



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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	ASHUTOSH KUMAR SINGH
DATE OF BIRTH	31-01-1990
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	23-02-2025
BOOKING REFERENCE NO.	24M119002100150428S
SPOUSE DETAILS	
EMPLOYEE NAME	MRS. KUMARI NISHU
EMPLOYEE EC NO.	119002
EMPLOYEE DESIGNATION	BRANCH OPERATIONS
EMPLOYEE PLACE OF WORK	DHANBAD, HIRAPUR
EMPLOYEE BIRTHDATE	24-11-1989

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 **19-02-2025** 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's spouse 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.))

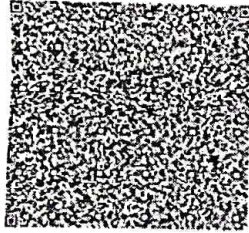


भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 0012/12806/04105

To
आशुतोष कुमार सिंह
Ashutosh Kumar Singh
S/O: Uday Kumar Singh,
North Of P.T.C Colony,
West Patel Nagar, Post Shastri Nagar,
VTC: Phulwari,
PO: L.b.s Nagar,
Sub District: Phulwari,
District: Patna,
State: Bihar,
PIN Code: 800023,
Mobile: 7061154742



Signature Not Verified
Details as on 01/12/2014
01/12/2014 12:28:29
CA: 01/12/2014

आपका आधार क्रमांक / Your Aadhaar No. :

4510 0330 6965

VID : 9118 4465 2028 9972

मेरा आधार, मेरी पहचान



सूचना / INFORMATION

- आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। जन्मतिथि आधार नंबर धारक द्वारा प्रस्तुत सूचना और विभिन्नता में विनिर्दिष्ट जन्मतिथि के प्रमाण के दस्तावेज पर आधारित है।
- इस आधार पत्र को यूआईडीएआई द्वारा नियुक्त प्रमाणीकरण एजेंसी के जरिए ऑनलाइन प्रमाणीकरण के द्वारा सत्यापित किया जाना चाहिए या ऐप स्टोर में उपलब्ध एमआधार या आधार क्यूआर कोड स्कैनर ऐप में क्यूआर कोड को स्कैन करके या www.uidai.gov.in पर उपलब्ध सुरक्षित क्यूआर कोड रीडर का उपयोग करके सत्यापित किया जाना चाहिए।
- आधार विशिष्ट और सुरक्षित है।
- पहचान और पते के समर्थन में दस्तावेजों को आधार के लिए नामांकन की तारीख से प्रत्येक 10 वर्ष में कम से कम एक बार आधार में अपडेट करना चाहिए।
- आधार विभिन्न सरकारी और गैर-सरकारी फायदों/सेवाओं का लाभ लेने में सहायता करता है।
- आधार में अपना मोबाइल नंबर और ईमेल आईडी अपडेट रखें।
- आधार सेवाओं का लाभ लेने के लिए एमआधार ऐप डाउनलोड करें।
- आधार/बायोमेट्रिक्स का उपयोग न करने के समय सुरक्षा सुनिश्चित करने के लिए आधार/बायोमेट्रिक्स लॉक/अनलॉक सुविधा का उपयोग करें।
- आधार की मांग करने वाले सहमति देने के लिए बाध्य हैं।
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in.
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.

Aadhaar no. is valid: 06/08/2014



आशुतोष कुमार सिंह
Ashutosh Kumar Singh
जन्म तिथि/DOB: 31/01/1990
पुरुष/ MALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/ऑफलाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए।
Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

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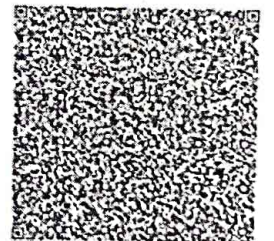
मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता:
संबोधित: उदय कुमार सिंह, नॉर्थ ऑफ पी.टी.सी कॉलोनी,
वेस्ट पटेल नगर, पोस्ट शास्त्री नगर, फुलवारी, एल.बी.एस
नगर, पटना,
बिहार - 800023
Address:
S/O: Uday Kumar Singh, North Of P.T.C
Colony, West Patel Nagar, Post Shastri
Nagar, Phulwari, PO: L.b.s Nagar, DIST:
Patna,
Bihar - 800023



