

03/08/2024 11:16:10

VRX HEALTHCARE PVT LTD

Rate 71 Sinus rhythm

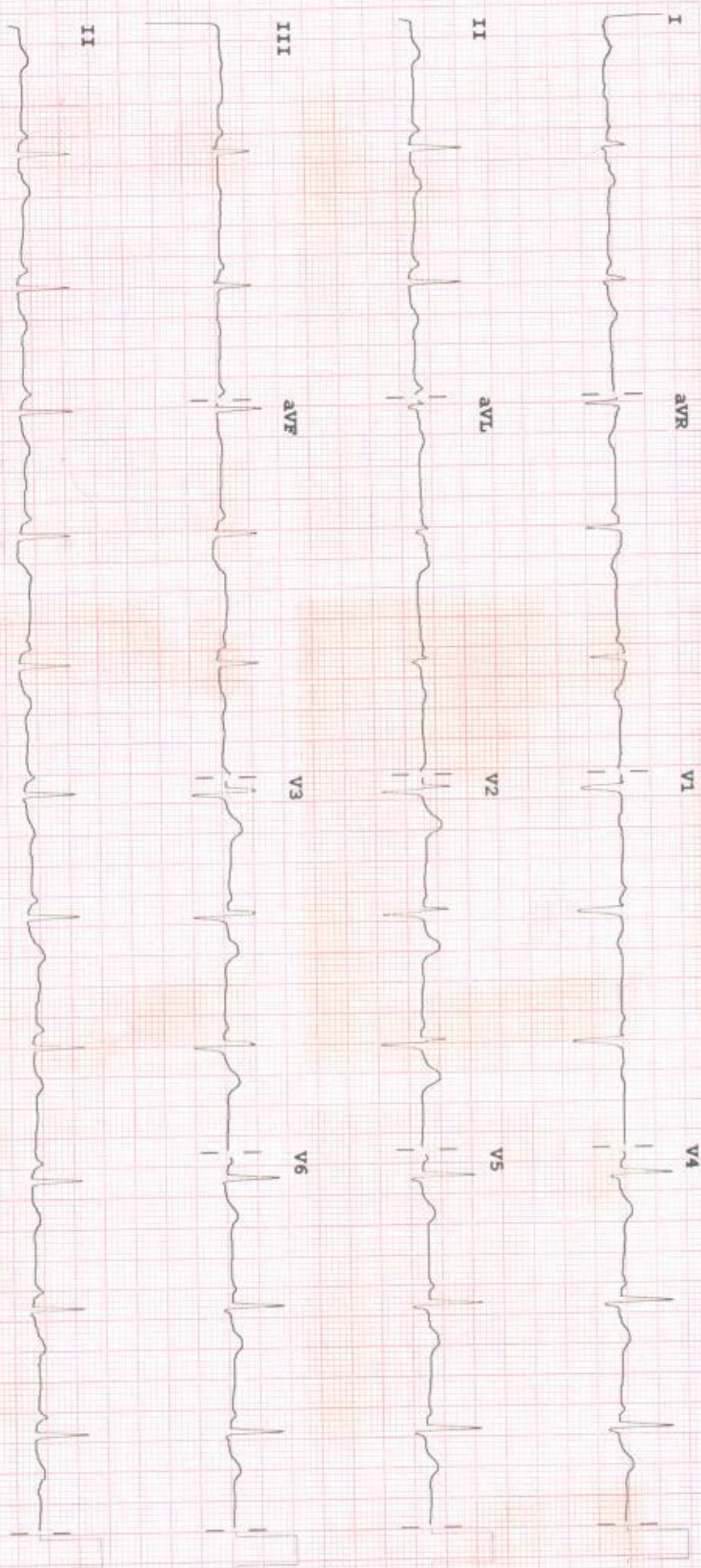
PR 148
QRSD 79
QT 374
QTc 407

--AXIS--
P 81
QRS 71
T 38

12 Lead: Standard Placement

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Behind Vishnu Shivam Mall,
Thakur Village, Kandivall East,
Mumbai, Maharashtra - 400 101.
Mobile No.: 7506155999 / 7045955999

Signature
Dr Sandeep Deshpande
MD (CARDIOLOGIST)
REG - 72944



Device:

Speed: 25 mm/sec

Iamb: 10 mm/mV

Chest: 10.0 mm/mV

F 50 ~ 0.50 - 40 Hz W

100B CL

P2

for PHILIPS

REFORMER W2042B



| | | |
|----------------------|------------------------|-------------------------|
| Patient Name: | MS.MINU JAISWAL | F/ 40 Yrs |
| Ref. by: | MEDI WHEEL | Date: 03/08/2024 |

XRAY CHEST PA VIEW

Bilateral lung fields show no obvious parenchymal lesion.

Cardiac size is normal.

Hila are unremarkable.

Both domes of diaphragm are normal.

Both cardio phrenic and cost phrenic angles are normal.

Bony thoracic cage appears normal.

Please correlate clinically.

DR.FORAM AJMERA
CONSULTANT RADIOLOGIST.

