Electronic Medical Record Form

Medical ID: IND005

We ask you for information about your general health to help us treat you safely. Please complete your contact details below and answer all the health questions and then sign the back of the form. All information will be kept strictly confidential by our service.

Title: Ms	Surname: Menon			First naı	me: Aditi	
	Date of Birth: 12 August 19	90		Sex:	Male	Female✓
Address: 34, Sunshine Apartments, Sector 17, Mumbai, Maharash			tra Postcode: 400017			
Occupation: Makeup Artist			Mobile Number: +91 6669987594			
Telephone number (home): 040 6969-2272		Emai	Email: aditi.menon@gmail.com			
In the event of an e	mergency, please contact	Best	inter	est conta	ıct	
Name: Aarav		Nan	Name: Patel			
Telephone number: +91 9876543210		Tele	Telephone number: +91 8765432109			
Relationship to you: Father		Rela	Relationship to you: Mother			
Family Doctor's det	ails					
Doctor's name: Dr. Rajesh Kumar			Telephone number: +91 98765 43210			
Address: Kumar's Clinic, #12, Shanti Nagar, Bandra West		st, Mumbai	Mumbai Postcode: 400050			
Vaccination details						
Name of Vaccination: Covishield		Date	Date of Vaccine administered: 02 July 2021			
Hospital of Vaccine Administered: Windsor Hospitals, M		Mumbai	nbai Type of Vaccine: COVID-19		D-19	
Are you currently		yes	no	give d	etails	
Receiving treatment	from a doctor, hospital or clinic?		✓			
Taking any prescrib	ed medicines? (including tablets,		✓			
inhalers, injections, contraceptives and ointments)						
Please list in detail o	or additional sheet if required.					
Taking any self pre	scribed medicines/drugs? s or recreational drugs)		✓			
Any medical historie	s?		✓			
Pregnant or possibly	pregnant?					

Dr. Rajesh Kumar, M.B.B.S

Gastroenterologist

Clinic Hours:

Windsor Hospitals MWF: 13:00 - 18:00

Mumbai TTH: 9:00 - 15:00

Patient's Name: Aditi Menon Medical ID: IND005

Sex: Female Age: 33 Date: 03 February 2024



Patient's History / Symptoms:

• Abdominal pain or discomfort

- Bloating and gas
- Diarrhoea or constipation
- Blood in stool

Diagnosis:

- Inflammation of the stomach lining, Gastritis
- Depositions of Gallstones, constricting the gall bladder pathway. Abdominal ultrasound mandatory
- Gastroesophageal Reflux Disease

Prescription:

•	Omeprazole (Prilosec)	1-0-0
•	Amoxicillin	1-1-0
•	Hyoscyamine (Levsin)	1-1-1

PROCESSED AT: Thyrocare UR House, No. 1056C, Avinashi Road, Coimbatore - 641014



Corporate Office: Thyrocare Technologies Limited D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703



NAME REF. BY : ADITI MENON (33Y/F) MEDICAL ID: IND005

TEST ASKED : Dr. Rajesh Kumar

TEST NAME	VALUE	UNITS	REFERENCE RANGE
TOTAL LEUCOCYTES COUNT	7.67	$X 10^{3} / \mu L$	4.0-10.0
NEUTROPHILS	63	%	40-80
LYMPHOCYTE PERCENTAGE	25.3	%	20-40
MONOCYTES	5.3	%	0-10
EOSINOPHILS	5.6	%	0.0-6.0
BASOPHILS	0.5	%	<2
IMMATURE GRANULOCYTE PERCENTAGE(IG%)	0.3	%	0-0.5
NEUTROPHILS - ABSOLUTE COUNT	4.83	Χ 10 ³ / μL	2.0-7.0
LYMPHOCYTES - ABSOLUTE COUNT	1.94	X 10 / µL	1.0-3.0
MONOCYTES - ABSOLUTE COUNT	0.41	Χ 10 / μL	0.2-1
BASOPHILS - ABSOLUTE COUNT	0.04	Χ 10 ³ / μL	0-0.1
EOSINOPHILS - ABSOLUTE COUNT	0.43	•	0-0.5
IMMATURE GRANULOCYTES(IG)	0.02	X 10 ³ / µL	0-0.3
TOTAL RBC	5.5	X 10 ³ / µL	4.5-5.5
NUCLEATED RED BLOOD CELLS	Nil	X 10^6/µL	<0.01
NUCLEATED RED BLOOD CELLS %	Nil	Χ 10 ³ / μL	<0.01
HEMOGLOBIN	13.4	%	13-17
HEMATOCRIT(PCV)	47.4	g/dL	40-50
MEAN CORPUSCULAR VOLUME(MCV)	86.2	%	83-101
MEAN CORPUSCULAR HEMOGLOBIN(MCH)	24.4	fL	
MEAN CORP.HEMO.CONC(MCHC)	28.3	pq	27-32
RED CELL DISTRIBUTION WIDTH - SD(RDW-SD)	53	g/dL	31.5-34.5
RED CELL DISTRIBUTION WIDTH (RDW-CV)	17.1	fL	39-46
PLATELET DISTRIBUTION WIDTH(PDW)	11.8	%	11.6-14
MEAN PLATELET VOLUME(MPV)	10.8	fL	9.6-15.2
PLATELET COUNT	183	fL	6.5-12
PLATELET TO LARGE CELL RATIO(PLCR)	30	$X 10^{3} / \mu L$	150-400
PLATELETCRIT(PCT)	0.2	%	19.7-42.4
		%	0.19-0.39

Remarks: ALERT !!! Hypochromia, Anisocytosis

Please Correlate with clinical conditions.

Method: Fully automated bidirectional analyser (6 Part Differential SYSMEX XN-1000)

(This device performs hematology analyses according to the Hydrodynamic Focussing (DC method), Flow Cytometry Method (using a semiconductor laser), and SLS- hemoglobin method)

Sample Collected on (SCT) :03 Feb 2024 06:13 Sample Received on (SRT) :04 Feb 2024 09:23 Report Released on (RRT) :08 Feb 2024 10:57

Sample Type : EDTA

: 2608016201/PP004: Labcode

J9295107 Barcode

Dr.Subramaniam MD(Path)

Dr.Caesar Sengupta MD(Micro)



Lucid Medical Diagnostics Mumbai

Patient Name: ADITI MENON (33Y/F)

Medical ID: IND005

Date: 03/02/2024

Referring Doctor: Dr. Rajesh Kumar

Hospital: Kumar's Clinic

Gall Bladder Ultrasound Report

Technique:

Standard transverse view ultrasounds of the gall bladder were obtained.

Findings:

- Gallbladder: The gallbladder is visualized and appears distended. Multiple echogenic structures are observed within the gallbladder lumen, consistent with gallstones. The largest stone measures approximately [size] mm in diameter.
- Wall Thickness: The wall of the gallbladder appears normal, measuring [measurement] mm.
- Common Bile Duct (CBD): The CBD appears unremarkable, with no evidence of dilation.
- Liver: The liver parenchyma appears normal in echogenicity and texture.
- Pancreas: The pancreas is visualized and appears unremarkable.
- Other: No pericholecystic fluid or evidence of acute inflammation is noted.

Impression:

- 1. Gallstones: Multiple gallstones identified within the gallbladder.
- 2. Gallbladder Distension: The gallbladder appears distended, likely secondary to the presence of gallstones.
- 3. No Evidence of CBD Dilation: The common bile duct appears normal in caliber.

Date: 01 February 2024	

Gall Bladder Ultrasound

Image 1 – Gall Bladder Transverse View*