4510 0330 6965

VID : 9118 4465 2028 9972

1947

help@uidai.gov.in

www.uidai.gov.in





असर्फी हॉस्पिटल

OUT PATIENT DEPARTMENT

सबके लिए स्वास्थ्य

MEDINHEEL

Department of General Medicine

Regd. No. : MAR25-113599 Visit : OPD/80325/312627
 Patient Name : MR. ASHUTOSH KUMAR SINGH Mobile : 8210423738
 Age/Sex : 35 Y 1 M 0 D / Male Date : 8-Mar-2025 3:24 pm
 Address : SARAIHELIA, Dhanbad City, Dhanbad - JHARKHAND,
 Doctor : Dr. Sumeet Kr. MD, Medicine OPD Timing :

Referred By :

Allergies :
 Height : Ft In Temp. : 97.8 °C SPO2 : 98 %
 Weight : 80 Kg Pulse : 90 BPM B.P. : 110/80 mm/Hg

History and complaints :

Examination:

→ Damaged LF

Diagnosis:

Investigations:

Medicines Prescribed:

- Drip rate of 60k once weekly x 2week
- T. Usdohep 200mg 1Bm x 2mcn
- Cap Ew701 100 a/d x 2mc

Follow up:

Days

Advice (Diet/ Lifestyle / Rehab)

Date :

Time :

*Prescription to be valid for 7 Days and one follow-up consultation only.

*This document is not valid for Medico-Legal purposes.

Signature of Doctor





Rate 77 . Sinus rhythm.....Normal P axis, V-rate 50- 99
 . ST elev, probable normal early repol pattern.....ST elevation, age<55
 . Baseline wander in lead(s) V2

