



प्रति,

समन्वयक,  
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार है हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MR. SINGH PARMINDER
क.कू.संख्या	176025
पदनाम	ARMED GUARD
कार्य का स्थान	KHARAR, CHANDIGARH ROAD
जन्म की तारीख	02-11-1977
स्वास्थ्य जांच की प्रस्तावित तारीख	08-02-2025
बुकिंग संदर्भ सं.	24M176025100141536E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 28-01-2025 से 31-03-2025 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मा.सं.प्र. एवं विपणन

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पटीकरण के लिए MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.) से संपर्क करें।)



## LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,  
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. SINGH PARMINDER
EC NO.	176025
DESIGNATION	ARMED GUARD
PLACE OF WORK	KHARAR, CHANDIGARH ROAD
BIRTHDATE	02-11-1977
PROPOSED DATE OF HEALTH CHECKUP	08-02-2025
BOOKING REFERENCE NO.	24M176025100141536E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **28-01-2025** till **31-03-2025**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM & Marketing Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.))



**List of tests & consultations to be covered as part of Annual Health Check-up**

S.No.	For Male	For Female
1	CBC	CBC
2	ESR	ESR
3	Blood Group & RH Factor	Blood Group & RH Factor
4	Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
5	Blood and Urine Sugar PP	Blood and Urine Sugar PP
6	Stool Routine	Stool Routine
	<b>Lipid Profile</b>	<b>Lipid Profile</b>
7	Total Cholesterol	Total Cholesterol
8	HDL	HDL
9	LDL	LDL
10	VLDL	VLDL
11	Triglycerides	Triglycerides
12	HDL/ LDL ratio	HDL/ LDL ratio
	<b>Liver Profile</b>	<b>Liver Profile</b>
13	AST	AST
14	ALT	ALT
15	GGT	GGT
16	Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
17	ALP	ALP
18	Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
	<b>Kidney Profile</b>	<b>Kidney Profile</b>
19	Serum Creatinine	Serum Creatinine
20	Blood Urea Nitrogen	Blood Urea Nitrogen
21	Uric Acid	Uric Acid
22	HBA1C	HBA1C
23	Routine Urine Analysis	Routine Urine Analysis
24	USG Whole Abdomen	USG Whole Abdomen
	<b>General Tests</b>	<b>General Tests</b>
25	X Ray Chest	X Ray Chest
26	ECG	ECG
27	2D/3D ECHO / TMT	2D/3D ECHO / TMT
28	Stress Test	Gynaec Consultation
29	PSA Male (above 40 years)	Pap Smear (above 30 years) & Mammography (above 40 years)
30	Thyroid Profile (T3, T4, TSH)	Thyroid Profile (T3, T4, TSH)
31	Dental Check-up Consultation	Dental Check-up Consultation
32	Physician Consultation	Physician Consultation
33	Eye Check-up Consultation	Eye Check-up Consultation
34	Skin/ENT Consultation	Skin/ENT Consultation

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भारत सरकार  
Government of India

परमिन्दर सिंह  
Parminder Singh  
जन्म वर्ष / Year of Birth : 1977  
पुरुष / Male



6689 6342 8749

आधार - आम आदमी का अधिकार

भारत सरकार  
Unique Identification Authority of India

पता:  
S/O: अमरीक सिंह, हाउस नं 39,  
रडियाला, एसएस नगर (मोहाली),  
रडियाला, पंजाब, 140301


Address:  
S/O: Amrik Singh, HOUSE No 39,  
Radiala, SAS Nagar (Mohali),  
Radiala, Punjab, 140301

6689 6342 8749

1947  
1800 300 1947


help@uidai.gov.in

www.uidai.gov.in



 **बैंक ऑफ बड़ोदा**  
**Bank of Baroda**


नाम: **PARMINDER SINGH**  
Name:

कर्मचारी कूट क्र. **176025**  
E. C. No.



जारीकर्ता प्राधिकारी इ.स.स. (ए.एम.ए.) क्षेत्र एटीएम  
Issuing Authority DRM (AGM) Chd Region

   
धारक के हस्ताक्षर  
Signature of Holder



gaurinder Singh  
Handwritten name

C/S/G R/O MUCOUS VS

NOCTURIA

Age - 47/1/1

my @ 8/12

20/20

Go walking fast

6/12

B/E

(red)

A/S WOR

Arises

(1)

N/A B/E + 0.75 DS - 20

B/E (2)

porine plus eye  
and TDS

Dr. Mukesh Vaid  
MS, FVRS  
Retina Consultant

Handwritten signature

**Livasa Hospital, Mohali**  
(A Unit of Ivy Health and Life Sciences Private Limited)

Hospital Address: Sector 71, SAS Nagar, Mohali, Punjab-160071

For any service queries or appointments

Call: +91 8078880788, 6239502002

E-mail: cs@livasahospitals.in | Website: www.livasahospitals.com

**Registered Address:** Administration Block,  
Livasa Hospital, Sector-71, Mohali, Punjab -160071

**Corporate Office:** 3<sup>rd</sup> Floor, C-133, Industrial Area,  
Phase 8, SAS Nagar, Mohali, Punjab-160071  
Phone: 91-172-7170000, Fax: 91-172-2274900

CIN No.: U85110PB2005PTC027898

GSTIN: 03AABCI4594F1ZQ

Name : MR. Parminder Singh (47y, Male)  
 Phone : 9592862262  
 ID : 504111  
 Doctor : Dr. Puneet Kumar

Date & Time : 08-Feb-2025 02:17 PM  
 #Visit : 1

BP 122/90 mmHg | Pulse 87 bpm | Weight 87 kg

**Complaints:** CHEST PAIN LEFT SIDE ON AND OFF since 3 months , ROUTINE HEALTH CHECKUP

**Diagnosis:** DYSLIPIDEMIA

Rx

Medicine	Dosage	Timing - Freq. - Duration
1) TOCOFIL CAPSULE *	1 - 0 - 0	After Food - Daily - 90 Days
Timing : 1 After breakfast		
2) ROSUVAS 10 MG *	0 - 0 - 1	Bed Time - Daily - 45 Days
Composition : Rosuvastatin 10 MG		
Timing : 1 Night Bed Time		
3) RABLET L CAPSULE *	1 - 0 - 0	Before Food - Daily - 20 Days
Composition : Levosulpiride 75 MG + Rabeprazole 20 MG		
Timing : 1 Before breakfast		
Notes : EMPTY STOMACH		
4) MOOHICAL D3 NANO SHOTS *		After Food - Weekly
Notes : WEEKLY FOR 8 WEEKS		

