बालाजी
डायग्नोस्टिक सेंटर

डॉ. संध्या सं. यादव

एम.डी.पॅथॉलॉजी (मुंबई)
हिमेटॉलॉजी फेलोशिप (ऑस्ट्रिया)

२४ तास अत्यवश्यक सेवा

Patient's Name: Pnyph Lokhnde
Age: 34 Sex: F
Ref by Dr. R R Mane
Date 1 / 3 / 20 25
Provisional Diagnosis: ~~Doo~~ 3mA —

A-1, पहिला मजला, शुभम टॉवर, किरण प्रेस शेजारी, पोवई नाका, सातारा. वेळ : स. ७ ते रात्री. ९ पर्यंत. फोन नं. ८८८८८ ३२६०३

HEMATOLOGY
- ✓ [illegible]moglobin (CBC-ESR)
- ✓ H[illegible]magicon
- ✓ WBC (T&D)
- Complete Blood Counts (CBC)
- E.S.R.
- PCV
- Absolute Eosinophil Count
- Platelet Count
- Smear for Malarial Parasite
- Peripheral Smear Exam
- Retic Count
- Blood Group & Rh
- Coomb's Test
- BT&CT
- Prothrombin Time with INR
- aPTT

CLINICAL PATHOLOGY
- Urine examination
- Proteins (24 Hrs)
- Microalbumin (Spot)
- B. J. Proteins
- Pregnancy Test
- S[illegible]l Analysis/Occult Blood
- C.S.F. Analysis
- Pleural/Ascitic/Synovial
- Pericardial Fluid
- (Routine/ADA/ Malignant Cells)
- Semen Analysis

BIOCHEMISTRY
- ✓ Blood Glucose F/PP/R (R circled)
- GTT
- Glycosylated HB
- Blood Urea
- Creatinine

Lipid Profile
- Cholesterol
- HDL Cholesterol
- Triglycerides

Liver Function Test
- Bilirubin (T&D)
- S.G.P.T./S. G. O.T.
- Alkaline Phosphatase
- Proteins-Total & Albumin

Renal Function Test
- Electrolytes (Na/K/Cl)
- Blood Gas Analysis
- Uric Acid
- Amylase / Lipase
- Lithium
- Calcium / Ionic Calcium
- Phosphorus
- Magnesium
- Ammonia
- Cholinesterase
- CK Total (CPK)
- CK (MB)
- LDH
- Troponin
- D Dimer.
- Ferritin

SEROLOGICAL TESTS
- ✓ VDRL
- Widal Test
- RA Test
- ASO Test
- CRP Test
- Antinuclear antibody (ANA)
- ✓ HIV
- ✓ Australia Ag (HBSAG)
- Anti. CCP
- B 12. Iron
- Folic Acid Vitamin D_3

INFECTIOUS
- Dengue Antibody/NS1
- Chikungunya Antibody
- Leptospira Antibody
- TORCH IgG/IgM
- Toxo IgG/IgM
- Herpes IgG I IgM
- Malarial Antibody
- Malarial Antigen
- Tuberculin (Mantoux) Test
- TB PCR

MICROBIOLOGY
- Complete Sputum Exam,
- ....For AFB
- ....For Gram Stain
- Culture & Sensitivity Test
- of...

ENDOCRINOLOGY
- T3/T4/TSH
- Free T3/Free T4
- Ultra TSH
- FSH/LH/Prolactin
- E2 (Estradiol) E3
- AMH
- Progesterone
- Serum Cortisol (Am/Pm)
- Urinary VMA

Tumour Markers
- PSA
- CEA
- CA 125
- CA 15-3
- CA 19-9
- Beta HCG
- Alpha Fetoproteins

PROFILES
- Anaemia/ANC/Total Body
- Diabetes/Renal Profile/Infertility
- Hypertension/Preoperative/Covid

For Lab Use

Sample Collected By :
Total Rs.
Paid Rs.
Balance Rs.
Patient Ph. No.
Email ID. :

(ANC Profile. Double marker)
कोरेगांव
8805312049.