PR 146
 QRSD 85
 QT 353
 QTc 400

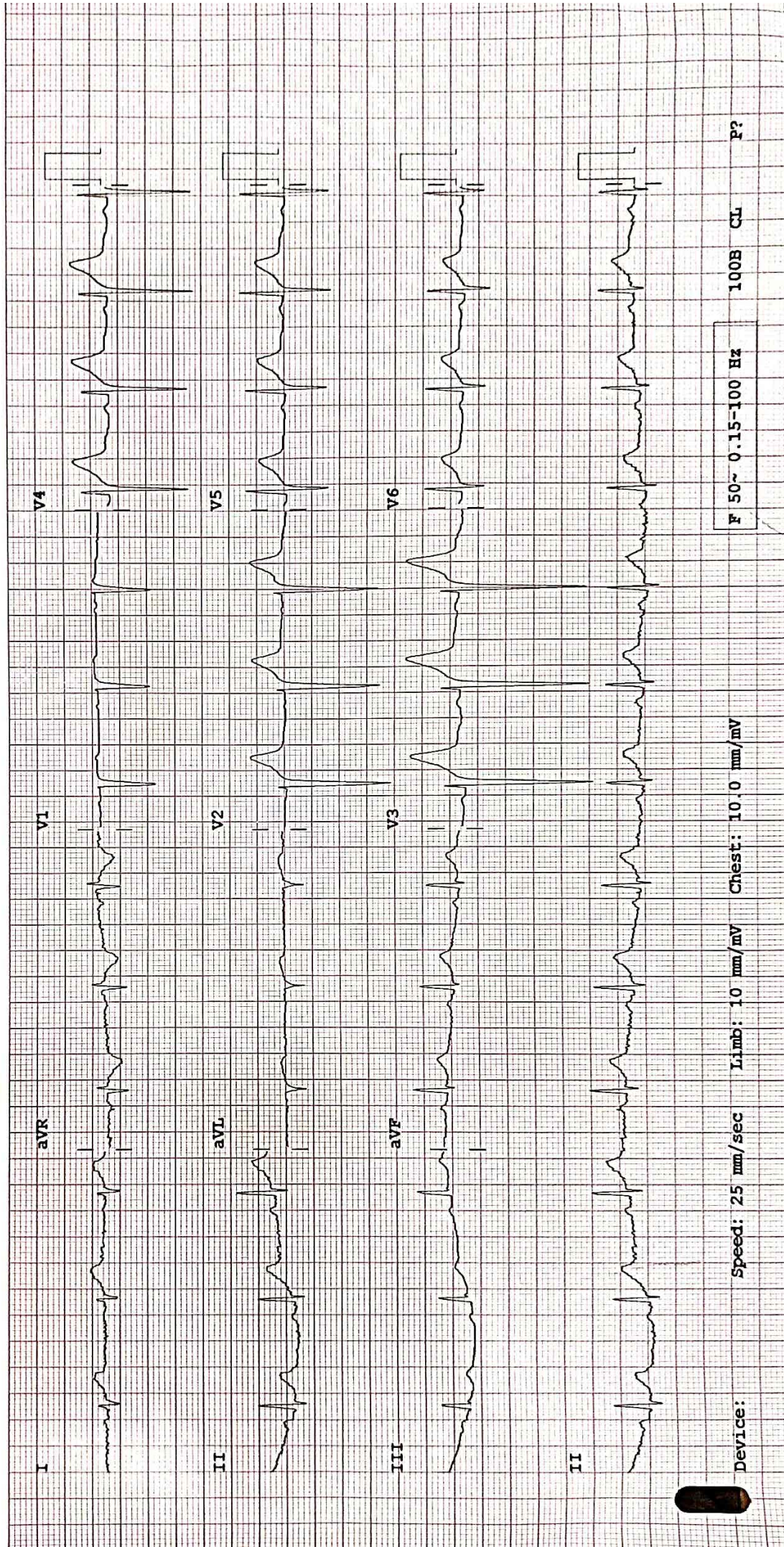
--AXIS--

P 59
 QRS 88
 T 46

12 Lead; Standard Placement

- NORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.15-100 Hz

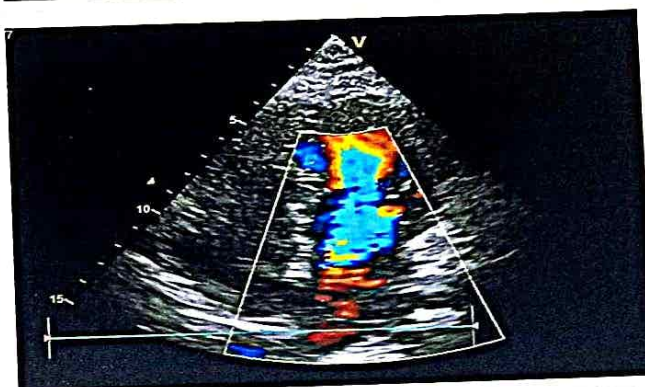
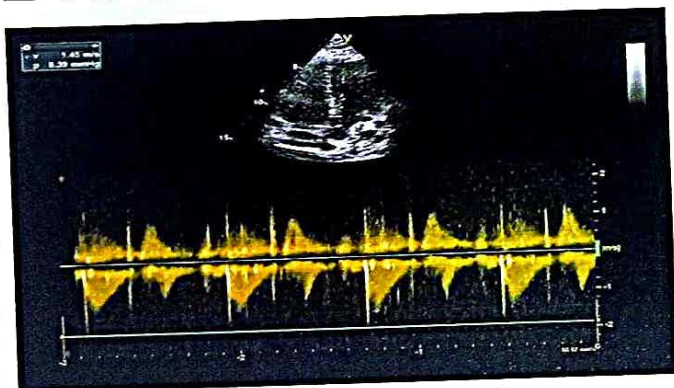
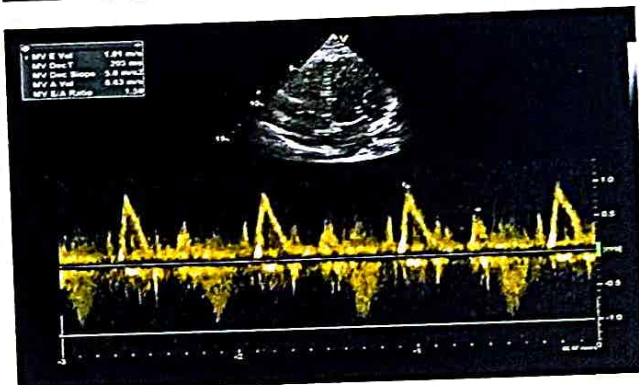
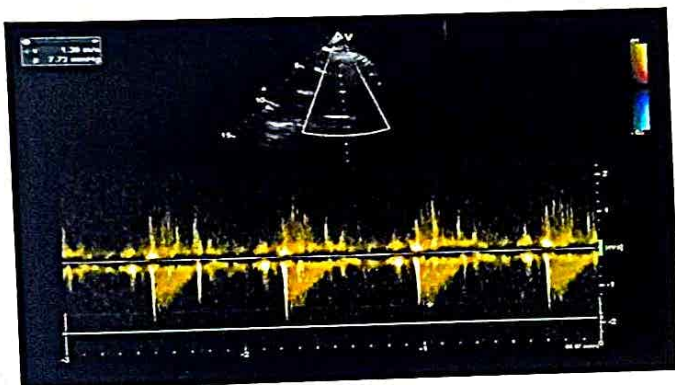
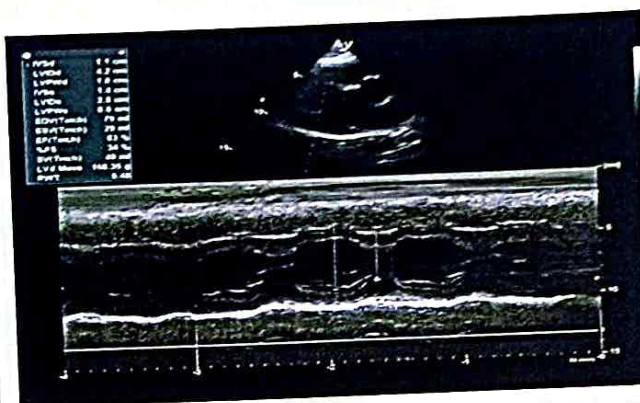
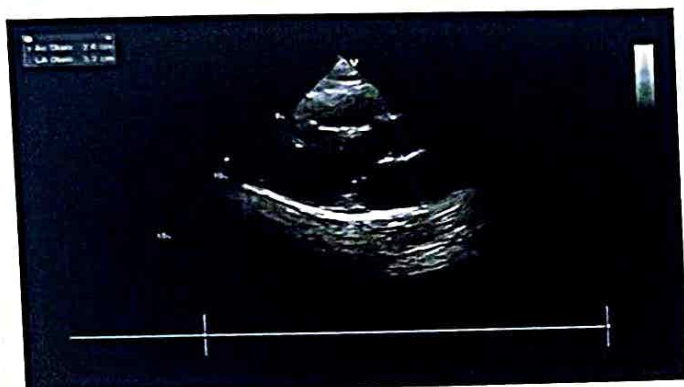
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P?