**Advice:** LIPID PROFILE AFTER 45 DAYS


**Diet and Exercise:** low fat diet  
 30-40 min walk daily

**Tests Prescribed:**

\* [ Today] 2D ECHO

**Next Visit :** 45 days (25-Mar-2025 - Tuesday)

**Admission Advice:** NO

  
 Dr. Puneet Kumar  
 Consultant - Internal Medicine  
 MBBS, MD (Medicine)  
 Regd. No.: PMC 41837

Powered by HealthPlix EMR. www.healthplix.com

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CIN No.: U85110PB2005PTC027898

GSTIN: 03AABC14594F1ZQ

LIVASA HOSPITAL  
Sector 71  
Mohali, Punjab

Ward  
Telephone:

**EXERCISE STRESS TEST REPORT**

Patient Name: SINGH, PARMENDER  
Patient ID: 504111  
Height: 172 cm  
Weight: 84 kg

DOB: 02.11.1977  
Age: 47yrs  
Gender: Male  
Race: Indian

Study Date: 07.02.2025  
Test Type: --  
Protocol: BRUCE

Referring Physician: --  
Attending Physician: --  
Technician: TANISHA

Medications: --

Medical History: --

Reason for Exercise Test:  
--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:36	0.00	0.00	74	120/70	
	STANDING	00:02	0.00	0.00	74		
	HYPERV.	00:02	0.00	0.00	75		
	WARM-UP	00:40	1.60	0.00	74		
EXERCISE	STAGE 1	03:00	2.70	10.00	116	120/70	
	STAGE 2	03:00	4.00	12.00	148	120/70	
	STAGE 3	02:06	5.30	14.00	171	150/70	
RECOVERY		03:05	0.00	0.00	110	140/70	

The patient exercised according to the BRUCE for 8:05 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 83 bpm rose to a maximal heart rate of 171 bpm. This value represents 98% of the maximal, age-predicted heart rate. The resting blood pressure of 120/70 mmHg, rose to a maximum blood pressure of 150/70 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Normal stress test.

Conclusions

TMT NEGATIVE FOR INDUCIBLE ISCHEMIA.

Physician Dr. Rakesh Bhutungru Technician  
Director-Non Invasive Cardiology  
MBBS, MD (Medicine), DM (Cardiology)  
PMC - 42588

*Dr. Rakesh Bhutungru*  
8/2/25

GE Healthcare REF:2104/769-001



SINGH, PARVINDER  
 Patient ID: 504111  
 02/20/25 Male 172 cm 84 kg  
 47yrs Indian  
 HT: 25pm

Meds:

Test Reason:  
 Medical History:

Ref. MD: Ordering MD:  
 Technician: TANISHA Test Type:  
 Comment:

BRUCE Total Exercise Time 08:05  
 Max HR: 171 bpm 98% of max predicted 173 bpm  
 Max BP: 150/70 Maximum Workload: 10.00 METS  
 Max ST Level -0.85 mm in III: EXERCISE STAGE 3 8:06  
**Reasons for Termination:** Target heart rate achieved  
**Summary:** Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall Impression: Normal stress test.  
**Conclusion:** TMT NEGATIVE FOR INDUCIBLE ISCHEMIA.  
 Location Number: \* 0 \*

base time	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (+100)	VE (l/min)	ST Level III(mm)	Comment
HIEST	SUPINE	00:36	0.00	0.00	1.0	74	120/70	88	0	-0.05	
	STANDING	00:02	0.00	0.00	1.0	74			0	-0.05	
	HYPERV.	00:02	0.00	0.00	1.0	75			0	-0.10	
	WARM-UP	00:40	1.60	0.00	1.2	74			0	-0.05	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	116	120/70	139	0	-0.25	
	STAGE 2	03:00	4.00	12.00	7.0	148	120/70	177	1	-0.65	
	STAGE 3	02:06	5.30	14.00	9.8	171	150/70	256	0	-0.85	
RECOVERY		03:05	0.00	0.00	1.0	110	140/70	154	0	-0.35	



8 CASE V6.51 (0)

Unconfirmed

Attending MD:

SINGH PARMINDER

Patient ID: 5041111

W: 02/2025

11/17/25pm

BASELINE EXERCISE	MAX ST EXERCISE	PEAK EXERCISE	TEST END RECOVERY	BASELINE EXERCISE	MAX ST EXERCISE	PEAK EXERCISE	TEST END RECOVERY
75 bpm	171 bpm	171 bpm	111 bpm	75 bpm	171 bpm	171 bpm	111 bpm
8:01	8:06	8:06	2:55	0:01	8:06	8:06	2:55
	150/70 mmHg	150/70 mmHg	140/70 mmHg		150/70 mmHg	150/70 mmHg	140/70 mmHg



GE CASE: V6.51 (0)  
10mm/mV 60Hz 0.01-20Hz S+

Unconfirmed

Attending MD:

SINTEL PARKHINDER

Patient ID: S04111  
07/07/2025  
11:18:00pm

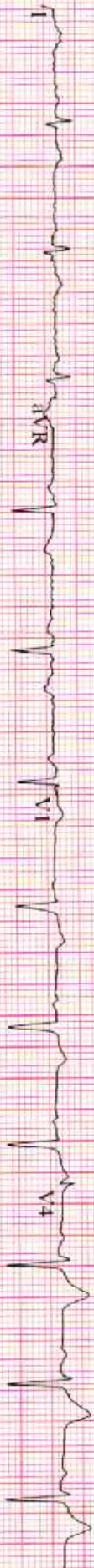
ECG Strips

74 bpm  
120/70 mmHg

PRINT SI  
SEPTIN  
0.35

BPR CF  
0.0 km/h  
0.0 %

LIVANS HOSPITAL



GE CASE V6.51 (0)  
25mm/s 10mm/mV 60Hz 0.01-20Hz S+HR(V6,V5)

Unconfirmed

Attending MD:

1 (4) Strips

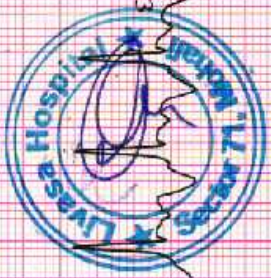
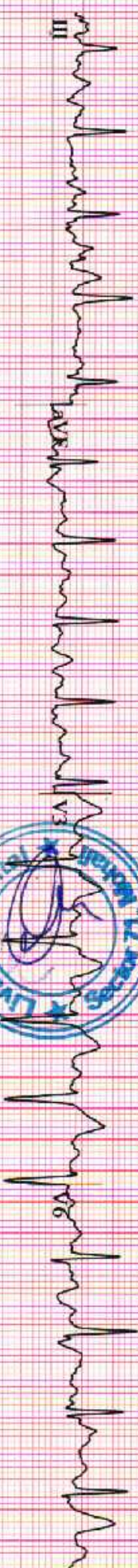
LIVAS HOSPITAL

