Tealth Check up Booking Request(22E57034)

message

tediwheel <wellness@mediwheel.in> o: yashanshusingh1109@gmail.com c: customer care@mediwheel.in

Fri, 7 Mar, 2025 at 4:03 pt



Dear MR. YASHANSHU,

We have received your booking request for the following health checkup, , please upload your approval letter as soon as possible to enable us to confirm your booking.

User Package Name Mediwheel Full Body Health Checkup Male Below 40

Name of

Diagnostic/Hospital : Manipal Hospital

Address of

NH-24, Hapur Road, Oppo. Bahmeta Village, Near Lancraft Golf Links

Diagnostic/Hospital Aparment, Ghaziabad, Uttar Pradesh - 201002

Appointment Date

: 08-03-2025

Preferred Time

: 09:30 AM - 10:00 AM

.77.0000	Member Information				
CHICOSTO	Booked Member Name Age Gender				
- Contraction of the last	MR. YASHANSHU	1 · · · · · · · · · · · · · · · · · · ·	Male		

Note - Do not pay any amount to the hospital

Tests included in this Package

- Thyroid Profile
- Urine Analysis
- Liver Profile
- Lipid Profile
- HbA1c
- CBC
- Blood Glucose (Post Prandial)
- Blood Glucose (Fasting)
- ESR
- Stool Test
- Chest X-ray
- ECG
- USG Whole Abdomen
- TMT OR 2D ECHO (Any 1) Chosen By Candidate
- Eye Check-up Consultation
- **Dental Consultation**
- General Physician Consultation

Thanks, Mediwheel Team

Please Download Mediwheel App



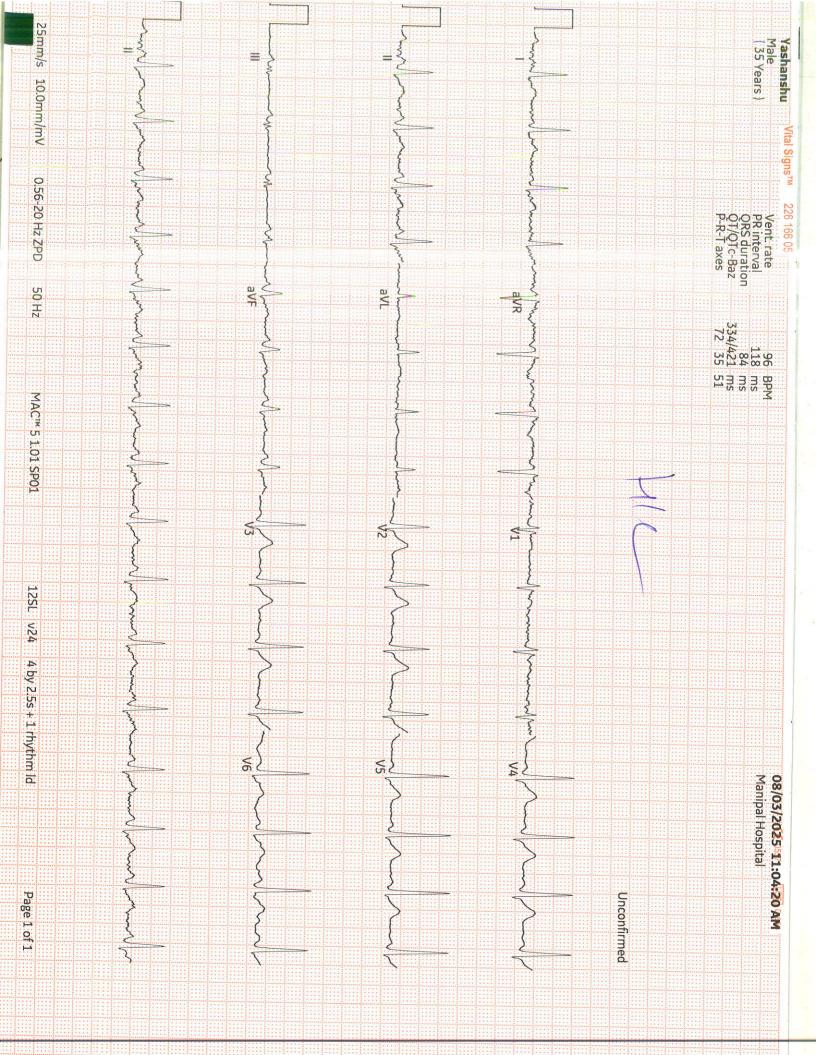
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manipal hospitals