ASARFI INSTITUTE OF CARDIAC SCIENCES

Name : MR ASHUTOSH KUMAR SINGH
Patient Id : 113599

Date : 08/03/2025



REPORT

ECHOCARDIOGRAPHY REPORT

Name: MR ASHUTOSH KUMAR SINGH

Age: 35

Sex: Male

Date: 08/03/2025

2D & M-MODE MEASUREMENTS

LA Diam	3.3 cm
Ao Diam	2.6 cm
IVSd	1.1 cm
LVIDd	4.2 cm
LVPWd	1.0 cm
IVSs	1.4 cm
LVIDs	2.8 cm

2D & M-MODE CALCULATIONS

EDV(Teich)	79 ml
ESV(Teich)	29 ml
EF(Teich)	63 %
%FS	34 %
SV(Teich)	49 ml
LVd Mass	168.35 g
RWT	0.48

MITRAL VALVE

MV E Vel	1.01 m/s
MV DecT	203 ms
MV Dec Slope	5.0 m/s ²
MV A Vel	0.63 m/s
MV E/A Ratio	1.59

AORTIC VALVE

AV Vmax	1.45 m/s
AV maxPG	8.39 mmHg

TRICUSPID VALVE

PV Vmax	1.39 m/s
PV maxPG	7.73 mmHg

PULMONARY VALVE

COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-63%)
- NORMAL MITRAL INFLOW PATTERN
- NO MR, NO AR, NO TR
- IAS, IVS INTACT
- NO CLOT PE
- IVC NORMAL

IMPRESSION:

- NORMAL ECHO STUDY

DR.S.H CHAVAN
(CONSULTANT CARDIOLOGIST)