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Mobile No.: 7506155999 / 7045955999

10 MORE, SUSHIL
DOB 30/07/1997 27 Years Male

Rate 66 . Sinus rhythm

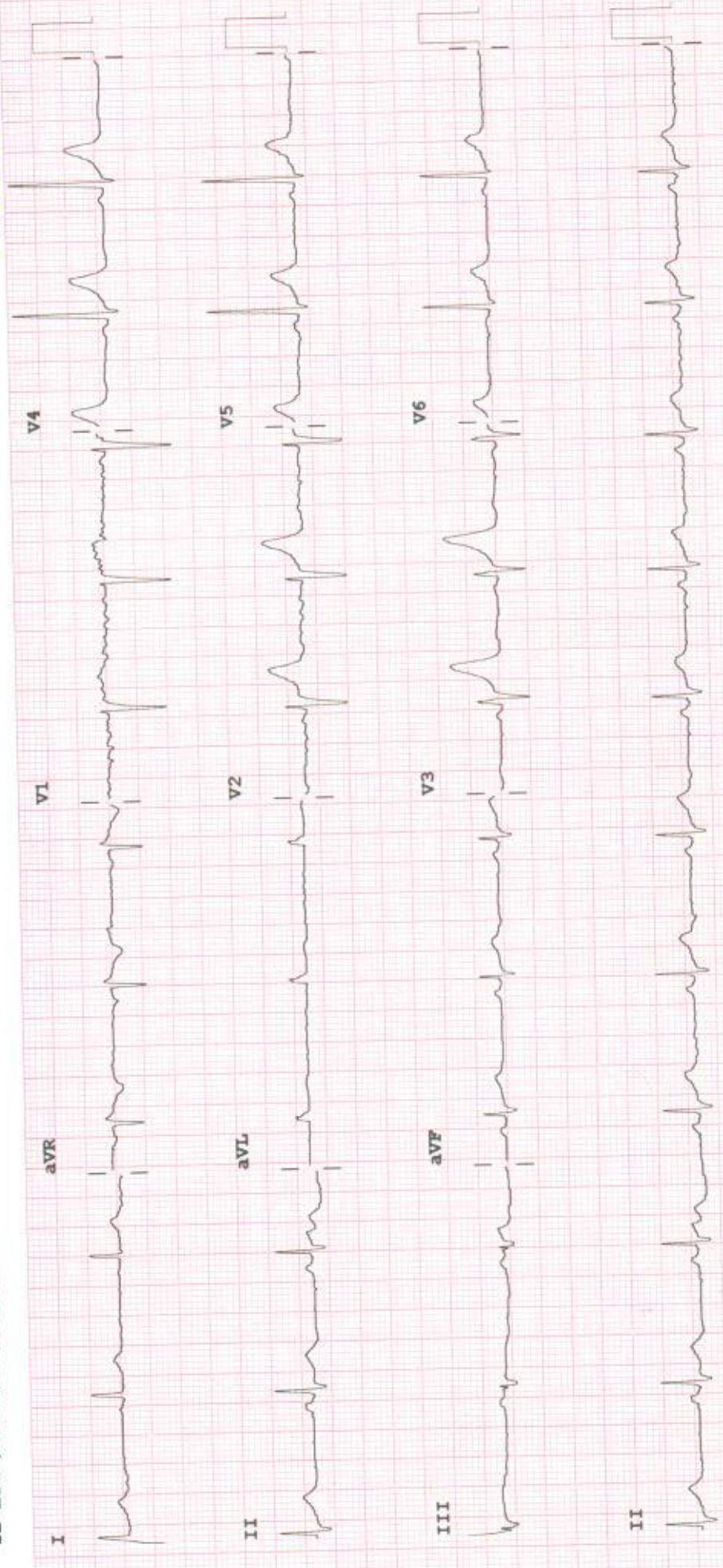
PR 135
QRS 85
QT 360
QTc 378

--AXIS--
P 76
QRS 9
T 44

12 Lead; Standard Placement

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Mumbai, Maharashtra - 400 101.
Mobile No.: 7506155999 / 7045955999

Narmy
Dr Sandeep Deshpande
MD (CARDIOLOGIST)
REG-72944



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

Device: F 50~ 0.50- 40 Hz W 100B CL

Patient Information

Name : MS. MINU JAISWAL

AGE : 40

REF. BY : BANK O BARODA

ID : 301
SEX : F

DATE : 03+08-2024
Height : 156
Weight : 56

| PHASE | TOTAL TIME | STAGE TIME | SPEED Km/Hr | GRADE % | H.R. bpm | B.P. mmHg | RPP x100 | ST LEVEL (MM) | | | MET'S |
|-------------|------------|------------|-------------|---------|----------|-----------|----------|---------------|------|------|-------|
| | | | | | | | | II | V1 | V5 | |
| SUPINE | | | | | 74 | 110 / 70 | 81 | 0.8 | -0.4 | 0.4 | |
| STANDING | | | | | 75 | 110 / 70 | 82 | 0.8 | -0.4 | 0.4 | |
| HYPERVENT | | | | | 76 | 110 / 70 | 83 | 0.7 | -0.3 | 0.3 | |
| Stage 1 | 2:55 | 0:10 | 2.7 | 10 | 109 | 110 / 70 | 119 | 0.5 | -0.3 | 0.3 | |
| Stage 2 | 5:55 | 2:55 | 4 | 12 | 121 | 120 / 70 | 145 | 0.1 | -0.2 | 0.1 | 4.67 |
| Stage 3 | 8:55 | 2:55 | 5.4 | 14 | 145 | 130 / 70 | 188 | 0.4 | 0 | 0.1 | 7.04 |
| PK-EXERCISE | 9:21 | 0:21 | 6.7 | 16 | 155 | 150 / 70 | 232 | 1.2 | -0.2 | 0.4 | 9.92 |
| RECOVERY | 10:34 | 0:53 | | | 116 | 150 / 70 | 174 | 1.4 | -0.3 | 0.4 | |
| RECOVERY | 11:30 | 1:49 | | | 104 | 130 / 70 | 135 | 0.5 | 0.1 | 1 | |
| RECOVERY | 12:36 | 2:55 | | | 95 | 120 / 70 | 114 | -0.2 | 0.3 | -0.1 | 10.47 |