बालाजी
डायग्नोस्टिक सेंटर

HISTOPATHOLOGICAL INVESTIGATION
CYTOLOGY (FNAC / PAP)
BONE MARROW EXAMINATION

Name of Patient : _____

_____

Age _____ **Sex :** _____

Referring Doctors : _____

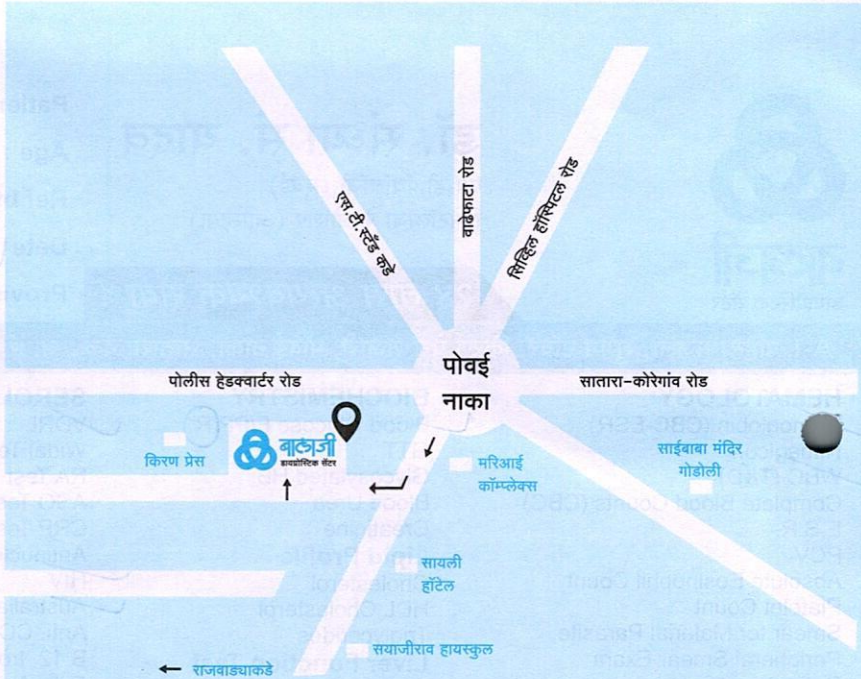
Nature of Specimen _____

L.M.P. _____

Clinical Details : _____

Provisional Diagnosis : _____

Signature _____



सूचना :

१. लिपीड प्रोफाईलसाठी पेशंटनी १२ ते १४ तास उपाशी पोटी येणे.

२. ब्लडशुगर फास्टींगसाठी पेशंटनी ७ ते ८ तास उपाशी पोटी येणे.

३. पोटाच्या व पाठीच्या, मणक्यांच्या एक्स-रेसाठी उपाशी पोटी यावे.

For Lab Use

Sample Collected By : _____

Total Rs. _____

Paid Rs. _____

Balance Rs. _____

Patient Ph. No. ☐☐☐☐☐☐☐☐☐☐

Email.ID. : _____

कमी खर्चात खालील प्रोफाईल होतील...

- बेसीक हेल्थ चेकअप
- एक्झीक्युटिव्ह हेल्थ चेकअप
- डायबेटीक प्रोफाईल
- कार्डीयाक प्रोफाईल
- अथ्रायटिस प्रोफाईल
- प्रेगनन्सी प्रोफाईल
- रिनल प्रोफाईल
- अनिमीया प्रोफाईल

बालाजी डायग्नोस्टिक

हेल्थ कार्ड धारक

कुटूंबातील सर्व व्यक्तींना
तपासण्यांवर १०% सवलत

SUNRAY IMAGING CENTRE
Digital X-Ray & Sonography Centre

Dr. Priyanka S. Patil (Yelmar)
MD (Radiodiagnosis)
Consultant Radiologist
Reg. No. 2015/03/0804

Name	:	MRS. TRUPTI MANGESH LOKHANDE	**Age/Sex**	:	34 YEARS/F
Ref By	:	Dr. R.R.MANE --	**Date**	:	01 Mar 2025