TECH. SIG



RADIOLOGY REPORT

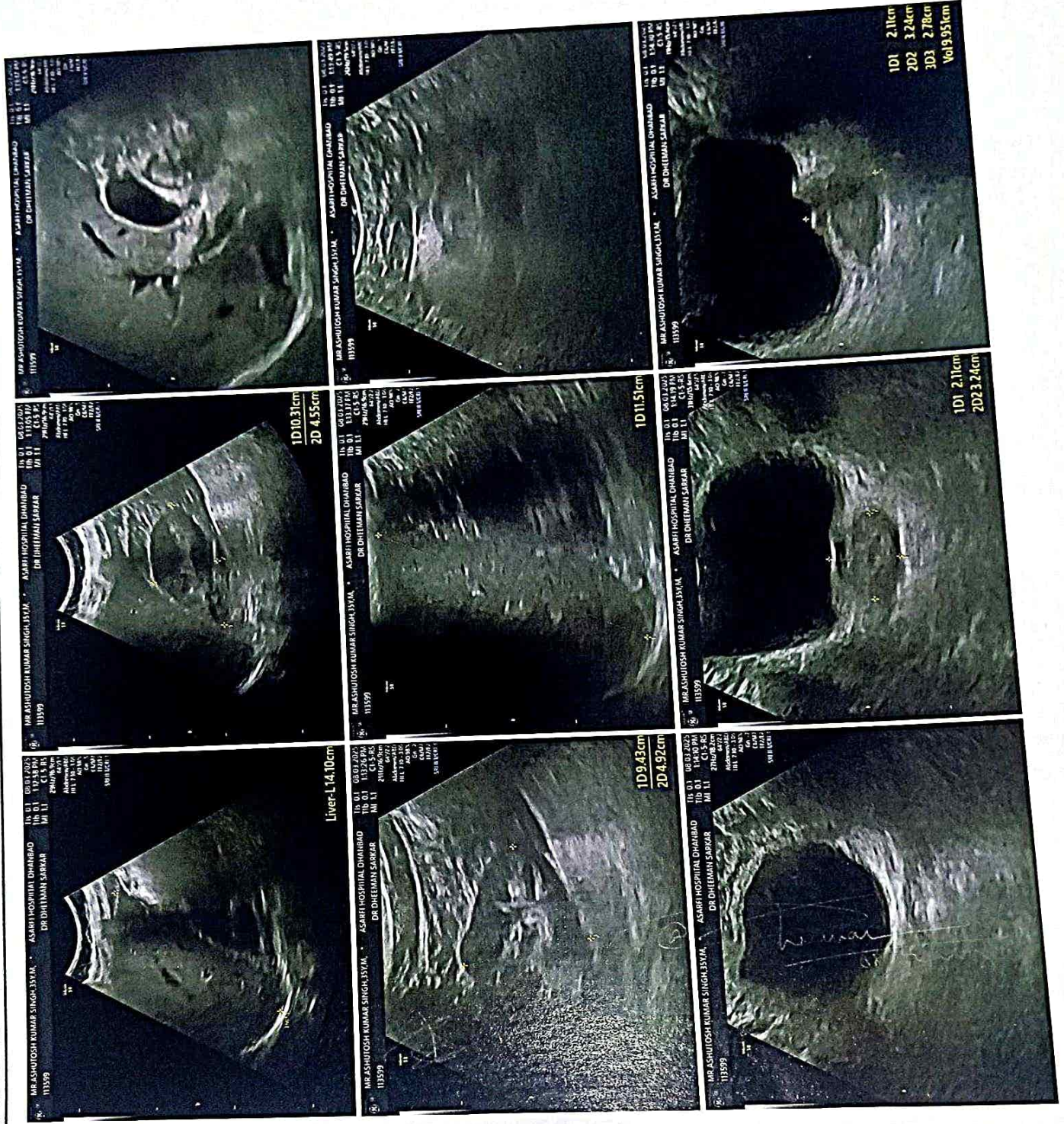
Reg. No.	113599 (OPD)	Ref. Dr.	SELF
Name	MR. ASHUTOSH KUMAR SINGH	Study	USG WHOLE ABDOMEN
Age & Sex	35Y /M	Rep Date	08.03.2025