Technician : DIKSHITA

Dr Sandeep Deshpande
MD (CARDIOLOGIST)
REG-72944

Patient Information

Name : MS. MINU JAISWAL

AGE : 40

REF. BY : BANK @ BARODA

Medication : NONE

ID : 301
SEX : F

DATE : 03-08-2024
Height : 156
Weight : 56

Indication

HEALTH CHECK UP

Test Results

PROTOCOL : Bruce

Target H.R. : 180 bpm

H.R. Achieved: 155 bpm 86 %

EXERCISE TIME : 9:21
MAX B.P. : 150 / 70 mm Hg

MAX WORK LOAD: 10.47 METS
BP RESPONSE : Normal,

REASON OF TERMINATION :
Achieved THR,

HISTORY

Checkup/Physical fitness,

IMPRESSIONS

Negative for Provocable myocardial ischemia,

Technician : DIKSHITA

Dr Sandeep Deshpande
MD (CARDIOLOGIST)

REG - 72944

VRX HEALTHCARE PVT. LTD

PRETEST
SUPINE

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN

MS. MINU JAISWAL
I.D. 301
Age 40/F
Date 03-08-2024

RATE 74bpm
B.P. 110/70

Mag. X 2

V1



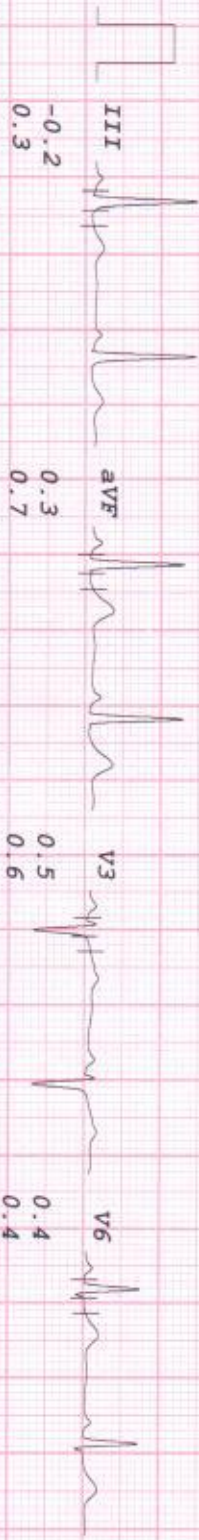
V1

0.4
0.6



V2

0.8
0.6



V3

0.5
0.6



V4

0.4
0.6



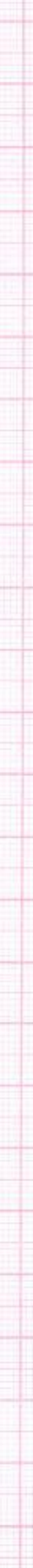
V5

0.4
0.6



V6

0.4
0.4



CARDIO BEATS

VRX HEALTHCARE PVT. LTD

MS. MINU JAISWAL
I.D. 301
Age 40/F
Date 03-08-2024

RATE 75bpm
B.P. 110/70

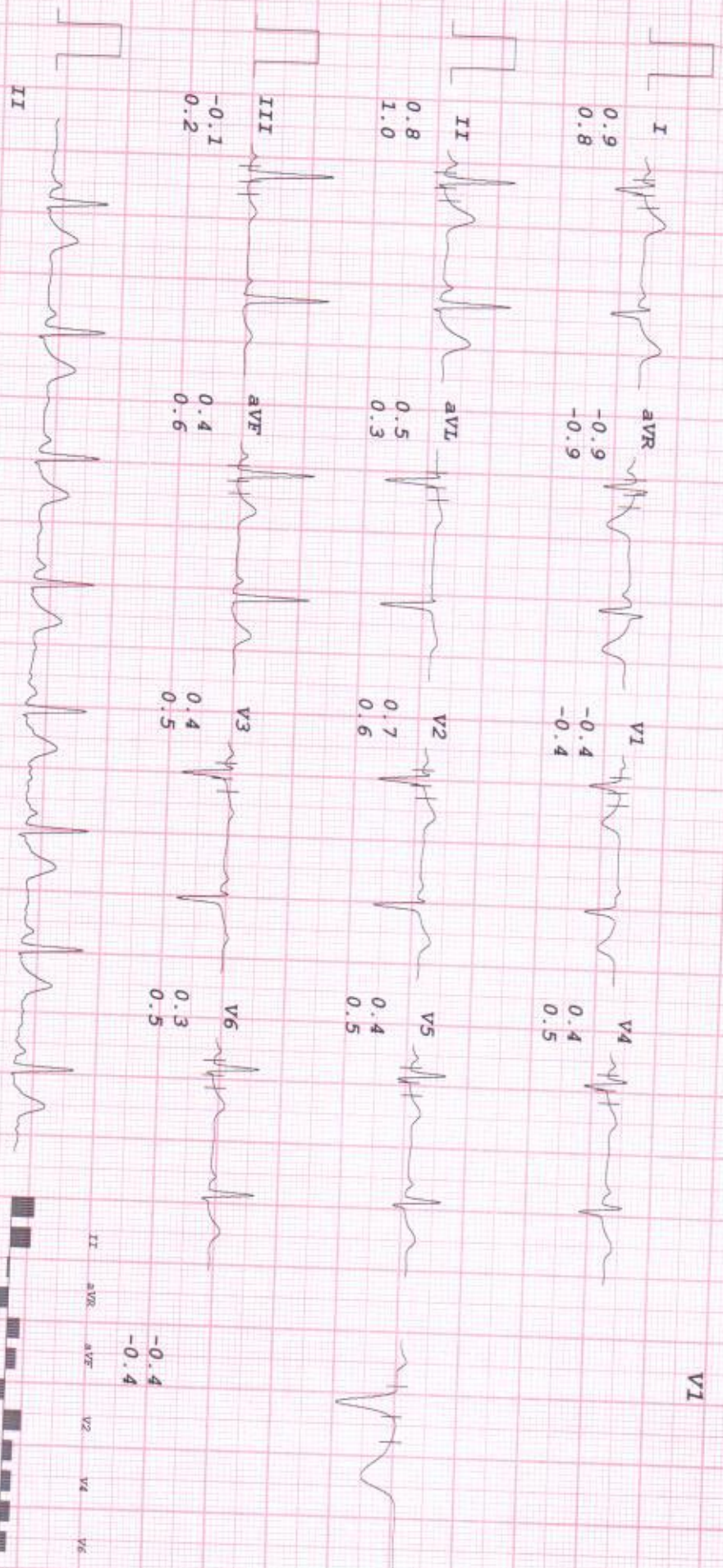
PRETEST
STANDING

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN

Mag. X 2

CARDIO BEATS



Rhythm: Filtered (50 Cycle) Base corrected Avg. Complex: Filtered (UL-EM, Induse-74) ...
www.vrx-hr.com