Patient: D. 504111  
Weight: 125  
Height: 172 cm

HR: 115 bpm  
120/70 mmHg

EXERCISE  
STAGE 1  
2:50

BLOOD PRESSURE  
116/69



GE CASE V6.51 (0)  
25mm/s 10mm/mV 60Hz 0.01-20Hz S+ HR(V6,V5)

Unconfirmed

Attending MD:

SINGH, PAVANINDER

Patient ID: 504111

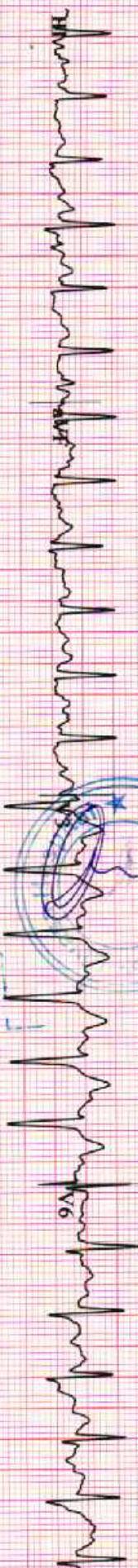
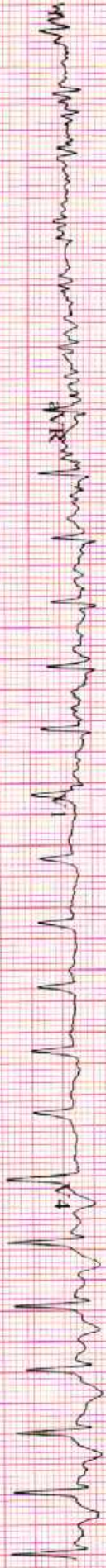
07.02.2025

11:24:32pm

Dr. Preet Singh

Dr. Preet Singh

Dr. Preet Singh



GE CASE: V6.51 (0)  
 25mm/s 10mm/mV 60Hz 0.01-20Hz S+HR(V6,V5)

Unconfirmed

Attending MD:



STENOGRAPHY UNIT  
Patient ID: 004-111  
07.02.2025  
11:26:48pm

111  
S. K. S. S.

S. K. S. S.  
S. K. S. S.  
S. K. S. S.

S. K. S. S.  
S. K. S. S.  
S. K. S. S.



GE CASE V6.51 (0)  
25mm/s 10mm/mV 60Hz 0.01-20Hz S+HR(V3,V4)

Unconfirmed

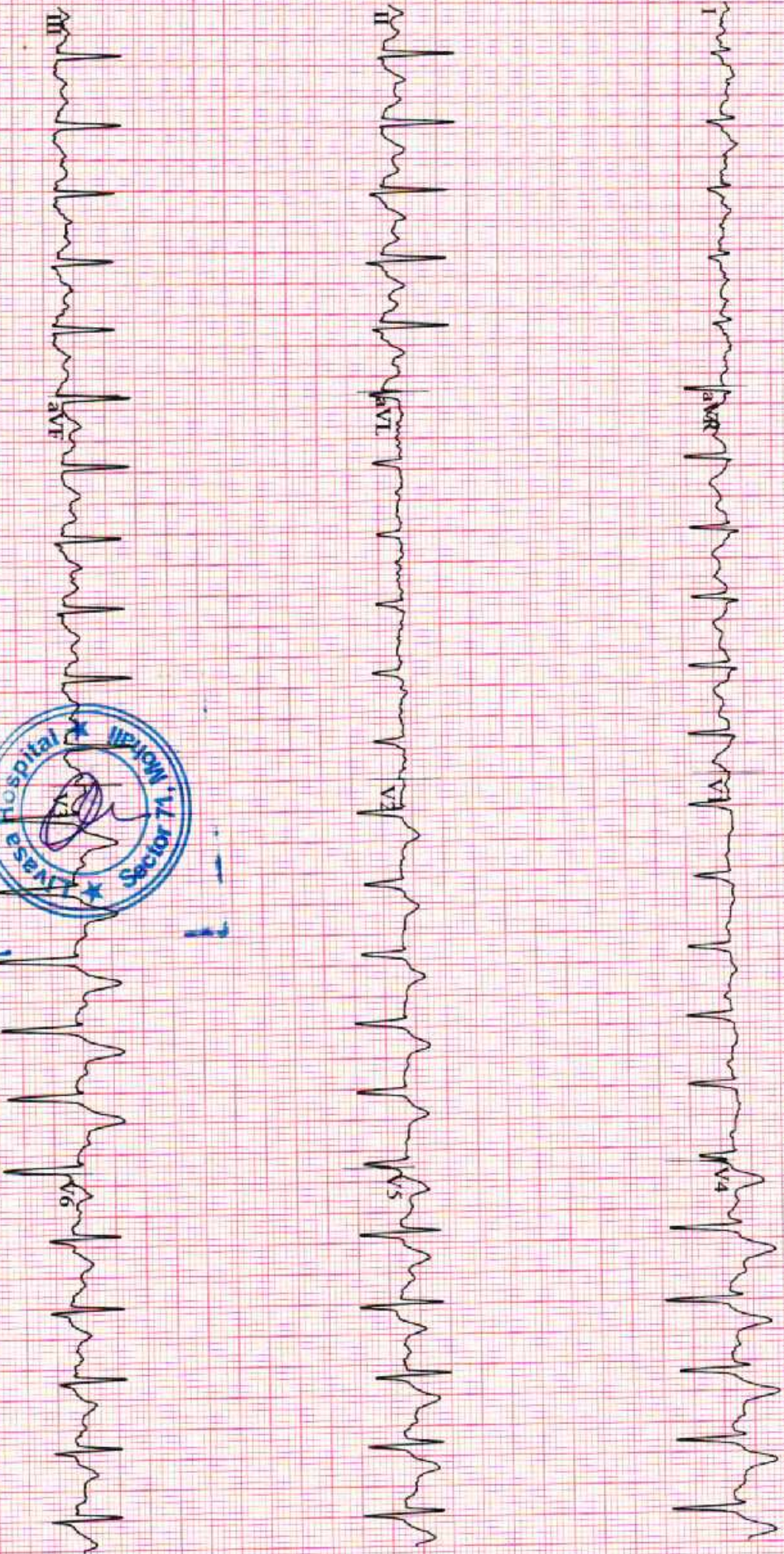
Attending MD:

SINGH, PARKINDER  
Patient ID 504111  
07.02.2025  
11:27:37pm

136 bpm  
150/70 mmHg

RECOVERY  
0:50

BRUCE  
0.0 km/h  
0.0 %



GE CASE V6.51 (0)  
25mm/s 10mm/mV 60Hz 0.01-20Hz S+HR(V3,V4)

Unconfirmed

Attending MD:

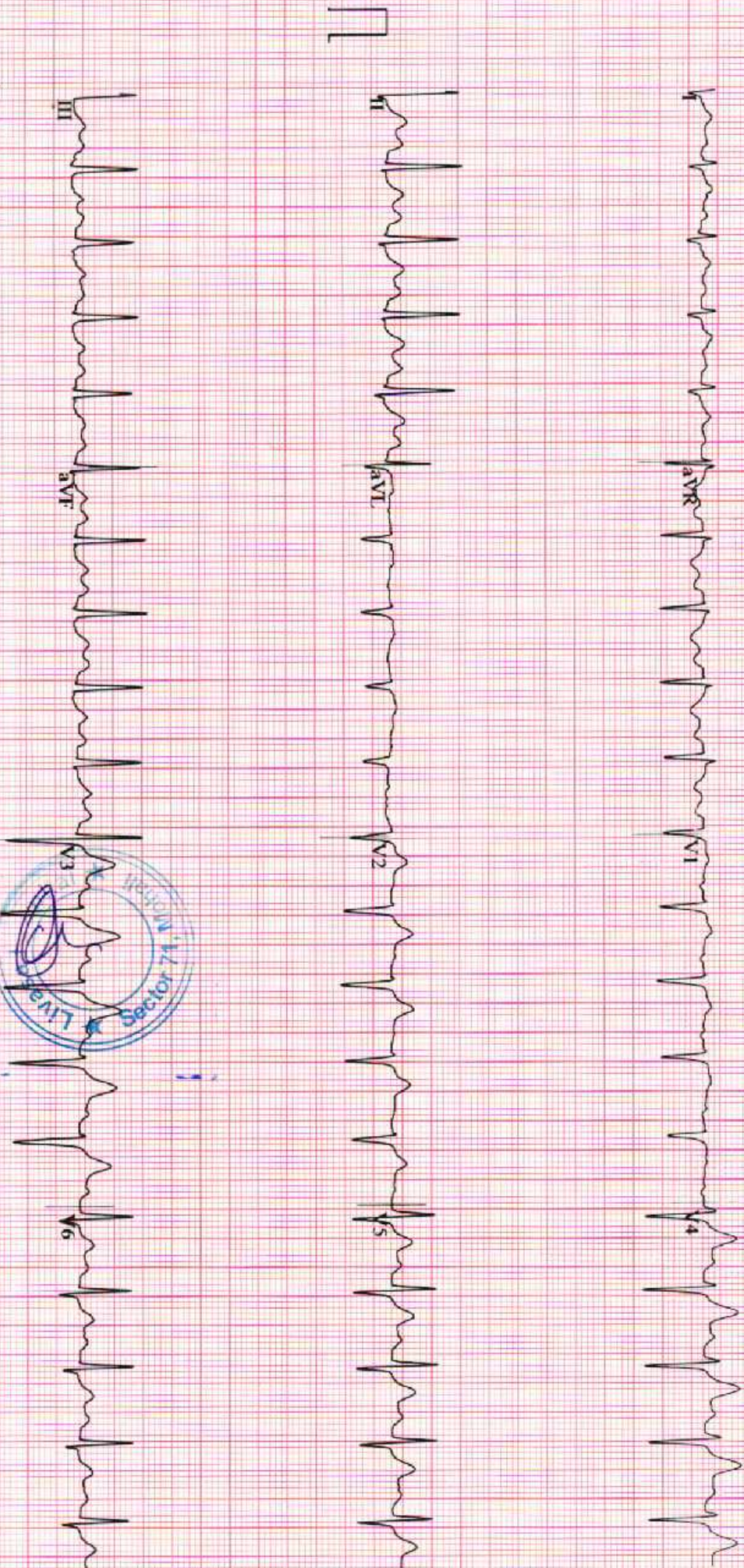


SINGH, PARMINDER  
Patient ID 504111  
07/02/2025  
11:28:37pm

118 bpm  
140.70 mmHg

RECOVERY  
1:50

BRICE  
0.0 km/h  
0.0 %



Unconfirmed

Attending MD:

GE CASE: V6.S1 (0)  
25mm/s 10mm/mV 60Hz 0.01-20Hz S+HR(V3,V4)



SINHA, PARANDEK

Patient ID: 304111

07.02.2025

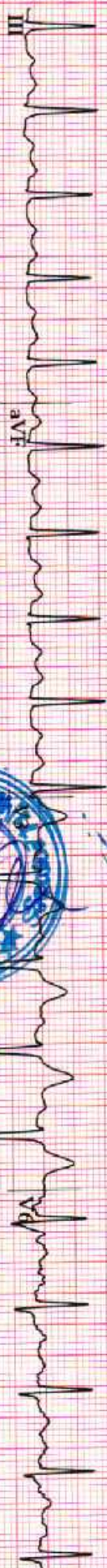
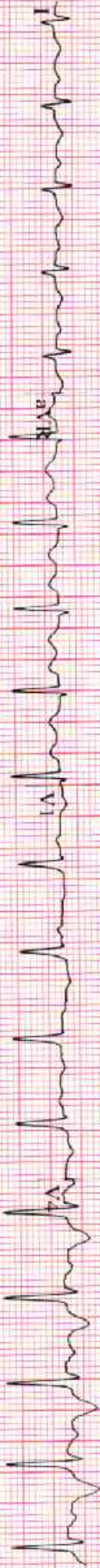
11:29:37pm

25 bpm  
110 mmHg

RECOVERY

2-50

HRV (1)  
0.0 km/h  
0.0%



Unconfirmed

Attending MD:

GE CASE V6.51 (0)  
25mm/s 10mm/mV 60Hz 0.01-20Hz S+HR(V3,V4)

GE MAC1200 ST, LUV HOSPITAL MUMBAI

HR 61 bpm

Mr. Bominde Singh  
SOU11  
WY1M

Interpretation  
S waves up to V6  
probably normal ECG

Measurement	Results
QRS	100 ms
QT/QTcB	378 / 384 ms
PR	162 ms
P	114 ms
RR/PP	968 / 945 ms
P/QRS/T	25 / 45 / 65 degrees
QTd/QTcBD	30 / 30 ms
Sokolow	1.7 mV
NK	8

