

Health Check up Booking Confirmed Request(22E37866),Package Code-PKG10000366, Beneficiary Code-290182

1 message

Mediwheel <wellness@mediwheel.in>
To: bcfagra@gmail.com
Cc: customercare@mediwheel.in

Thu, Nov 7, 2024 at 10:08 AM



011-41195959

Hi Blossoms Hospital,

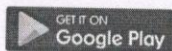
The following booking has been confirmed. It is requested to honor the said booking & provide priority services to our client

- Hospital Package Name** : Mediwheel Full Body Annual Plus
- Patient Package Name** : Mediwheel Full Body Health Checkup Male Below 40
- Contact Details** : 7976057599
- Appointment Date** : 08-11-2024
- Confirmation Status** : Booking Confirmed
- Preferred Time** : 10:00 AM - 10:30 AM

| Member Information | | |
|--------------------|---------|--------|
| Booked Member Name | Age | Gender |
| MR. KUMAR PARVEEN | 35 year | Male |

We request you to facilitate the employee on priority.

Thanks,
Mediwheel Team
Please Download Mediwheel App



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 भारत सरकार
 Government of India


 आधार


Issue Date: 13/01/2013


 प्रवीन कुमार
 Parveen Kumar
 जन्म तिथि/DOB: 30/12/1988
 पुरुष/ MALE

7992 4550 2237
 VID : 9191 7045 8071 1122

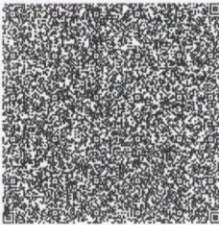
मेरा आधार, मेरी पहचान

Parveen Kumar


 भारतीय पहचान प्राधिकरण
 Unique Identification Authority of India

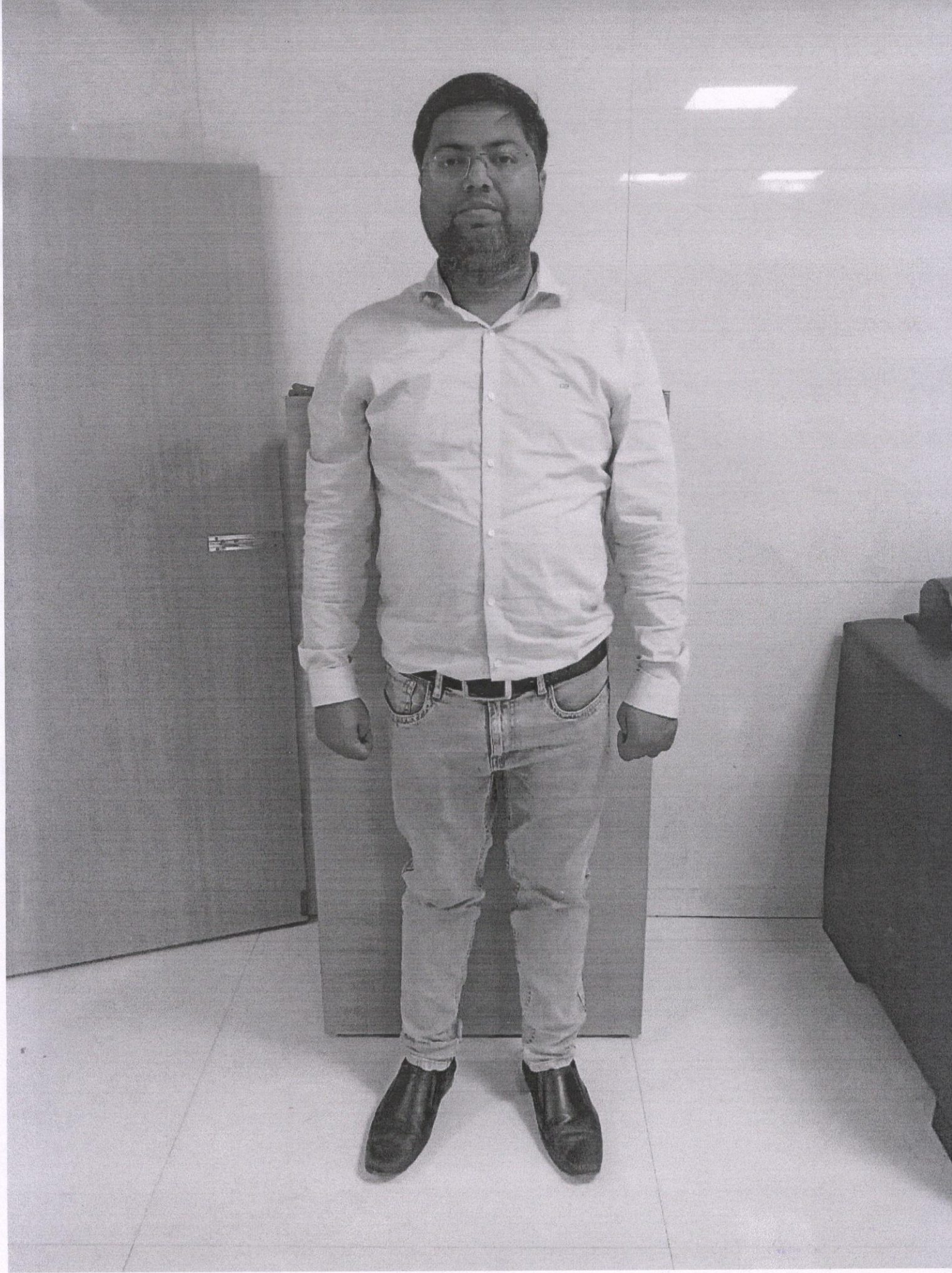
1947 | help@uidai.gov.in | www.uidai.gov.in