VRX HEALTHCARE PVT. LTD

MS. MINU JAISWAL
 I.D. 301
 Age 40/F
 Date 03-08-2024

RATE 76bpm
 B.P. 110/70

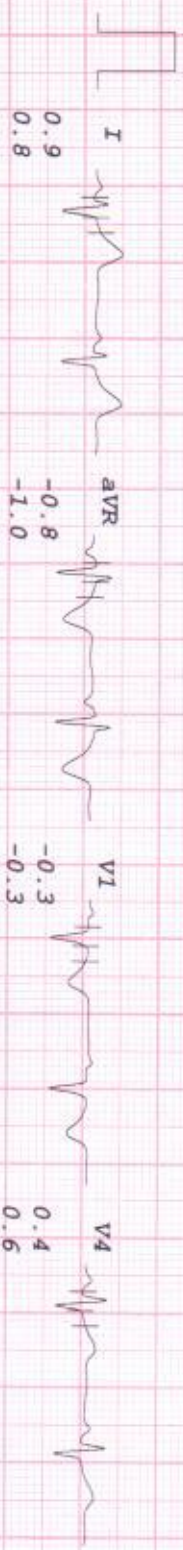
PRETEST
 HYPERVENT
 PHASE TIME 0:10

ST @ 10mm/mV
 80ms PostJ

LINKED MEDIAN

Mag. X 2

V1



0.9
0.8

AVR -0.8
-1.0

V1 -0.3
-0.3

V4 0.4
0.6



0.7
1.2

AVL 0.6
0.3

V2 0.7
0.7

V5 0.3
0.5



-0.2
0.3

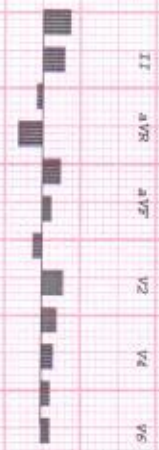
AVF 0.3
0.8

V3 0.5
0.6

V6 0.3
0.7



-0.3
-0.3



CARDIO BEATS

MS. MINU JAISWAL
 I.D. 301
 Age 40/F
 Date 03-08-2024

RATE 96bpm
 B.P. 110/70

VRX HEALTHCARE PVT. LTD

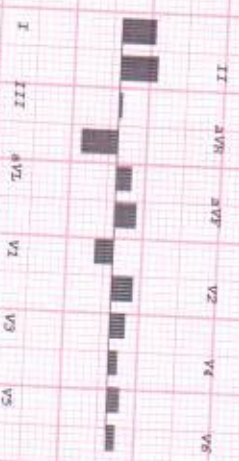
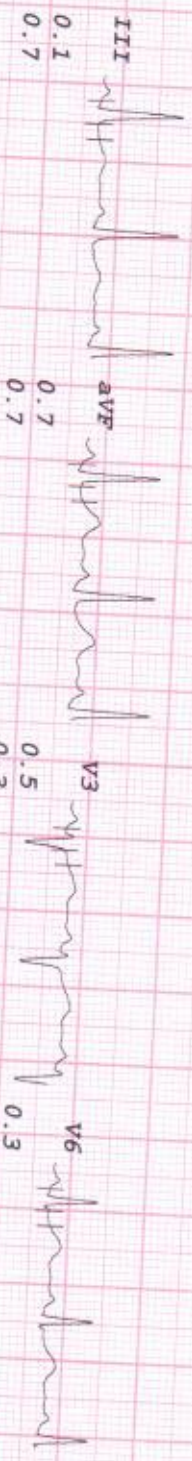
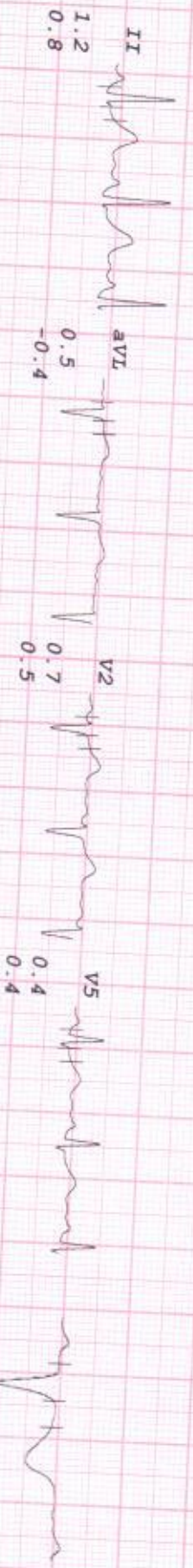
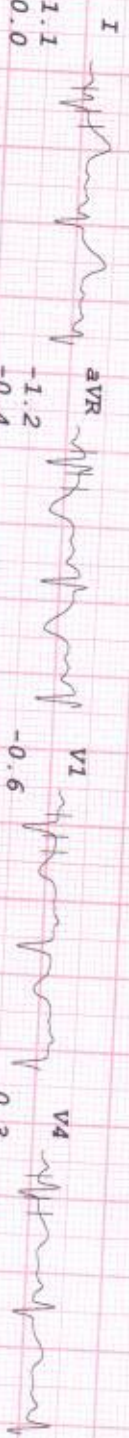
WARM UP

ST @ 10mm/mV
 80ms PostJ
 Speed 1.5 km/hr

LINKED MEDIAN

Mag. X 2

V1



CARDIO BEATS

MS. MINU JAISWAL
 I.D. 301
 Age 40/F
 Date 03-08-2024

RATE 109bpm
 B.P. 110/70

VRX HEALTHCARE PVT. LTD

Bruce
 Stage 1
 TOTAL TIME 2:55
 PHASE TIME 2:55

ST @ 10mm/mv
 80ms PostJ
 Speed 2.7 km/hr
 SLOPE 10 %

LINKED MEDIAN

Mag. X 2

III

I
 0.9
 1.1

aVR
 -0.7
 -1.2

V1
 -0.3
 -0.2

V4
 0.3
 0.8

II
 0.5
 1.2

aVL
 0.7
 0.5

V2
 0.9
 0.8

V5
 0.1
 0.8

III
 -0.4
 0.0

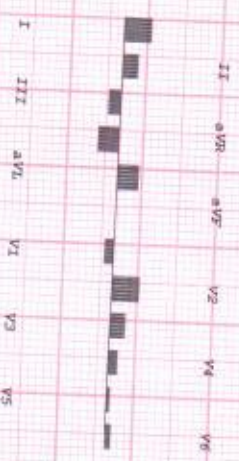
aVF
 0.0
 0.6

V3
 0.5
 0.9

V6
 0.2
 0.6

II

-0.4
 0.0



CARDIO BEATS

hythm:Blurred(20) Cycle(s)abase:Distorted, Avg. Complex:Blurred UNI-SK, Indore-791-1-91-731-4930035, Fax: +91-791-4032180, E-Mail: info@electromedicals.net/ Web: www.uni-eh.com, JMF Ver. 14.0.3