< P  
< T  
< QRS

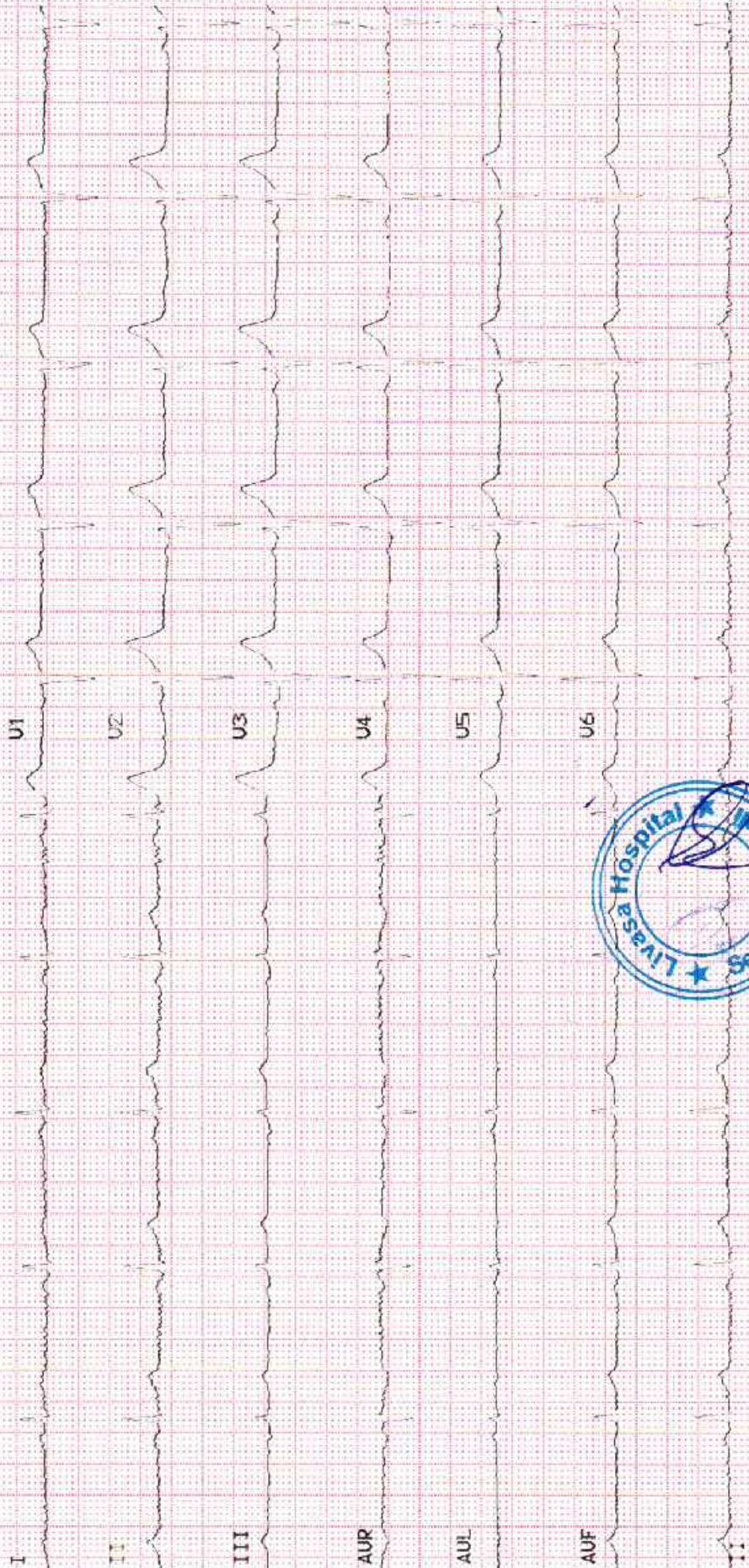
aUL

O I

III

+90 aVF

Unconfirmed report.



# LIVASA HOSPITAL

Sector 71, Mohali, Punjab, 160071

Ph: 01727170000, 9115115257

Email: pathreports@livasahospitals.in



NAME	: MR PARMINDER SINGH		
DOB/Gender	: 02-Nov-1977/M	Requisition Date	: 08/Feb/2025 08:16AM
UHID	: 504111	Sample CollDate	: 08/Feb/2025 11:01AM
Inv. No.	: 4934127	Sample Rec.Date	: 08/Feb/2025 11:01AM
Panel Name	: Livasa Mohali	Approved Date	: 08/Feb/2025 12:15PM
Bar Code No	: 13395549	Referred Doctor	: Self

Test Description	Observed Value	Unit	Reference Range
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## IMMUNOASSAY

### TOTAL THYROID PROFILE

Serum Total T3 (CLIA/Vitros 5600)	1.70	ng/mL	0.970 - 1.69
--------------------------------------	------	-------	--------------

**Summary & Interpretation:**

Triiodothyronine (T3) is the hormone principally responsible for the development of the effects of the thyroid hormones on the various target organs T3 is mainly formed extrathyroidally, particularly in the liver, by deiodination of T4. A reduction in the conversion of T4 to T3 results in a fall in the T3 concentration. It Occurs under the influence of medicaments such as propranolol, glucocorticoids or amiodarone and in severe non-thyroidal illness (NTI). The determination of T3 is utilized in the diagnosis of T3-hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

Serum Total T4 (CLIA/Vitros 5600)	6.20	µg/dL	5.52 - 12.97
--------------------------------------	------	-------	--------------

**Summary & Interpretation:**

The hormone thyroxine (T4) is the main product secreted by the thyroid gland. The major part of total thyroxine (T4) in serum is present in protein-bound form. As the concentration of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken in to account in the assessment of the thyroid hormone concentration in serum. The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the detection of primary and secondary hypothyroidism and the monitoring of TSH-suppression therapy.

Serum TSH (CLIA/Vitros 5600- TSH 3rd generation)	1.700	mIU/L	0.4001 - 4.049
---	-------	-------	----------------

**Summary & Interpretation:**

TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The determination of TSH serves as the initial test in thyroid diagnostics. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

**Note:**

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%. Hence time of the day has influence on the measured serum TSH concentrations.
2. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
3. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.
4. Clinical Use: Primary Hypothyroidism, Hyperthyroidism, Hypothalamic - Pituitary hypothyroidism, Inappropriate TSH secretion, Nonthyroidal illness, Autoimmune thyroid disease, Pregnancy associated thyroid disorders.