USG WHOLE ABDOMEN

- LIVER** : Liver is normal in size measuring 14.1 cm, shape & echotexture. No obvious focal lesion is seen. IHBR are not dilated.
- GALL BLADDER** : GB is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- CBD** : CBD is normal in course & caliber.
- PV** : PV is normal in course & caliber.
- PANCREAS** : Pancreas is normal in size, shape & echotexture. Peripancreatic soft tissues appear normal. MPD is not dilated
- SPLEEN** : Spleen is normal in shape, size & echotexture. It measures 11.5 cm in size.
- KIDNEYS** : The right kidney measures 10.3 x 4.5 cm. The left kidney measures 9.4 x 4.9 cm. Both kidneys are normal in shape, size & position. The pelvicalyceal system is normal. Corticomedullary differentiation is maintained. No focal lesion is seen.
- URINARY BLADDER** : Urinary bladder is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- PROSTATE** : Prostate is normal in size, shape & echotexture. It measures 2.1 x 3.2 x 2.7 cm (Vol-10 cc)
- OTHERS** : No ascites or retroperitoneal lymphadenopathy is seen.
- IMPRESSION** : • No significant abnormality detected on current scan.



Dr. Dheeman Sarkar
M.B.B.S, M.D (RADIODIAGNOSIS)
Radiology Consultant





असुतोष हॉस्पिटल
सबके लिए स्वास्थ्य

Baramuri, P.O. - Bishunpur Polytechnic, Dhanbad (Jharkhand) - 828130
Regd. Office : Phularitand, Kharkaree, Dhanbad (Jharkhand) - 828125
Mob.: 78083 68888
CIN : U85110JH2005PLC011673

RADIOLOGY REPORT

Patient Name :	MR ASHUTOSH KUMAR SINGH	Patient ID :	113599
Modality :	DX	Sex :	M
Age :	35Y	Study :	CXR PA
Reff. Dr. :	DR.SELF	Study Date :	08-03-2025

RADIOGRAPH OF THE CHEST PA VIEW

FINDINGS:

- Both the lung fields are clear.
Both the costophrenic angles are clear.
Hilar shadows appear normal.
Cardiothoracic ratio is within normal limits.
Hemidiaphragms are normal in position and contour.
Trachea is in the midline.
Bony thorax under view is unremarkable.

IMPRESSION:

Radiograph chest does not reveal any significant abnormality.

Barkha Keswani
Dr. Barkha Keswani
DNB, (Radio diagnosis)
Reg. No: 2004/02/0648



Disclaimer: - It is an online interpretation of medical imaging based on clinical data. All modern machines/ procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patient's identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose.

24 HOUR EMERGENCY

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ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)
Baramuri, Bishunpur Polytechnic, Dhanbad 826 130
Ph. No.: 7808360888, 9234601514, 9234601514

FINAL REPORT

Name : MR. ASHUTOSH KUMAR SINGH
Reg. No. : MAR25-113599
Age / Sex : 35 Y 1 M 0 D / Male
Doctor : Self-Walkin
Pat. Type : TPA (Cashless Category)



Collection Time : 08-03-2025 13:23:15
Receiving Time : 08-03-2025 13:24:36
Reporting Time : 08-03-2025 14:24:39
Publish Time : 08-03-2025 3:18 pm

Test Name	Result	Flag	Unit	Reference Range
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Blochemlstry

Creatinine, Serum

Method Enzymatic

Creatinine, Serum

0.7

Machine Name XL640

mg/dl 0.6-1.4

Uric Acid, Serum

Method Enzymatic

Uric Acid, Serum

6.6

Machine Name XL640

mg/dl 3.4-7.0

Blood Urea Nitrogen (BUN)

Method Calculated

Blood Urea Nitrogen (BUN)

10.9

Machine Name XL640

mg/dl 07-21

LIPID PROFILE, SERUM

Method Spectrophotometry

Triglycerides (Enzymatic)

212.0

H

Machine Name XL640

mg/dl
Normal: <150
Borderline-high:
150-199 High risk
200-499
Very high risk >500
<200 No risk 200-239
Moderate
risk >240 High risk
0-30
<40 High Risk ; >60
No Risk

Cholesterol, Total (CHOD/PAP)

183.0

mg/dl

VLDL Cholesterol (Calculated)

42.4

H

mg/dl

HDL Cholesterol (Enzymatic)

46.0

L

mg/dl



DR N N SINGH
MD (PATHOLOGY)

*This Document is not valid for Medico-Legal purposes.