VRX HEALTHCARE PVT. LTD

MS. MINU JAISWAL
 I.D. 301
 Age 40/F
 Date 03-08-2024

RATE 121bpm
 B.P. 120/70

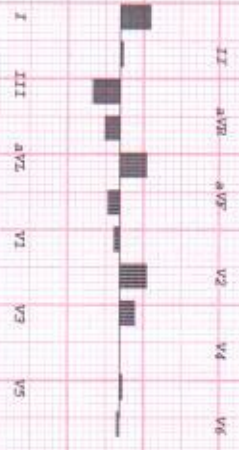
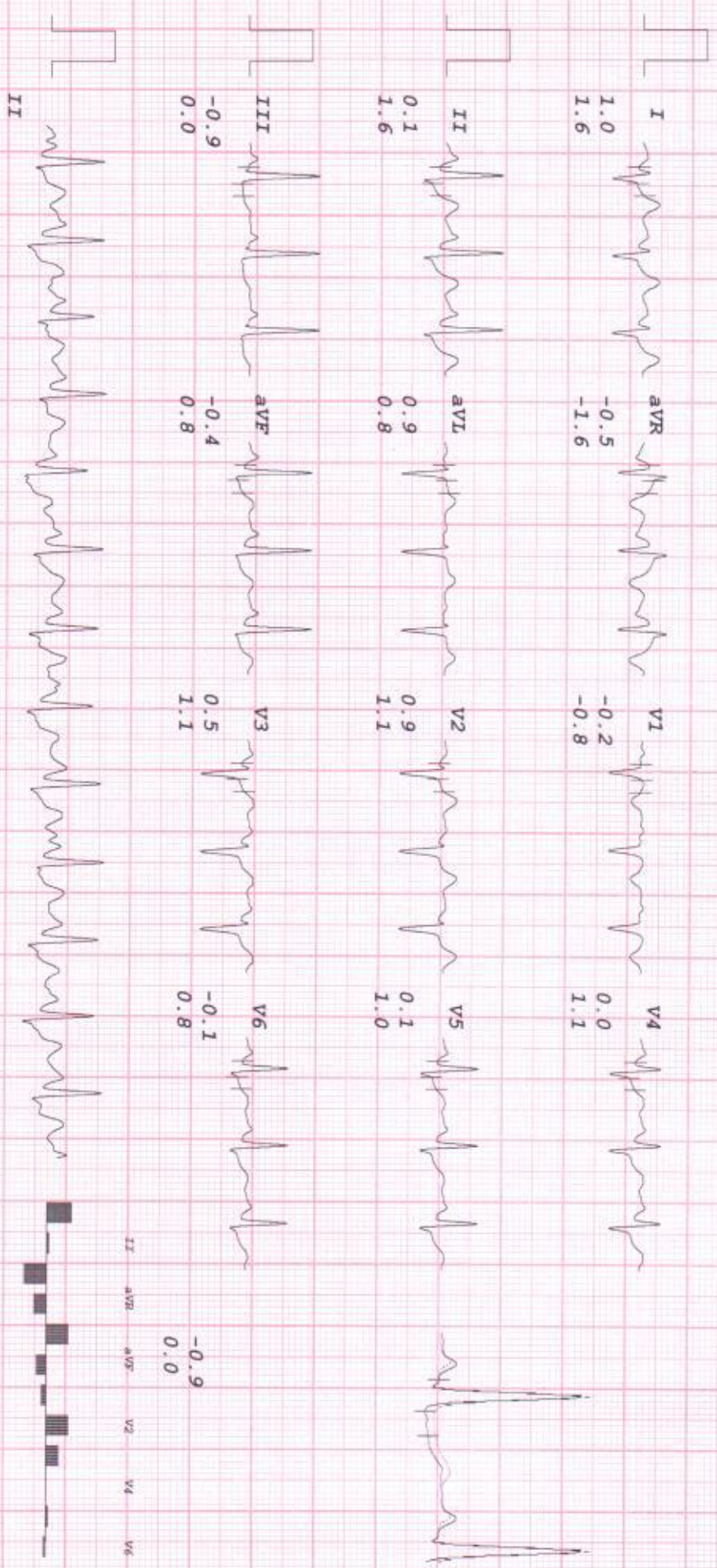
Bruce
 Stage 2
 TOTAL TIME 5:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 4 km/hr
 SLOPE 12 %

LINKED MEDIAN

Mag. X 2

III



CARDIO BEATS