OBSTETRICAL USG SCREENING – NT SCAN

LMP	26/11/2024
GA by LMP	13 weeks 4 days.
EDD by LMP	02/09/2025

A single live intrauterine gestation noted
CRL measures 78.5 mm corresponding to 13 weeks 6 days Cardiac activity is noted.
FHR - 176 bpm.
There is no tricuspid regurgitation.
Placenta is forming posterior; **lower edge is reaching the os.**
Internal Os is closed. Cervical length measures 3.3 cm.
Nasal bone is seen.
Nuchal translucency measures 1.2 mm.
Adnexa are normal.
EDD by USG: 31/08/2025

Name of the artery	PI
Right uterine artery	1.3
Left Uterine artery	1.4
Mean	**1.3**
Ductusvenosus	0.9

Uterine arteries show normal forward diastolic flow. No evidence of diastolic notch or reversal.
No reversal of A wave is seen on Doppler evaluation of Ductusvenosus.

IMPRESSION:

- **Single live intra uterine pregnancy of 13 weeks 6 days as per USG.**
- **Low lying placenta.**

Suggested anomaly scan.

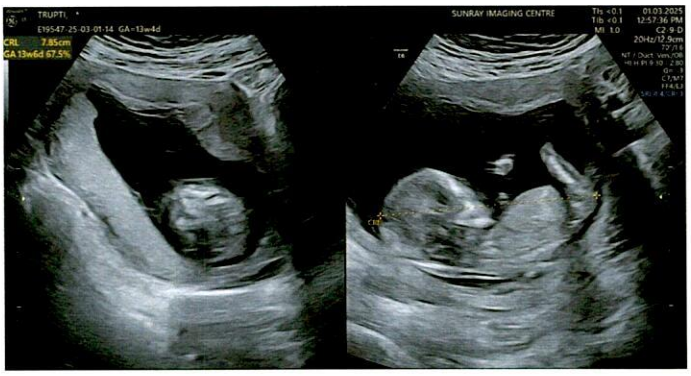
Kindly note: Detection of one or more fetal anomalies is subject to fetal position and movements during examination and also the amount of amniotic fluid.

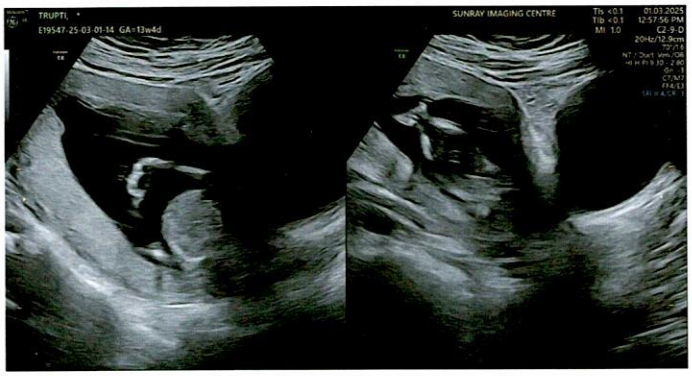
DECLARATION

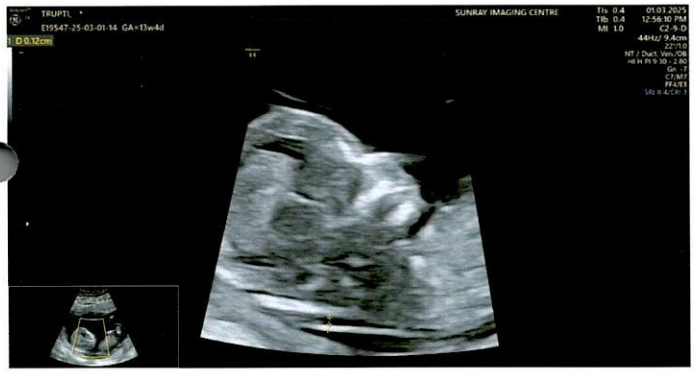
I, **Dr. Priyanka Sumit Yelmar** declare that while conducting ultrasonography / image scanning on **MRS. TRUPTI MANGESH LOKHANDE** have neither detected nor disclosed the sex of her fetus to anybody in any manner.