PREGNANCY	REFERENCE RANGE FOR TSH IN uIU/mL
1st Trimester	0.05 - 3.70
2nd Trimester	0.31 - 4.35
3rd Trimester	0.41 - 5.18



Result Entered By: Sapna Thappa 41280

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M.D PATHOLOGY

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CIN No.: U85110PB2005PTC027898

GSTIN: 03AABCI4594F1ZQ

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NAME	: MR PARMINDER SINGH		
DOB/Gender	: 02-Nov-1977/M	Requisition Date	: 08/Feb/2025 08:16AM
UHID	: 504111	SampleCollDate	: 08/Feb/2025 11:01AM
Inv. No.	: 4934127	Sample Rec.Date	: 08/Feb/2025 11:01AM
Panel Name	: Livasa Mohali	Approved Date	: 08/Feb/2025 12:15PM
Bar Code No	: 13395549	Referred Doctor	: Self

Test Description	Observed Value	Unit	Reference Range
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**PSA TOTAL**

Serum PSA Total (CLIA/Vitros 5600)	0.50	ng/mL	<4.0
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**Summary & Interpretation:**

Elevated concentrations of PSA in serum are generally indicative of a patho-logic-condition of the prostate (prostatitis, benign hyperplasia or carcinoma). PSA determinations are employed for the monitoring of progress and efficiency of therapy in patients with prostate carcinoma or receiving hormonal therapy. An inflammation or trauma of the prostate (e.g. in case of urinary retention or following rectal examination, cystoscopy, colonoscopy, transurethral biopsy, lasertreatment or ergometry) can lead to PSA elevations of varying duration and magnitude.

**BIOCHEMISTRY****GLUCOSE FASTING**

Primary Sample Type: Fluoride Plasma

Plasma Glucose Fasting (VITROS 5600 /Colorimetric - Glucose oxidase, hydrogen peroxide)	98	mg/dL	Normal 70-99 mg/dl Impaired Tolerance 100 - 125mg/dl Diabetic ≥126 mg/dl
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**Interpretation (In accordance with the American diabetes association guidelines):**

- A fasting plasma glucose level below 100 mg/dL is considered normal.
- A fasting plasma glucose level between 100-125 mg/dL is considered as glucose intolerant or pre diabetic. A fasting and post-prandial blood sugar test (after consumption of 75 gm of glucose) is recommended for all such patients.
- A fasting plasma glucose level ≥126 mg/dL is highly suggestive of a diabetic state. A repeat fasting test is strongly recommended for all such patients. A fasting plasma glucose level in excess of 126 mg/dL on both the occasions is confirmatory of a diabetic state.

**RFT (RENAL FUNCTION TESTS)**

Serum Urea (VITROS 5600 /Colorimetric - Urease, UV)	22.00	mg/dl	19.26-42.8
Serum Creatinine (VITROS 5600 /Two-point rate - Enzymatic)	1.00	mg/dL	0.66-1.25mg/dl
Serum Uric acid (VITROS 5600 /Colorimetric - Uricase)	5.60	mg/dL	3.5-8.5 mg/dl

**Interpretation:**

Renal function tests are used to detect and diagnose diseases of the Kidney.

Result Entered By: Sapna Thappa 41280



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<b>Panel Name</b>	: Livasa Mohali	<b>Approved Date</b>	: 08/Feb/2025 12:15PM
<b>Bar Code No</b>	: 13395549	<b>Referred Doctor</b>	: Self

Test Description	Observed Value	Unit	Reference Range
<b>LIVER FUNCTION TEST WITH GGT</b>			
Serum Bilirubin Total <small>(DPD/AU 480)</small>	0.70	mg/dL	0.3-1.2
Serum Bilirubin Direct <small>(DPD/AU 480)</small>	0.10	mg/dl	<0.3
Serum Bilirubin Indirect <small>(Calculated)</small>	0.60	mg/dl	0.1-1.0
Serum SGOT(AST) <small>(VITROS 5600 /UV with P5P)</small>	43	U/L	Male 17-59U/L
Serum SGPT(ALT) <small>(VITROS 5600 /Multi-point rate - UV with P5P)</small>	68	U/L	<50
Serum AST/ALT Ratio <small>(Calculated)</small>	0.63		
Serum GGT <small>(VITROS 5600 /Multi-point rate - G-gutamyl-p-nitroamide)</small>	59	U/L	15 - 73
Serum Alkaline Phosphatase <small>(VITROS 5600 /Multi-point rate - PMPP, AMP Buffer (37°C))</small>	52	U/L	38-126U/L
Serum Protein Total <small>(VITROS 5600 /Colorimetric - Biuret, no serum blank, end point)</small>	8.0	g/dl	6.3-8.2g/dl
Serum Albumin <small>(VITROS 5600 /Colorimetric - Bromocresol Green)</small>	5.0	g/dl	3.5-5.0g/dl
Serum Globulin <small>(Calculated)</small>	3.00	mg/dL	2.0-3.5
Serum Albumin/Globulin Ratio <small>(Calculated)</small>	1.67	%	1.0 - 1.8

**Interpretation:**  
Liver blood tests, or liver function tests, are used to detect and diagnose disease or inflammation of the liver. Elevated aminotransferase (ALT, AST) levels are measured as well as alkaline phosphatase, albumin, and bilirubin. Some diseases that cause abnormal levels of ALT and AST include hepatitis A, B, and C, cirrhosis, iron overload, and Tylenol liver damage. Medications also cause elevated liver enzymes. There are less common conditions and diseases that also cause elevated liver enzyme levels.

<b>LIPID PROFILE</b>			
Serum Cholesterol <small>(VITROS 5600 /Colorimetric - Cholesterol oxidase, esterase, peroxidase)</small>	233	mg/dL	Desirable <200mg/dl Boredrline High 200-239mg/dl High ≥240mg/dl
Serum Triglycerides <small>(VITROS 5600 /Colorimetric - Enzymatic, end point)</small>	158	mg/dL	Normal < 150mg/dl Boredrline High 150-199mg/dl High 200-499mg/dl Very High ≥500 mg/dl
Serum HDL Cholesterol <small>(VITROS 5600 /Colorimetric - Direct measure, PTA/MgCl2)</small>	46	mg/dL	Low to Average <40 mg/dl High ≥ 60.0mg/dl



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*Shweta*  
**Dr Shweta Kundu**  
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MC-6172



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Panel Name	: Livasa Mohali	Approved Date	: 08/Feb/2025 12:15PM
Bar Code No	: 13395549	Referred Doctor	: Self

Test Description	Observed Value	Unit	Reference Range
Serum VLDL cholesterol (Calculated)	32	mg/dL	7-35
Serum LDL cholesterol (Calculated)	155	mg/dL	50-100
Serum Cholesterol-HDL Ratio (Calculated)	5.07		3-5
Serum LDL-HDL Ratio (Calculated)	3.38		1.5 - 3.5