VRX HEALTHCARE PVT. LTD

MS. MINU JAISWAL
 I.D. 301
 Age 40/F
 Date 03-08-2024

RATE 145bpm
 B.P. 130/70

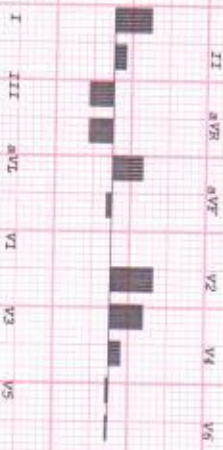
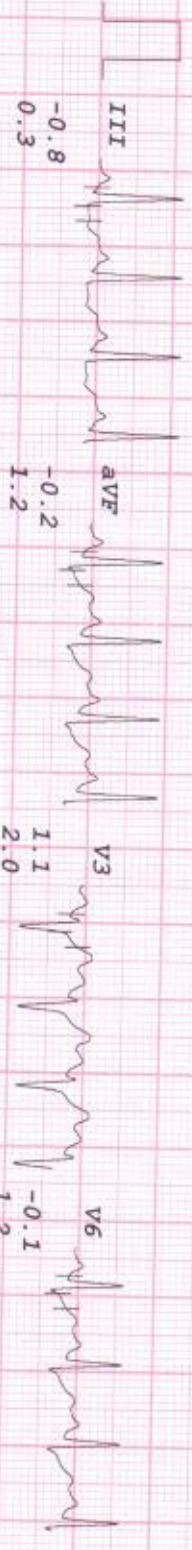
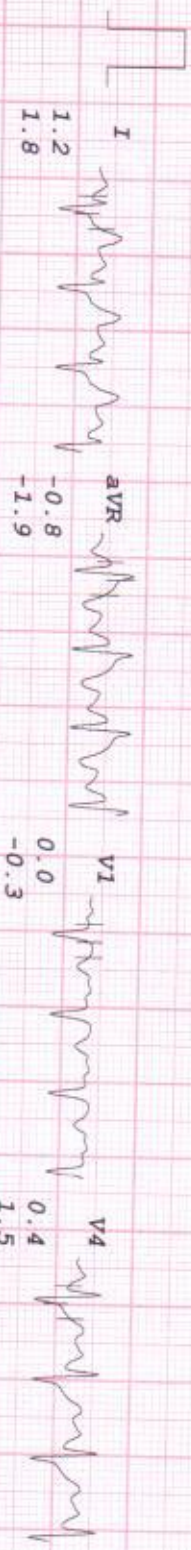
Bruce
 Stage 3
 TOTAL TIME 8:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 5.4 km/hr
 SLOPE 14 %