Patient Name Location Ghaziabad MR YASHANSHU Ag Sex 35Year(s)/male : V0000000001-GHZB Visit No MRN No MH008994675 Order Date :08/03/2025 Ref Doctor H/C Report Date :08/03/2025

Echocardiography

Final Interpretation

- 1. No RWMA, LVEF=60%.
- 2. Normal CCD.
- 3. Grade I LV diastolic dysfunction.
- 4. Trace MR, No AR.
- 5. Trace TR, Normal PASP.
- 6. No intracardiac clot/vegetation/pericardial pathology.
- 7. IVC normal

Chambers & valves:

- <u>Left Ventricle</u>: It is normal sized.
- **Left Atrium:** It is normal sized.
- Right Atrium: It is normal sized.
- Right Ventricle: It is normal sized.
- Aortic Valve: It is normal sized.
- Mitral Valve: Opens normally. Subvalvular apparatus appear normal, Trace MR.
- <u>Tricuspid Valve:</u> Trace TR.
- <u>Pulmonic Valve</u>: It appears normal.
- Main Pulmonary artery & its branches: Appear normal.
- Pericardium: There is no pericardial effusion.

Description:

LV is normal size with normal contractility.

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P: 0120-3535353

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017

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Patient Name MR YASHANSHU

Location

Ghaziabad

Age/Sex

35Year(s)/male

Visit No

: V000000001-GHZB

MH008994675

Order Date

08/03/2025

Ref. Doctor : H/C

Report Date

08/03/2025

Echocardiography

Measurements (mm):

	Observed values	Normal values
Aortic root diameter	27	20-36 (22mm/M ²)
Aortic valve opening	19	15-26
Left atrium size	24	19-40

	End Diastole	End Systole	Normal Values
Left ventricle size	41	28	(ED=37-53:Es=22-40)
Interventricular septum	11	12	(ED=6-12)
Posterior wall thickness	09	12	(ED=5-10)

11/ Figgtion Eraction (%)	60%	55%-80%
LV Ejection Fraction (%)	0070	
HR		

Color & Doppler evaluation

Valve	Velocity(cm/s)	Regurgitation
Mitral	E/A-76/88 DT-	Trace
Aortic	106	Nil
Tricuspid	40	Trace
Pulmonary	78	Nil

Dr. Bhupendra Singh

MD, DM (CARDIOLOGY), FACC

Sr. Consultant Cardiology

Dr. Sudhanshu Mishra

Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P: 0120-3535353

Dr. Abhishek Singh

MD, DNB (CARDIOLOGY), MNAMS

Sr. Consultant Cardiology

Dr. Geetesh Govil

MD,D.Card, PGDCC,MAAC,M.Med,MIMA,FAGE

Jr. Consultant Cardiology

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Manipal Health Enterprises Private Limited

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Lab No

Collection Date:

Reporting Date:

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002 Ph. +91 120 353 5353, M. 88609 45566

35 Yr(s) Sex :Male

08 Mar 2025 10:09

08 Mar 2025 12:32

202503001229

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LABORATORY REPORT Age

Name

: MR YASHANSHU

Registration No

: MH008994675 RefHosp No.:

ghzb-0000160858

Patient Episode

: H18000003904

Referred By Receiving Date

TEST

: HEALTH CHECK MGD : 08 Mar 2025 10:09

BIOCHEMISTRY

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

[<200]