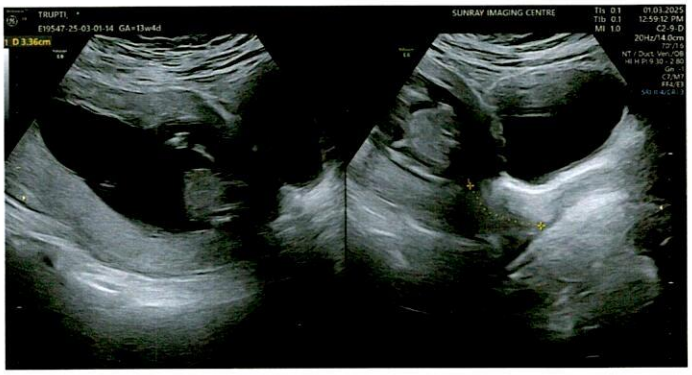
Dr. Priyanka Sumit Yelmar
M.D.(RADIODIAGNOSIS)
Reg.No. 2015/03/0804

Dr. Priyanka Sumit Yelmar
MD Radiodiagnosis


TRUPTI
E19547-25-03-01-14 GA=13w4d
SUNRAY IMAGING CENTRE
CRL 7.85cm
GA 13w6d 67.5%


TRUPTI
E19547-25-03-01-14 GA=13w4d
SUNRAY IMAGING CENTRE


TRUPTI
E19547-25-03-01-14 GA=13w4d
SUNRAY IMAGING CENTRE
1 D 0.12cm


TRUPTI
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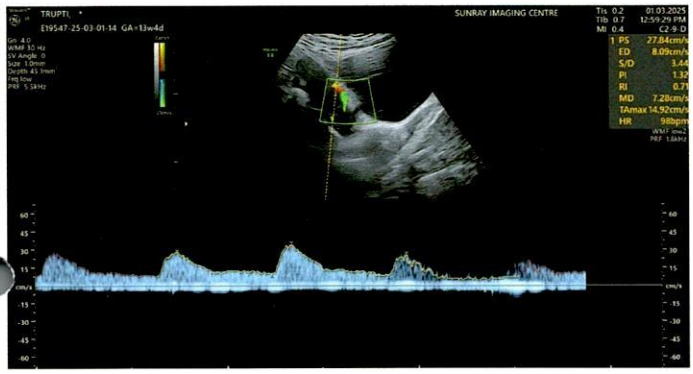
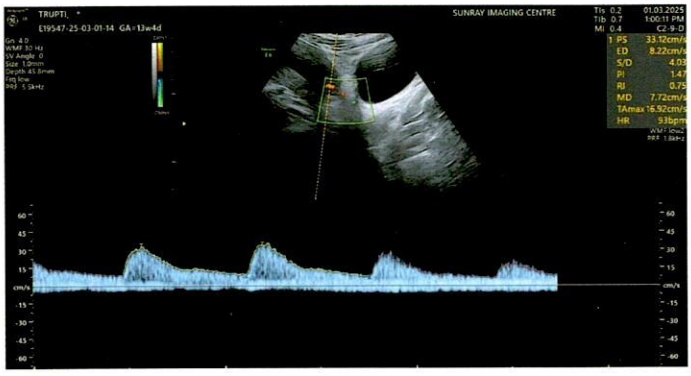
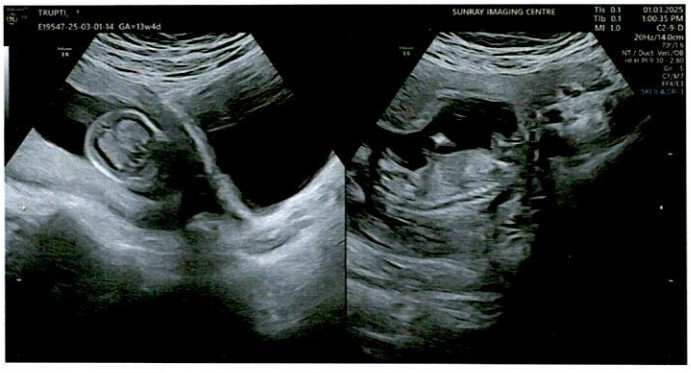
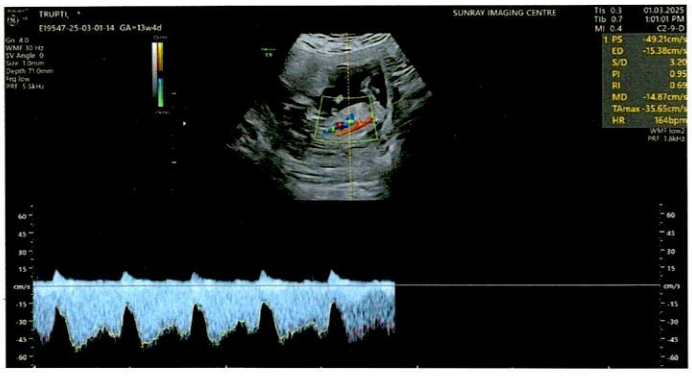
SUNRAY IMAGING CENTRE
1 D 3.36cm