LINKED MEDIAN

Mag. X 2

III



CARDIO BEATS

VRX HEALTHCARE PVT. LTD

MS. MINU JAISWAL
 I.D. 301
 Age 40/F
 Date 03-08-2024

RATE 155bpm
 B.P. 150/70

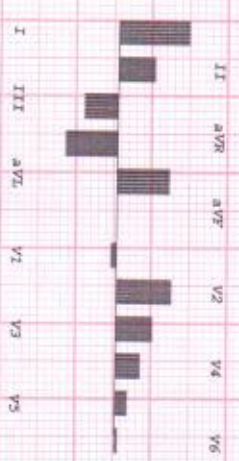
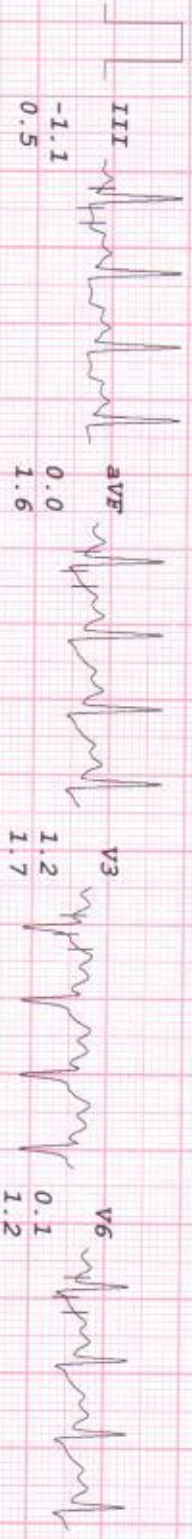
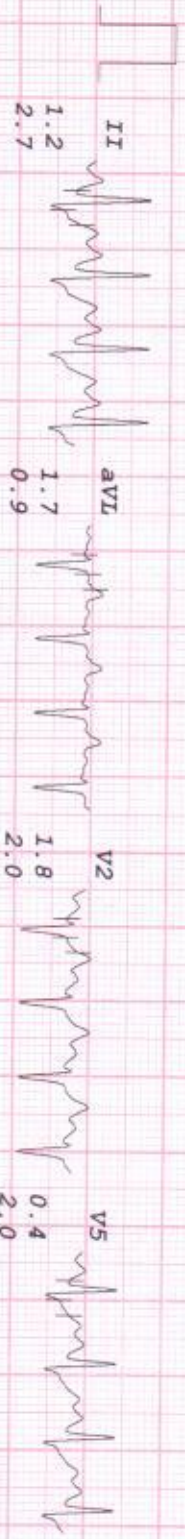
BRUCE
 PR-EXERCISE
 TOTAL TIME 9:21
 PHASE TIME 0:21

ST @ 10mm/mV
 80ms PostJ
 Speed 6.7 km/hr
 SLOPE 16 %

LINKED MEDIAN

Mag. X 2

III



CARDIO BEATS

VPRX HEALTHCARE PVT. LTD

MS. MINU JAISWAL
 I.D. 301
 Age 40/F
 Date 03-08-2024

RATE 116bpm
 B.P. 150/70

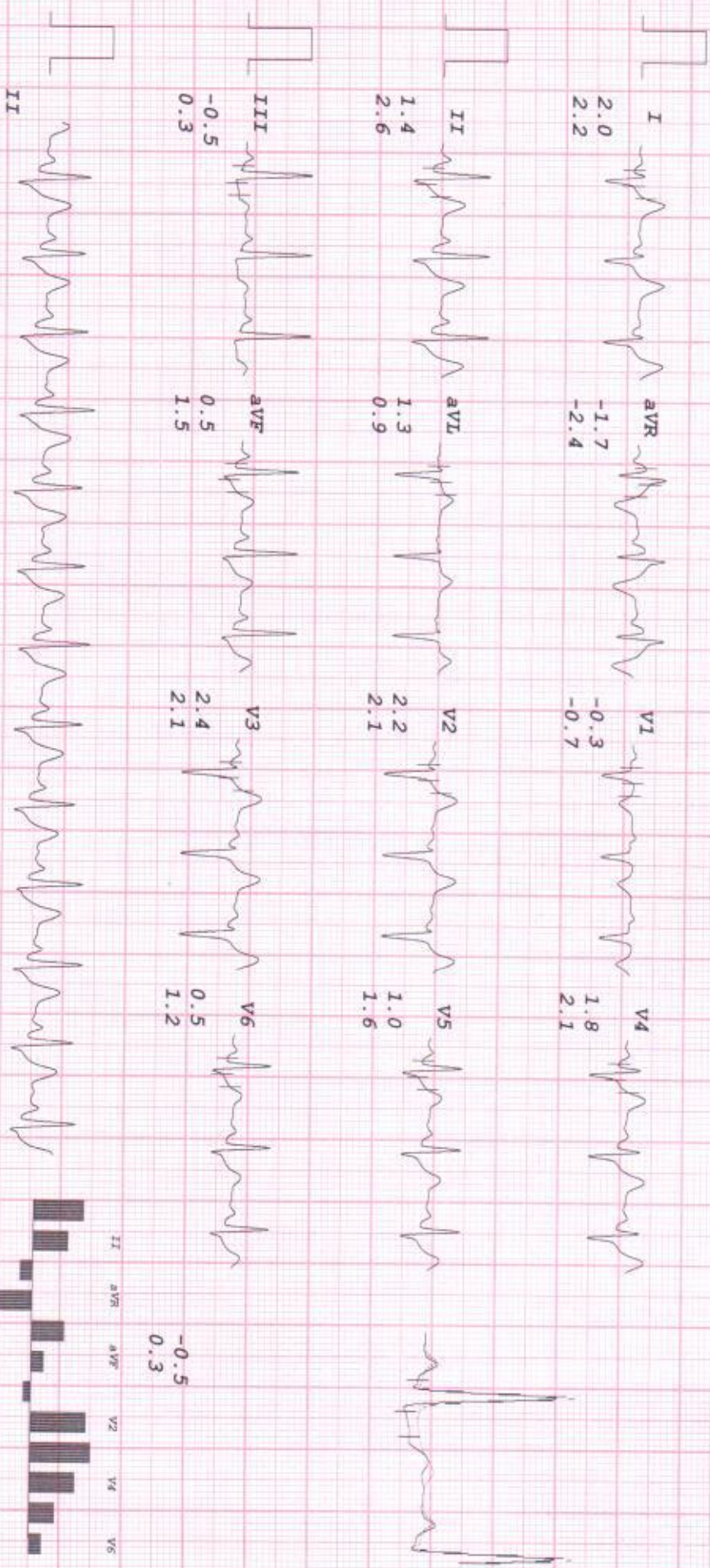
BRUCE
 RECOVERY
 TOTAL TIME 10:34
 PHASE TIME 0:53