**Interpretation:**

As per ATP 111 Guidelines - National Cholesterol Education Program

Total Cholesterol (mg/dL)	Desirable <200 Borderline High 200 – 239 High >240
Triglyceride	Normal < 150 Borderline High 150 – 199 High 200 – 499 Very High ≥ 500
HDL – Cholesterol	Low < 40 High ≥ 60
LDL- Cholesterol – Primary Target of Therapy	Optimal < 100 Near optimal/ Above optimal 100 – 129 Borderline high 130 – 159 High 160 – 189 Very high ≥ 190

Risk Category LDL	Goal (mg/dL)	Non-HDL Goal (mg/dL)
CHD and CHD Risk Equivalent (10-year risk for CHD>20%)	<100	<130
Multiple (2+) Risk Factors and 10-year risk <20%	<130	<160
0-1 Risk Factor	<160	<190

Result Entered By:Sapna Thappa 41280



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Test Description	Observed Value	Unit	Reference Range
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## CLINICAL PATHOLOGY

### COMPLETE URINE EXAMINATION

#### Physical Examination

Urine Volume	35.00	mL	
Urine Colour	Yellow		Light Yellow
Urine Appearance	Clear		Clear

#### Chemical Examination (Reflectance Photometry)

Urine pH	6.00		4.8-7.6
Urine Specific Gravity	1.015		1.010-1.030
Urine Glucose	Negative		Negative
Urine Protein (Protein Ionization)	+		Negative
Urine Ketones	Negative		Negative
Urine Bilirubin	Negative		Negative
Urine for Urobilinogen	Normal		Normal
Urine Nitrite	Negative		Negative

#### Microscopic Examination

Urine Pus Cells	1-2		Negative
Urine RBC	Absent	/hpf	Negative
Urine Epithelial Cells	Absent	/hpf	0-5
Urine Casts	Absent	/hpf	Absent
Urine Crystals	Absent	/hpf	Absent
Urine Bacteria	Absent	/hpf	Absent
Urine Yeast Cells	Absent	/hpf	Absent
Amorphous Deposit	Absent		Absent

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Inv. No.	: 4934127	Sample Rec.Date	: 08/Feb/2025 08:34AM
Panel Name	: Livasa Mohali	Approved Date	: 08/Feb/2025 11:12AM
Bar Code No	: 13395549	Referred Doctor	: Self

Test Description	Observed Value	Unit	Reference Range
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## HAEMATOLOGY

### BLOOD GROUP RH TYPE

#### ABO & RH Typing

#### Forward Grouping

Anti A	POSITIVE
Anti B	POSITIVE
Anti D	NEGATIVE
Final Blood Group	AB NEGATIVE

#### NOTE :

- \* Apart from major A,B,H antigens which are used for ABO grouping and Rh typing, many minor blood group antigens exist. Agglutination may also vary according to titre of antigen and antibody.
- \* So before transfusion, reconfirmation of blood group as well as cross-matching is needed.
- \* Presence of maternal antibodies in newborns, may interfere with blood grouping.
- \* Auto agglutination (due to cold antibody, falciparum malaria, sepsis, internal malignancy etc.) may also cause erroneous result.



The highlighted values should be correlated clinically

Result Entered By: Sapna Thappa 41280

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Panel Name	: Livasa Mohali	Approved Date	: 08/Feb/2025 09:51AM
Bar Code No	: 13395549	Referred Doctor	: Self

Test Description	Observed Value	Unit	Reference Range
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**HAEMATOLOGY****ESR**

Primary Sample Type: EDTA Blood

ESR (Automated ESR analyser)	7	mm/h	0-10
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**COMPLETE BLOOD COUNT (Sample Type- Whole Blood EDTA)**

Haemoglobin (Noneyanmethaemoglobin)	16.3	g/dl	13.0 - 17.0
Hematocrit(PCV) (Calculated)	52.1	%	36-48
Red Blood Cell (RBC) (Impedence/DC Detection)	5.70	10 <sup>6</sup> / µl	4.5-5.5
Mean Corp Volume (MCV) (Impedence/DC Detection)	92.0	fL	83-97
Mean Corp HB (MCH) (Calculated)	28.8	pg/mL	27-31
Mean Corp HB Conc (MCHC) (Calculated)	31.3	gm/dl	32-36
Red Cell Distribution Width -CV (Calculated)	13.6	%	11-15
Platelet Count (Impedence/DC Detection/Microscopy)	187	10 <sup>3</sup> /µl	150-450
Mean Platelet Volume (MPV) (Impedence/DC Detection)	12.0	fL	7.5-10.3
Total Leucoocyte Count (TLC) (Impedence/DC Detection)	6.0	10 <sup>3</sup> /µl	4.0 - 10.0

**Differential Leucoocyte Count (YCS/ Microscopy)**

Neutrophils	48	%	40-75
Lymphocytes	44	%	20-40
Monocytes	5	%	0-8
Eosinophils	3	%	0-4
Basophils	0	%	0-1
Absolute Neutrophil Count	2,880	µl	2000-7000
Absolute Lymphocyte Count	2,640	uL	1000-3000
Absolute Monocyte Count	300	uL	200-1000
Absolute Eosinophil Count	180	µl	20-500

The highlighted values should be correlated clinically

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Panel Name	: Livasa Mohali	Approved Date	: 08/Feb/2025 09:51AM
Bar Code No	: 13395549	Referred Doctor	: Self

Test Description	Observed Value	Unit	Reference Range
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\*\*\* End Of Report \*\*\*



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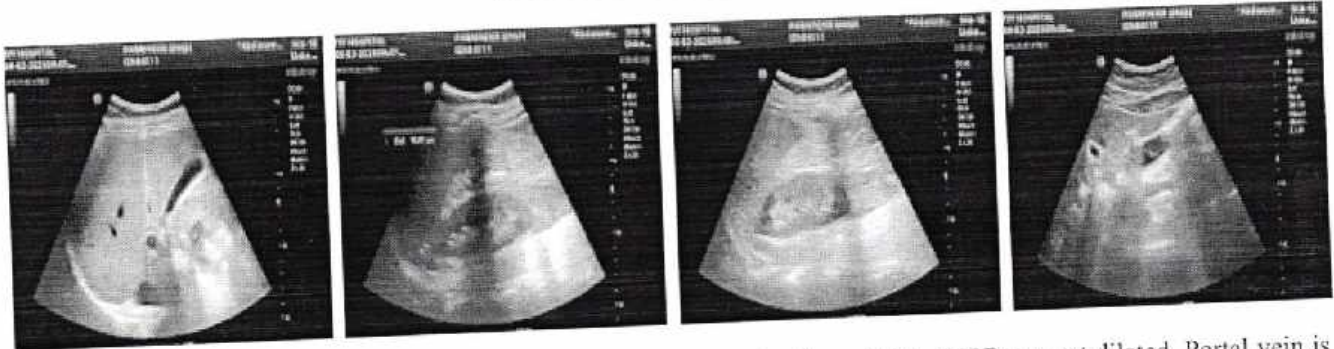
CIN No.: U85110PB2005PTC027898