TRUPTI
E19547-25-03-01-14 GA=13w4d
SUNRAY IMAGING CENTRE
1 PS 27.84cm/s
ED 8.09cm/s
S/D 3.44
PI 1.32
RI 0.71
MD 7.28cm/s
TAmax 14.92cm/s
HR 98bpm


TRUPTI
E19547-25-03-01-14 GA=13w4d
SUNRAY IMAGING CENTRE
1 PS 33.12cm/s
ED 8.22cm/s
S/D 4.03
PI 1.47
RI 0.75
MD 7.72cm/s
TAmax 16.52cm/s
HR 93bpm


TRUPTI
E19547-25-03-01-14 GA=13w4d
SUNRAY IMAGING CENTRE


TRUPTI
E19547-25-03-01-14 GA=13w4d
SUNRAY IMAGING CENTRE

श्री स्वामी समर्थ हॉस्पिटल व प्रसुतिगृह

डॉ. किरण एस्. जाधव
M.D. (Obstetric & Gynecology)
Reg. No. 2001 / 2002 / 2003

डॉ. स्मिता के. जाधव
(MBBS, DGO)
Reg. No. 2010 / 04 / 0849

रविवार स. १० ते ३ वा.

अल्ट्रासोनोग्राफी क्लिनीक

डॉ. राजेंद्र एस्. माने
B.A.M.S (Mumbai)
Reg. No. 19992 A 1
Mob. : 9421118907

डॉ. सौ. रत्नप्रभा आर. माने
D.H.M.S.C.C.H.
Reg. No. 18568
Mob. : 9921791279

मु. पो. कुडाळ, ता. जावली, जि. सातारा फोन : (०२३७८) २३५२०५

No. **Ultrasonography** Date : 14/ 1 /2024.

Name Trupti Mangesh Lokhande Ref.by : M- R- Smie

L.M.P. 26-11-24. E.D.D.: 2/9 /2025.

- Number of Fetuses : Single / Twin / Live / Dead intrauterine Preg
- Placentra : Anterior / Posterior-foundal / Low Lying
- Liquor Adequate / Polyhydiminous oligohydromines
- Fetal movemantes & Cardiac activity Preesent / Absent

- Fetal Spine –
- Fetal liver,spleen,kidneys,bladder –
- Fetal Weight –
- Cervical lenght internal os closed
- Any other congenital anamalies are not seen at this stage

Measurement

Item	m. ms.	weeks	-+ wks	E.D.D.
B P D				
F M L				
C R L	7.44.	6.	4	10-9-25
H D C				
A B C				

Impression : SLIUP of 6 weeks 4 days

Dr. Kiran Shrirang Jadhav
(MD-Obgy)
Reg. No. 2001/2002/0063

Dr. Smita Kiran Jadhav
(MBBS, DGO)
Reg. No. 2010/04/0849

Obstetric Ultrasound Report

Hosp: Shri Swami Samarth Hospital
Name [illegible] ID: Age:
SN 1: SN 2: Ref MD:

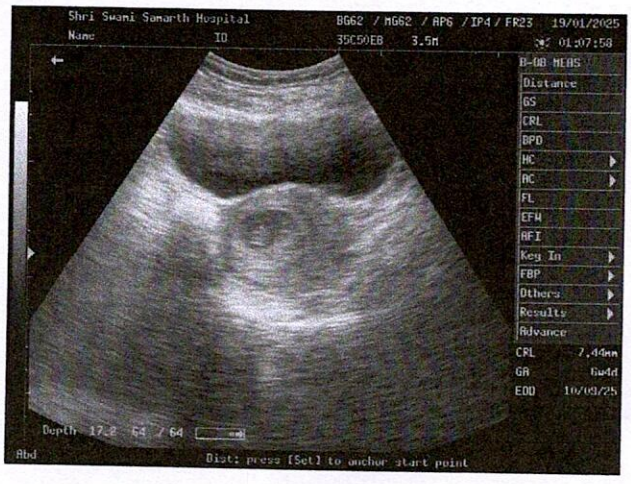
Calculation Data:

	Grow Param		GA	EDD
GS:		mm		
CRL:	7.44	mm	6w4d	10/09/2025
BPD:		mm		
HC:		mm		
AC:		mm		
FL:		mm		
OFD:		mm		
BD:		mm		
CER:		mm		
THD:		mm		
TAD:		mm		
APAD:		mm		
FTA:		mm^2		
HUM:		mm		
Ulna:		mm		
Tibia:		mm		

Average GA: 6w4d Average EDD: 10/09/2025

LMP: GA: EDD:
EFW: g Formula:

Fetal Presentation: FHR: bpm AFI: mm ( ) cm
Placental Pos: Placental Grade:



Diagnosis: SLUP of 6 weeks 4 days

Signature (seal)

/ / d

FORM F

[See Provison to Section 4 (3), Rule 9(4) and Rule 10 (1A)]

FORM FOR MAINTENANCE OF RECORD IN RESPECT OF PREGNANT WOMAN BY GENETIC / CLINIC ULTRASOUND CLINIC / IMAGING CENTRE

1. Name of the Ultrasound Clinic **Shree Swami Samarth Hospital, Kudal and Maternity home, Kudal**
   Address : At. / Post - Kudal. Tal. - Jaoli, Dist. Satara.
2. Registration No. : SAT / JWL / 116 / 2002
3. Patient's Name ..... Trupti mangesh Lokhande. ..... Age ..... 34y .....
4. Total Number of living Children :

No. of Children	1st	2nd	3rd	4th	5th
Son					
Daughter	5years				

   a) Sons- —
   b) Daughters- 1
5. Husband's/Father's Name : ..... Mangesh maruti Lokhande .....
6. Full address with Tel. No.if any : ..... At p. Udtare T-wai D-Satara .....
7. Referred by : **Dr. R. S. Mane Shree Swami Samarth Hospital, At/Post-Kudal, Tal. Jaoli, Dist. Satara**
8. Last menstrual period Or weeks of pregnancy : ..... 26-11-24 ..... 7796123399 .....

Section B : To be Filled in for Performing non-invasive diagnostic Procedures/Tests only.

9. Name of the doctor prtocedures : **Dr. Kiran Shrirang Jadhav** (MD-Obgy) Reg. No. 2001/2002/0063
   Dr. Smita Kiran Jadhav (MBBS, DGO) Reg. No. 2010/04/0849
10. Indications for diagnosis Procedure :

- ✓ i ☐ To diagnose intra-uterin and/or ectopic pregnancy and confirm viability.
- ii ☐ Estimation of gestational age (dating)
- iii ☐ Detection of Number of fetuses and their chorionicity.
- iv ☐ Suspected pregnancy with IUCD in-situ or suspected pregnancy following contraceptive failure/MTP failure.
- v ☐ Vaginal bleeding/leaking
- vi ☐ Follow-up of abortion.
- vii ☐ Assessment of cervical canal and diameter of internal os.
- viii ☐ Discrepancy between uterine size and period of amenorrhea.
- ix ☐ Any suspected adenexal or uterine pathology/amenorrhea.
- x ☐ Detection of Chromosomal abnormalities, fetal structural. defects and other abnormalities and their follow-up.
- xi ☐ To evaluate fetal presentation and position.
- xii ☐ Assessment of liquor amnii.
- xiii ☐ Preterm labor / preterm premature rupture of membranes.
- xiv ☐ Evaluation of placental position, thinckness, grading and abnormalities.
- xv ☐ Evaluation of umbillical cord-presentation, insertion, nuchal encirclement, number of vessels and presence of true knot.
- xvi ☐ Evaluation of previous Caesarean Section scarrs.
- xvii ☐ Evaluation of fetal growth parametermeters, fetal weight and fetal well being
- xviii ☐ Color flow mapping and duplex Doppler studies.
- xix ☐ Ultrasound guided procedres such as medical termination of pregnancy external cephalic version etc. and their follow-up.
- xx ☐ Adjust to diagnostic and therapeutic invasive intervention.
- xxi ☐ Observation of intra-partum events.
- xxii ☐ Medical/Surgical conditions complication pregnancy.
- xxiii ☐ Research/scientific studies in recongized instutions.