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL Method:Oxidase, esterase, peroxide	209 #	mg/dl	Moderate risk:200-239 High risk:>240
Method:Oxidase, esterase, Francisco (GPO/POD)	113	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL Method: Enzymatic Immunoimhibition VLDL- CHOLESTEROL (Calculated) CHOLESTEROL, LDL, CALCULATED	42 23 144.0 #	mg/dl mg/dl	[35-65] [0-35] [<120.0] Near/
Above optimal-100-129 T.Chol/HDL.Chol ratio(Calculated)	5.0		Borderline High:130-159. High Risk:160-189 <4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	3.4		<pre><3 Optimal 3-4 Borderline >6 High Risk</pre>

Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases Page1 of 2

-----END OF REPORT-----

Dr. Charu Agarwal Consultant Pathologist

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LABORATORY REPORT

Name

MR YASHANSHU

Age

35 Yr(s) Sex :Male

Lab No

202503001229

Registration No

MH008994675 RefHosp No.:

08 Mar 2025 10:09

ghzb-0000160858

Collection Date:

Patient Episode

H18000003904

09 Mar 2025 10:16

Reporting Date:

ReferredBy Receiving Date HEALTH CHECK MGD 08 Mar 2025 10:09

TIST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood Blood Group & Rh typing A Rh(D) Positive

technique.

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel Technical note:

BLOOD BANK

Pagel of 1

NOTE:

- Abnormal Values

----END OF REPORT-----

Dr. Charu Agarwal Consultant Pathologist







Age

Lab No

Collection Date:

Reporting Date:

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

35 Yr(s) Sex :Male

08 Mar 2025 10:09

08 Mar 2025 16:17

202503001230

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LABORATORY REPORT

Name

: MR YASHANSHU

Registration No

: MH008994675 RefHosp No.:

ghzb-0000160858

Pati ent Episode

: H18000003904

Referred By Receiving Date : HEALTH CHECK MGD

: 08 Mar 2025 10:09

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

GLUCOSE-Fasting

Specimen: Plasma
GLUCOSE, FASTING (F)
Method: Hexokinase

ASTING (F)

92.1

mg/dl

[70.0-110.0]

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%). Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortica insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia),

insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

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-----END OF REPORT-----

Dr. Charu Agarwal Consultant Pathologist

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LABORATORY REPORT Age

Name

: MR YASHANSHU

35 Yr(s) Sex :Male

Registration No

: MH008994675 RefHosp No.:

Lab No

202503001231

ghzb-0000160858

Collection Date:

08 Mar 2025 14:08

Patient Episode

: H18000003904

Reporting Date:

09 Mar 2025 09:39

Referred By

: HEALTH CHECK MGD

Receiving Date

: 08 Mar 2025 14:08

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Specimen:Plasma GLUCOSE, POST PRANDIAL (PP), 2 HOURS 167.6 #

mg/dl

[80.0-140.0]

Method: Hexokinase

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying,

brisk glucose absorption , post exercise

Page1 of 1

-----END OF REPORT-----

Dr. Charu Agarwal Consultant Pathologist

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LABORATORY REPORT

Nante

: MR YASHANSHU

Age

35 Yr(s) Sex :Male

Registration No

: MH008994675 RefHosp No.:

Lab No

202503001229

ghzb-0000160858

Collection Date:

08 Mar 2025 10:09

Patient Episode

: H18000003904

Referred By

: HEALTH CHECK MGD

Reporting Date:

08 Mar 2025 12:37

Receiving Date

: 08 Mar 2025 10:09

HAEMATOLOGY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

COMPLETE BLOOD COUNT (AUTOMA	TED)	SPECIMEN-EDTA Whole	Blood
RBC COUNT (IMPEDENCE)	4.83	millions/cumm	[4.50-5.50]
HEMOGLOBIN	14.4	g/dl	[13.0-17.0]
Method:cyanide free SLS-colo	rimetry		
HEMATOCRIT (CALCULATED)	43.3	96	[40.0-50.0]
MCV (DERIVED)	89.6	fL	[83.0-101.0]
MCH (CALCULATED)	29.8	pg	[25.0-32.0]
MCHC (CALCULATED)	33.3	g/dl	[31.5 - 34.5]
RDW CV% (Calculated)	12.7	96	[11.6-14.0]
Platelet count	288	\times 10 3 cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	10.20	fL	
Subtractabilities (Acceptance Control of Con			
WBC COUNT(TC) (Flow Cytometry	// Manual)	8.07 x 10^3 cells/	
cumm [4.00-10.00]			
DIFFERENTIAL COUNT			
(VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	60.0	8	[40.0-80.0]
Lymphocytes	28.0	%	[20.0-40.0]
Monocytes	9.0	%	[2.0-10.0]
Eosinophils	3.0	%	[1.0-6.0]
Basophils	0.0	8	[0.0-2.0]
* 1			
ESR	25.0 #	mm/1sthour	[0.0-10.0]

Page 1 of 7







Age

Lab No

Collection Date:

Reporting Date:

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35 Yr(s) Sex :Male

08 Mar 2025 10:09

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LABORATORY REPORT

Nante

: MR YASHANSHU

: MH008994675 RefHosp No.:

ghzb-0000160858

Patient Episode

Registration No

: H18000003904

Referred By Receiving Date : HEALTH CHECK MGD

: 08 Mar 2025 10:09

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin)

5.9 #

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA

HbAlc in %

Non diabetic adults >= 18 years <5.7

Prediabetes (At Risk) 5.7-6.4 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

123

mg/dl

Comments : HbAlc provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

CLEAR 7.0

pH (indicators)

(4.6 - 8.0)

Specific Gravity (Dip stick-ion) 1.005

(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin(Dip stick)

Glucose (GOP/PQD/Manual-Benedicts)

Ketone Bodies (Dip stick)

Urobilinogen (Dip stick)

(NEGATIVE)

NIL

(NIL)

Negative Normal

(NEGATIVE) (NORMAL)

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LABORATORY REPORT

Nange

: MR YASHANSHU

Age

35 Yr(s) Sex :Male

Registration No

: MH008994675 RefHosp No.:

Lab No

202503001229

Patient Episode

ghzb-0000160858

Collection Date:

08 Mar 2025 10:09

: H18000003904

08 Mar 2025 12:32

Referred By

: HEALTH CHECK MGD

Reporting Date:

Receiving Date

: 08 Mar 2025 10:09

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

No te:

Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

KIDNEY PROFILE

	NOTICE STORY OF STREET]
mg/d	[8.0-20.0]
mg/d	[0.70-1.20]
mg/c	11 [4.0-8.5]	
	mg/c	mg/dl [8.0-20.0] mg/dl [0.70-1.20

Method:uricase PAP

SODIUM, SERUM	135.60 #	mmol/L	[136.00-144.00]
POTASSIUM, SERUM SERUM CHLORIDE Method: ISE Indirect	4.26 102.4	mmol/L	[3.60-5.10] [101.0-111.0]

eGFR (calculated) Technical Note

ml/min/1.73sq.m 110.3

[>60.0]

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

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LABORATORY REPORT

Name

: MR YASHANSHU

: MH008994675 RefHosp No.:

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Patient Episode

Registration No

: H18000003904

Referred By

: HEALTH CHECK MGD

Receiving Date

: 08 Mar 2025 10:09

Age

35 Yr(s) Sex :Male

Lab No

202503001229

Collection Date:

08 Mar 2025 10:09

Reporting Date:

08 Mar 2025 12:32

BIOCHEMISTRY

TEST	RESULT	UNIT BIOL	OGICAL REFERENCE INTERV	AL
LIVER FUNCTION TEST				
BILIRUBIN - TOTAL Method: D P D	0.89	mg/dl	[0.30-1.20]	
BILIRUBIN - DIRECT Method: DPD	0.17	mg/dl	[0.00-0.30]	
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.72	mg/dl	[0.10-0.90]	
TOTAL PROTEINS (SERUM) Method: BIURET	7.70	gm/dl	[6.60-8.70]	
ALBUMIN (SERUM) Method: BCG	4.52	g/dl	[3.50-5.20]	
GLOBULINS (SERUM) Method: Calculation	3.20	gm/dl	[1.80-3.40]	
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.42		[1.00-2.50]	
AST(SGOT) (SERUM) Method: IFCC W/O P5P	63.03 #	U/L	[0.00-40.00]	
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	116.70 #	U/L	[17.00-63.00]	
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	133.2 #	IU/L	[32.0-91.0]	
GGT	59.0 #	ŭ/L	[7.0-50.0]	
			Page 5 of 7	







Age

Lab No

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NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

35 Yr(s) Sex : Male

08 Mar 2025 10:09

08 Mar 2025 12:32

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LABORATORY REPORT

Nante

: MR YASHANSHU

Registration No

: MH008994675 RefHosp No.:

ghzb-0000160858

Patient Episode

: H18000003904

Referred By

: HEALTH CHECK MGD

Receiving Date

: 08 Mar 2025 10:09

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

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----END OF REPORT-----

Dr. Charu Agarwal Consultant Pathologist

Printed On :

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NAME_	YASHANSHU	STUDY DATE	08/03/2025 10:22AM
AGE / SEX	35 y / M	HOSPITAL NO.	MH008994675
ACCESSION NO.	R9496780	MODALITY	US
REPORTED ON	08/03/2025 10:35AM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS FINDINGS

LIVER: appears enlarged in size (measures 153 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade II fatty infiltration along with coarsening of echotexture. Rest normal SPLEEN: Spleen is normal in size (measures 108 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears mildly dilated and measures 13.5 mm.

COMMON BILE DUCT: Appears normal in size and measures 4.7 mm.

IVC, HEPATIC VEINS: Normal. BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is

maintained. Rest normal.

Right Kidney: measures 110 x 40 mm. Left Kidney: measures 106 x 46 mm. PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged. FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest

normal.

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 42 x 27 x 26 mm with volume 15 cc.

Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

- Hepatomegaly with diffuse grade II fatty infiltration in liver along with coarsening of echotexture (ADV: LFT Correlation and Fibroscan for further evaluation).
- Mildly dilated portal vein.

Recommend clinical correlation.

Dr. Monica Shekhawat

Marica.

MBBS, DNB, CCFRG, ACFRG (Reg No MCI 11-10887)

CONSULTANT RADIOLOGIST

******End Of Report*****





NAME	YASHANSHU	STUDY DATE	08/03/2025 10:18AM
AGE / SEX	35 y / M	HOSPITAL NO.	MH008994675
ACCESSION NO.	R9496779	MODALITY	CR
REPORTED ON	08/03/2025 11:20AM	REFERRED BY	HEALTH CHECK MGD

XR- CHEST PA VIEW

FINDINGS:

LUNGS: Normal. TRACHEA: Normal. CARINA: Normal.

RIGHT AND LEFT MAIN BRONCHI: Normal.

PLEURA: Normal. HEART: Normal.

RIGHT HEART BORDER: Normal. LEFT HEART BORDER: Normal. PULMONARY BAY: Normal. PULMONARY HILA: Normal.

AORTA: Normal.

THORACIC SPINE: Normal.

OTHER VISUALIZED BONES: Normal. VISUALIZED SOFT TISSUES: Normal.

DIAPHRAGM: Normal.

VISUALIZED ABDOMEN: Normal. VISUALIZED NECK: Normal.

IMPRESSION:

No significant abnormality noted.

Recommend clinical correlation.

Dr. Monica Shekhawat

Maria.

MBBS, DNB, CCFRG, ACFRG (Reg No MCI 11-10887)

CONSULTANT RADIOLOGIST

*****End Of Report****