GSTIN: 03AABCI4594F1ZQ



NAME	., PARMINDER SINGH	SEX/AGE	M47Y
PATIENT ID	ID504111	Accession Number	
REF CONSULTANT	PACKAGE	DATE	08/02/2025 09:46

**USG WHOLE ABDOMEN**



**LIVER:** is normal in size (~ 14.9cm), outline and shows increased echogenicity. IHBR are not dilated. Portal vein is normal. Visualized CBD is not dilated.  
**GALL BLADDER:** is partially distended at the time of examination.  
**SPLEEN:** is normal in size (~ 12.0cm), outline and echotexture.  
**PANCREAS & UPPER RETROPERITONEUM:** Visualised pancreatic head and proximal body are normal in size and echotexture. Tail of pancreas is obscured by bowel gas.  
**RIGHT KIDNEY:** It is normal in size (~ 10.0cm), outline and echotexture. Corticomedullary differentiation is well-defined. No hydronephrosis is seen.  
**LEFT KIDNEY:** It is normal in size (~ 9.0cm), outline and echotexture. Corticomedullary differentiation is well-defined. No hydronephrosis is seen.  
**U-BLADDER:** is minimally distended at the time of examination.  
**PROSTATE:** is normal in size (~ 18cc).  
 No free fluid is seen in peritoneal cavity.

**IMPRESSION:** Fatty liver Grade I.

Adv. Clinical correlation and follow up.

Dr. Manish Singla  
DNB Resident



(NOT FOR MEDICO-LEGAL PURPOSE)

DR. EKTA MISHRA  
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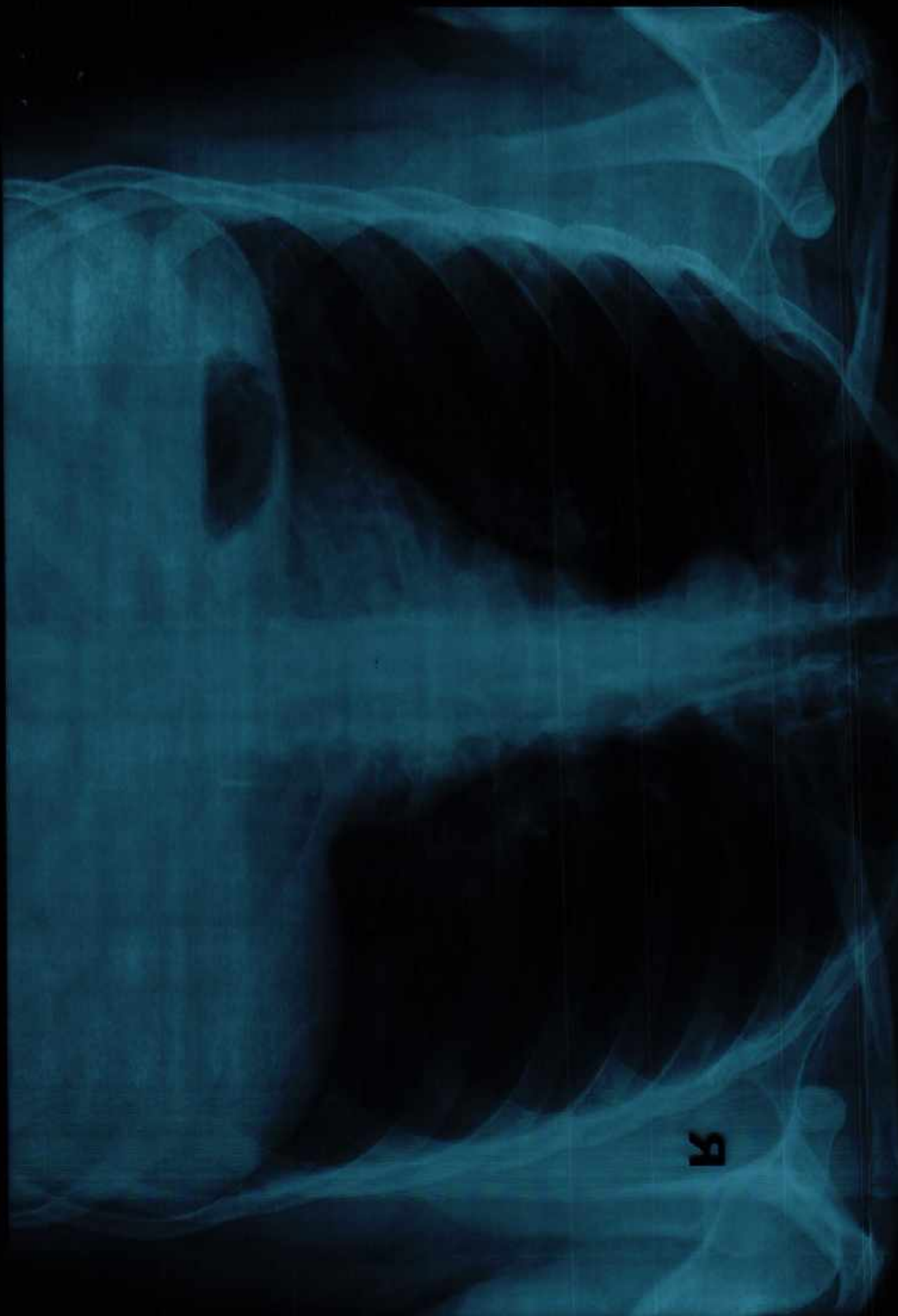
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УАНОВ ИТ-РОТОСЭ ЛАТІСОН ВИ  
D220 IX 5280 O6D



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NAME	PARMINDER SINGH	SEX/AGE	M46Y
PATIENT ID	ID504111	Accession Number	XN.2580 OPD
REF CONSULTANT	Dr.	DATE	08/02/2025 09:45

### X-RAY CHEST (PA VIEW)

Rotated film.

Bony structures and soft tissue appear normal.

Bronchovascular markings and reticulations are prominent in both lung fields.

Domes of diaphragm and costophrenic angles appear normal.

Cardiac shadow is within normal limit.

*Please correlate clinically.*



DR EKTA MISHRA  
MD RADIO- DIAGNOSIS

The above impression is just an opinion of the imaging findings and not a final diagnosis. Needs correlation with clinical status, lab investigations and other relevant investigations

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