ST @ 10mm/mV
 80ms PostJ

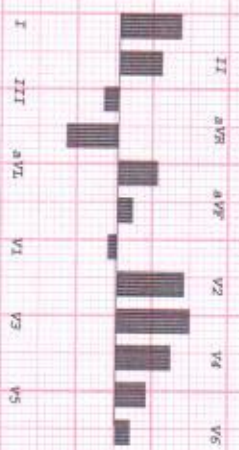
LINKED MEDIAN

Mag. X 2

III



-0.5
 0.3



CARDIO BEATS

VRX HEALTHCARE PVT. LTD

MS. MINU JAISWAL
I.D. 301
Age 40/F
Date 03-08-2024

RATE 104bpm
B.P. 130/70

BRUCE
RECOVERY
TOTAL TIME 11:30
PHASE TIME 1:49

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN

Mag. X 2

III

CARDIO BEATS



Rhythm: Filtered (20 Cycle) Base Corrected Avg. Complex: Filtered (N1-EK, Indore, Tel: +91-731-4030035, Fax: +91-731-403180, E-Mail: em@electromedicals.net, Web: www.ujm-em.com, INT Ver: 14.0.3

VRX HEALTHCARE PVT. LTD

MS. MINU JAISWAL
I.D. 301
Age 40/F
Date 03-08-2024

RATE 95bpm
B.P. 120/70

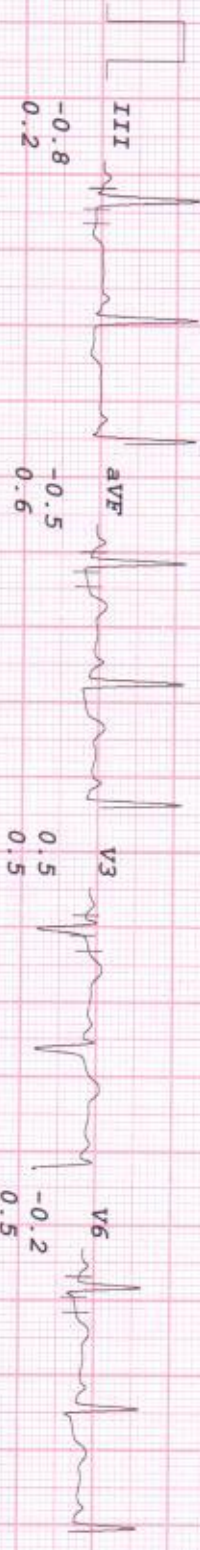
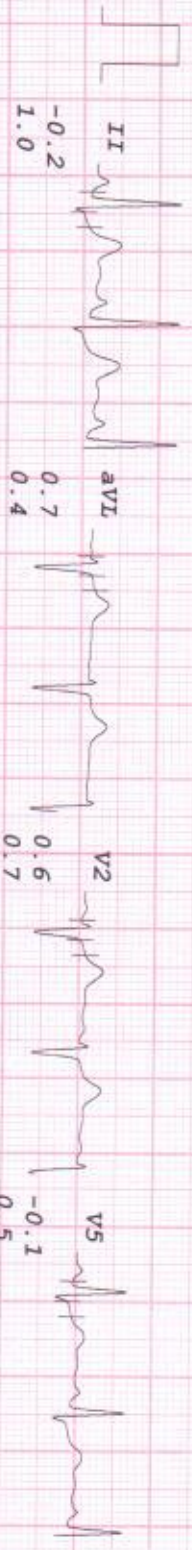
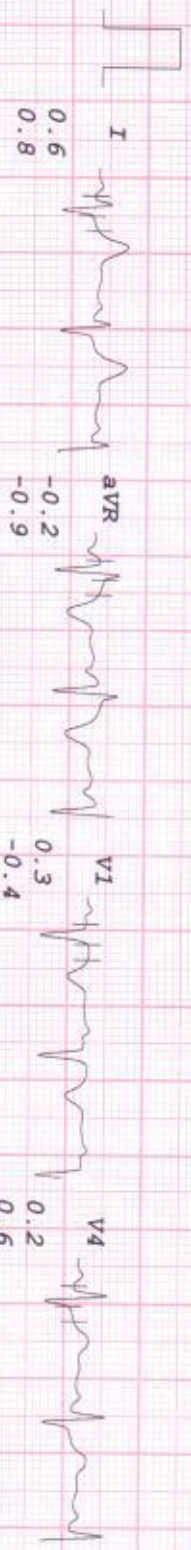
Bluce
RECOVERY
TOTAL TIME 12:36
PHASE TIME 2:55

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN

Mag. X 2

III



-0.8
0.2



CARDIO BEATS