Page 1 of 9

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) / Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/lipemic etc.) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297662262, Email-labasarfi@gmail.com

24 HOUR EMERGENCY

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ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Dhanbad 828 130
Ph. No.: 7808368888, 9297862282, 9234681514



FINAL REPORT

Name : MR. ASHUTOSH KUMAR SINGH
Reg. No. : MAR25-113599
Age / Sex : 35 Y 1 M O D / Male
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Test Name	Result	Flag	Unit	Reference Range
LDL Cholesterol (Calculated)	94.6		mg/dl	Optimum:<100 Above optimum: <130; Moderate risk:130-159; High risk:>160
Cholesterol Total : HDL Ratio (Calculated)	3.98		mg/dl	1.2-6.0
GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD				
Method HPLC / Nephelometry				Machine Name BIO-RAD, D-10 / MISPA
HbA1C	5.2		%	4.4-6.2
Estimated average glucose (eAG)	102.54		mg/dl	

Interpretation:

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic.
Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

FACTORS THAT INTERFERE WITH HbA1C | FACTORS THAT AFFECT INTERPRETATION | MEASUREMENT | OF HbA1C RESULTS |

- | Hemoglobin variants, elevated fetal | Any condition that shortens erythrocyte |
- | hemoglobin (HbF) and chemically | survival or decreases mean erythrocyte |
- | modified derivatives of hemoglobin | age (e.g., recovery from acute blood loss, |
- | (e.g. carbamylated Hb in patients | hemolytic anemia, HbSS, HbCC, and HbSC) |
- | with renal failure) can affect the | will falsely lower HbA1c test results |
- | accuracy of HbA1c measurements | regardless of the assay method used. Iron |
- | deficiency anemia is associated with |
- | higher HbA1c |



DR N N SINGH
MD (PATHOLOGY)

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24 HOUR EMERGENCY

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FINAL REPORT

Name : MR. ASHUTOSH KUMAR SINGH
Reg. No. : MAR25-113599
Age / Sex : 35 Y 1 M 0 D / Male
Doctor : Self-Walkin
Pat. Type : TPA (Cashless Category)



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Test Name	Result	Flag	Unit	Reference Range
Liver Function Test (LFT)				
<i>Method</i> Spectrophotometry			<i>Machine Name</i> XL-640	
Bilirubin Total (Diazo)	0.8		mg/dl	0.3-1.2
Bilirubin Direct (Diazo)	0.2		mg/dl	0.00-0.2
Bilirubin Indirect (Calculated)	0.6		mg/dl	0.00-1.0
SGPT (IFCC without PDP)	<u>117.0</u>	H	U/L	7-50
SGOT (IFCC without PDP)	<u>56.0</u>	H	U/L	5-45
Alkaline Phosphate (PNP AMP Kinetic)	214.5		U/L	70-306
GGT (Enzymatic)	38.0		U/L	0-55
Protein Total (Biuret)	8.0		g/dl	6.4-8.3
Albumin (BCG)	4.8		g/dl	3.5-5.2
Globulin (Calculated)	3.2		g/dl	2.3-3.5
A : G Ratio (Calculated)	1.5			0.8-2.0
Blood Glucose Fasting & Postprandial				
<i>Method</i> GOD-POD			<i>Machine Name</i> XL640	
Fasting Blood Glucose, Plasma	84.0		mg/dl	70-110



[Signature]
DR N N SINGH
MD (PATHOLOGY)

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Condition of Laboratory Testing & Reporting

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FINAL REPORT



Collection Time : 08-03-2025 13:25:08
Receiving Time : 08-03-2025 13:25:16
Reporting Time : 10-03-2025 10:56:55
Publish Time : 11-03-2025 10:56 am

Name : MR. ASHUTOSH KUMAR SINGH
Reg. No. : MAR25-113599
Age / Sex : 35 Y 1 M 0 D / Male
Doctor : Self-Walkin
Pat. Type : TPA (Cashless Category)

