# Electronic Medical Record Form

### Medical ID: IND007

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: <b>Ms</b>	Surname: <b>Sharma</b>	Surname: <b>Sharma</b>		First name: <b>Priya</b>			
	Date of Birth: 5th July 1992	<u>)</u>		Sex:	Male	Female✓	
Address: 7A, Green Avenue, Mumbai, Maharashtra				Postcode: 400053			
Occupation: Graphic Designer			Mobile Number: +91 87654 32109				
Telephone number (home): +91 33 1234 5678		Emai	Email: priya.sharma@example.com				
In the event of an emergency, please contact		Best	Best interest contact				
Name: Rakesh Sharma		Nam	Name: Divya Sharma				
Telephone number: +91 87654 12345		Tele	Telephone number: +91 87654 67890				
Relationship to you: Father			Relationship to you: Sister				
Family Doctor's det	ails						
Doctor's name: Dr. Neha Shah		Telep	Telephone number: +91 22 3456 7890				
Address: 10, HealthCare Tower, Bandra East, Mumbai			Postcode: 400051				
Vaccination details							
Name of Vaccination	e of Vaccination: Hepatitis B Vaccine		Date of Vaccine administered: 5th June 2022				
Hospital of Vaccine A	pital of Vaccine Administered: Lilavati Hospital, Mun			Type of Vaccine: Hepatitis B			
Are you currently		yes	no	give d	etails		
Receiving treatment	from a doctor, hospital or clinic?		<b>✓</b>				
	ed medicines? (including tablets, contraceptives and ointments )		<b>✓</b>				
Please list in detail o	or additional sheet if required.						
Taking any self pre	scribed medicines/drugs? s or recreational drugs)		<b>✓</b>				
Any medical historie			<b>✓</b>				
Pregnant or possibly	nregnant?		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				

#### Dr. Neha Shah, M.B.B.S

Cardiologist

Clinic Hours:
HealthCare Tower

MWF: 13:00 - 18:00

Mumbai TTH: 9:00 - 15:00

Patient's Name: Priya Sharma Medical ID: IND007

Sex: Female Age: 31 Date: 10 February 2024



#### **Patient's History / Symptoms:**

• Chest pain radiating to the arms, back, neck, or jaw

- Palpitations and irregular heartbeat
- Difficulty walking, imbalance
- Vision problems, double vision

#### Diagnosis:

- Cardiac catheterization to examine blood flow and detect blockages in the coronary arteries.
- Electrocardiogram (ECG) and Echocardiogram.

#### **Prescription:**

•	Carbamazepine (200mg)	1-0-1
•	Amitriptyline (25mg)	1-0-1
•	Levodopa (100mg)	1-0-1

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 © 022 - 3090 0000 / 4125 2525 ● 8691866066 ➤ wellness@thyrocare.com ⊕ www.thyrocare.com

REPORT

NAME REF. BY : PRIYA SHARMA (31Y/F) MEDICAL ID: IND007

TEST ASKED : DR. NEHA SHAH

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	X 10 <sup>3</sup> / µL	2.0-7.0
LYMPHOCYTES - ABSOLUTE COUNT	1.94	X 10 / µL	1.0-3.0
MONOCYTES - ABSOLUTE COUNT	0.41	X 10 / µL	0.2-1
BASOPHILS - ABSOLUTE COUNT	0.04	Χ 10 / μL	0-0.1
EOSINOPHILS - ABSOLUTE COUNT	0.43	Χ 10 / μL	0-0.5
IMMATURE GRANULOCYTES(IG)	0.02	Χ 10 <sup>3</sup> / μL	0-0.3
TOTAL RBC	5.5	Χ 10 / μL Χ 10^6/μL	4.5-5.5
NUCLEATED RED BLOOD CELLS	Nil	Χ 10 <sup>3</sup> /μL	<0.01
NUCLEATED RED BLOOD CELLS %	Nil	•	<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

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)
 07 Feb 2024 06:13

 Sample Received on (SRT)
 08 Feb 2024 09:23

 Report Released on (RRT)
 11 Feb 2024 10:57

Sample Type : EDTA

Labcode : 2608016201/PP004:

Barcode J9295107

& Show

Dr.Subramaniam MD(Path)

Dr.Caesar Sengupta MD(Micro)



## Lucid Diagnostics

#### Mumbai

Patient Name: Priya Sharma

Medical ID: IND007

Date: 10/02/2024

Referring Doctor: **Dr. Neha Shah** Hospital: **HealthCare Tower** 

#### **ECG Report**

#### Technique:

Electrodes were placed on the patient's chest, arms, and legs to record the electrical activity of the heart.

#### Findings:

- 1. Sinus Tachycardia: The heart rate is elevated above the normal range, consistent with the patient's complaint of palpitations.
- 2. Premature Atrial Contractions (PACs): The ECG shows occasional premature atrial contractions, which may contribute to the sensation of irregular heartbeat.
- 3.ST-Segment Depression: There are subtle ST-segment depressions noted in leads V4-V6, suggestive of possible myocardial ischemia. This finding correlates with the patient's complaint of chest pain.
- 4. Normal Sinus Rhythm: Despite the noted abnormalities, the ECG demonstrates a normal sinus rhythm overall.

Impression: The ECG findings are indicative of sinus tachycardia, premature atrial contractions, and possible myocardial ischemia. Further evaluation with additional cardiac tests such as an echocardiogram is recommended to assess cardiac function and structure.

Date: 01 February 2024



## Lucid Diagnostics

#### Mumbai

Patient Name: Priya Sharma

Medical ID: IND007

Date: 03/02/2024

Referring Doctor: **Dr. Neha Shah** Hospital: HealthCare Tower

#### **Echocardiogram Report**

#### Technique:

Sound waves directed towards the heart from a transducer placed on the patient's chest.

#### Findings:

- 1. Left Ventricular Hypertrophy (LVH): There is evidence of increased left ventricular wall thickness, suggestive of LVH, which may be secondary to chronic hypertension or other underlying cardiac conditions.
- 2. Mitral Valve Prolapse (MVP): The echocardiogram reveals prolapse of the mitral valve leaflets during systole, leading to mild mitral regurgitation. This finding may contribute to the patient's palpitations and arrhythmic heartbeat.
- 3. Normal Left Ventricular Ejection Fraction (LVEF): The LVEF is within normal limits, indicating preserved systolic function of the left ventricle.
- 4. No Evidence of Regional Wall Motion Abnormalities: There are no significant abnormalities in the regional wall motion of the left ventricle, suggesting preserved myocardial contractility.
- 5. Trivial Pericardial Effusion: A small amount of pericardial fluid is noted, which is considered clinically insignificant.

Impression: The echocardiogram findings reveal left ventricular hypertrophy, mitral valve prolapse with mild regurgitation, and trivial pericardial effusion. These findings correlate with the patient's clinical symptoms of palpitations, arrhythmic heartbeat, and chest pain.

Date: 01 February 2024

#### **ECG & Echocardiogram**

Image 1 – ECG\*

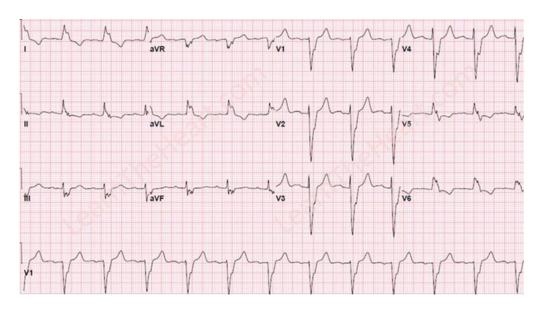


Image 2 – Echocardiogram\*