11. Procedures carried out-Non-Invasive-Ultrasound.
12. Any complication of procedure-please specify - NO
13. Laboratory teste recommended
    (i) Chromosomal studies (ii) Biochemical studies (iii) Molecular studies (iv) Pre-implantion genetic diagnosis -NO
14. **Result of the non-invasive procedure carried out.** ..... Singlton 6weeks 4days .....
15. **Date (s) on which procedures carried out :** ..... 19-1-25 .....
16. **Date on which consent obtained. (in case or inva-sive) :** ..... 19-1-25 .....

Section C : To be Filled in for Performing non-invasive diagnostic Procedures/tests only.

17. Names of the doctor's performing the procedure's : Not Applicable
18. History of genetic/medical disease in the family (specify) : Not Applicable
19. Indication's for the diagnosis procedure : Not Applicable
20. Date on which consent of pregnant woman/person was obtained in form G prescribed in PC & PNDT Act. :Not Applicable
21. Invasive procedures carried out : Not Applicable
22. Any Complication's of invasive procedure (specify) : Not Applicable
23. Additional tests recommended (Please mention if Applicable) : Not Applicable
24. Result of the Procedures/Tests carried out : Not Applicable
25. Date on which procedures carried out : Not Applicable
26. The result of pre-natal diagnostic procedures was conveyed to : Not Applicable
27. Any indication fo MTP as per the abnormality detected in the diagnostic procedures/tests : Not Applicable

Date : 19 / 1 /25
Place : Kudal

Dr. Kiran Shrirang Jadhav
(MD-Obgy)
Reg. No. 2001/2002/0063

Dr. Smita Kiran Jadhav
(MBBS, DGO)
Reg. No. 2010/04/0849

दिनांक : 19/1/25

गरोदर स्त्रीचे संमतीसाठी फॉर्म व जाहीर निवेदन !

मी सौ. तृप्ती मंगेश लोखंडे

असे जाहीर करते की,

१) अल्ट्रासोनोग्राफी / इमेज स्कॅनिंग तपासणीद्वारे मला माझ्या गर्भाचे लिंग जाणून घ्यावयाचे नाही.

२) मी लिहून दिलेल्या माहिती विरुध्द कृती केली तर प्रसुतीपुर्व निदान तंत्र (नियंत्रण व दुरुपयोगी प्रतिबंध) कायदा १९९४ (१९९४) (५७) त्या खालील नियमाप्रमाणे शिक्षेस पात्र राहीन.

गरोदर स्त्री
सही / अंगठा

DECLARATION OF DOCTOR/PERSON CONDUCTING ULTRASONOGRAPHY / IMAGE SCANNING

I Dr. Kiran Shrirang Jadhav/Dr. Smita Kiran Jadhavdeclare that while conducting ultrasonography / image

Mrs. Trupti Mangesh Lokhande .....have neither detected nor disclosed the sex of the foetus to any body in any manner.

Shree Swami Samarth Hospital & Maternity Home, Kudal
At. / Post - Kudal, Tal. Jaoli, Dist. - Satara
Reg. No. SAT / JWL / 116 / 2002

Dr. Kiran Shrirang Jadhav
(MD-Obgy)
Reg. No. 2001/2002/0063

Dr. Smita Kiran Jadhav
(MBBS, DGO)
Reg. No. 2010/04/0849