Test Name	Result	Flag	Unit	Reference Range
Blood Glucose Fasting & Postprandial				
<i>Method</i> GOD-POD				
Fasting Blood Glucose, Plasma	84.0		mg/dl	70-110
Glucose, PP	122.2		mg/dl	70-140

Machine Name XL640



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Ph. No.: 7808368888, 9297862282, 9234681514



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Reporting Time : 08-03-2025 14:24:39
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Test Name	Result	Flag	Unit	Reference Range
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Clinical Pathology



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Test Name	Result	Flag	Unit	Reference Range
Routine Urine Examination; Urine				
<i>Method</i> Microscopic				<i>Machine Name</i> Microscope
Leukocytes	NEGATIVE			
Appearance	SLIGHTLY HAZY			
Colour	PALE YELLOW			
Volume	30		ml.	
Protiens	NEGATIVE			
Glucose	NEGATIVE			
PH	6.5			
Specific Gravity	1.015			
Bilirubin	NEGATIVE			
Ketone Bodies	NEGATIVE			
Bile Salts	XX			
Bile Pigments	XX			
Nitrite	NEGATIVE			
Pus Cells	0-1		/hpf.	
Epithelial Cells	1-2		/hpf.	




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Test Name	Result	Flag	Unit	Reference Range
R.B.C.	NIL		/hpf.	
Casts	NOT SEEN		/hpf.	
Crystals	NOT SEEN		/hpf.	
Urinary Protein/Creatinine Ratio				
<i>Method</i> Immunoturbidimetry, Spectrophotom				
Protein	4.8		mg/L	
Creatinine	117.2		mg/dl	
PCR	0.04		mg/g	0-0.5



[Signature]
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Test Name	Result	Flag	Unit	Reference Range
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Haematology

BLOOD GROUP, ABO & RH TYPING

Method Agglutination

ABO GROUP	AB	.		0-0
RH TYPING	POSITIVE	.		0-0

ESR (Erythrocyte Sedimentation Rate)

Method Westergren

ESR	05		mm/hr	0-10
-----	----	--	-------	------

Machine Name VES-MATIC 20



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Test Name	Result	Flag	Unit	Reference Range
Nature of Material EDTA Blood Sample				
Complete Blood Count (CBC)				
Method Electronical Impedence			Machine Name Sysmex 6 part	
Hemoglobin (Photometry)	13.7		g/dl	13-18
PCV (Calculated)	42.8		%	40-50
MCH (Calculated)	25.1	L	Pg	27-31
MCHC (Calculated)	32.0		g/dl	31.5-35.5
Red Cell Distribution Width (RDW) (Electrical Impedence)	13.7		%	11.6-14
Total Leukocyte Count (TLC) (Electrical Impedence)	4,400		/cu-mm	4000-11000
RBC Count (Electrical Impedence)	5.45		million/mm3	4.5-5.5
Mean Corpuscular Volume (MCV) (Electrical Impedence)	78.5	L	fL	83-101
Platelet Count (Electrical impedance)	1.62		lakhs/cumm	1.5-4.5
Neutrophils (VCS Technology)	63		%	55-75
Lymphocytes (VCS Technology)	30		%	15-30
Eosinophils (VCS Technology)	03		%	1-6
Monocytes (VCS Technology)	04		%	2-10
Basophils (VCS Technology)	00		%	0-1



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Test Name	Result	Flag	Unit	Reference Range
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Immunology and Serology

THYROID PROFILE, TOTAL, SERUM

Method	Result	Machine Name	Reference Range
ECLIA		Vitros ECI	
T3, Total	1.73	ng/ml	0.8-2.0
T4, Total	10.1	µg/dL	5.10-14.10
TSH (Ultrasensitive)	2.64	mIU/mL	0.27-4.2

Interpretation:

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. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
3. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.



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Test Name	Result	Flag	Unit	Reference Range
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Microbiology

Culture & Sensitivity (Urine)

Method vitek 2 compact

Machine Name vitek 2 compact

Organism Isolated

NO GROWTH OF ANY ORGANISM

Note:
In view of developing antibiotics resistance in inida. It is advisalbe to use anitbiotics belonging to Group B & C only if the patient is resistant to antibiotics.

* Insturment used Bact/Alert 3D 60 & vitek 2 compact.




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