7992 4550 2237
 VID : 9191 7045 8071 1122



Address: S/o Niranjjan Singh, House No. 9-C, Rani Bagh, K D hospital ke pass Ambala Cantt, Haryana - 133001
 पता: श्री/श्री प्रियंका सिंह, मकान नं. ९-सी, रानी बाग, के डी अस्पताल के पास अंबाला कैंट, अंबाला, हरियाणा - 133001

Download Date: 12/01/2013

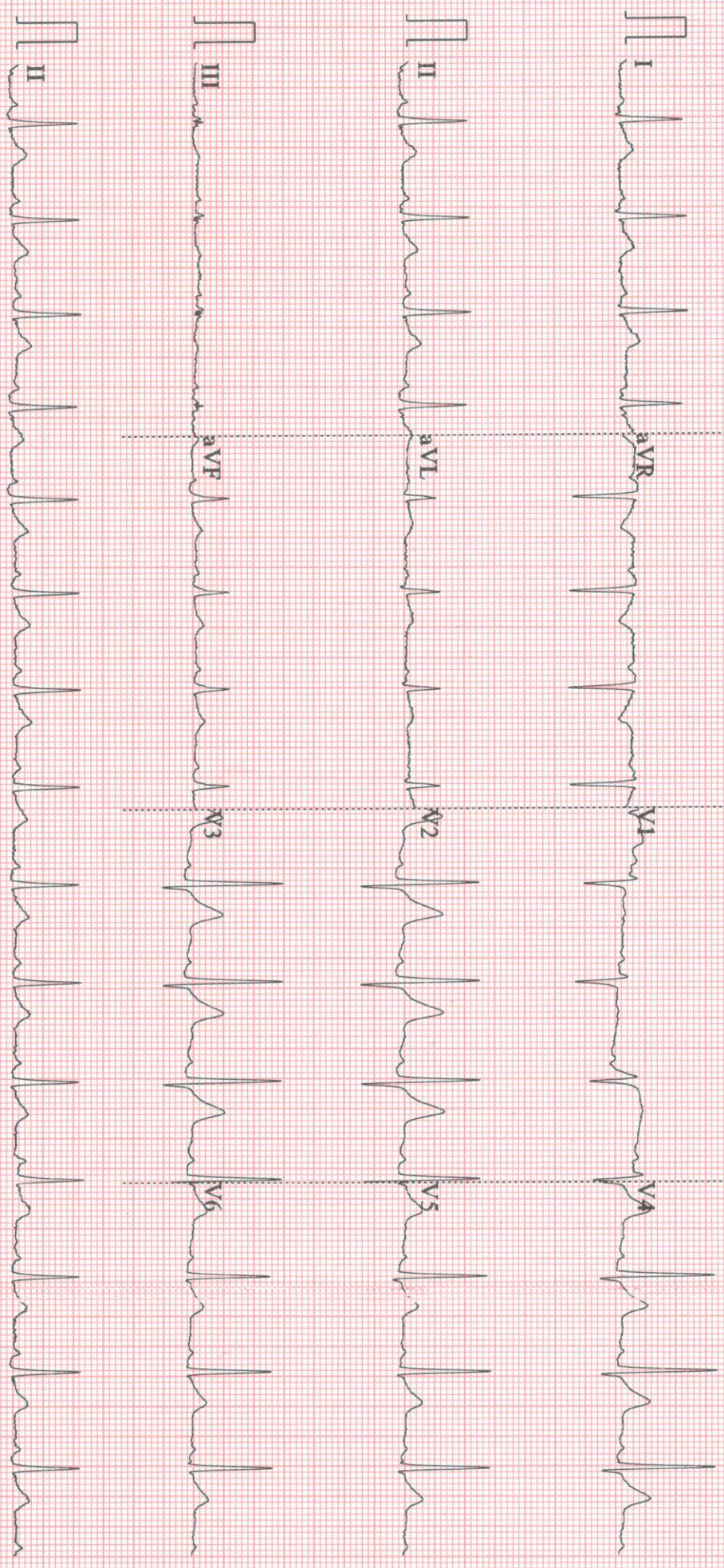


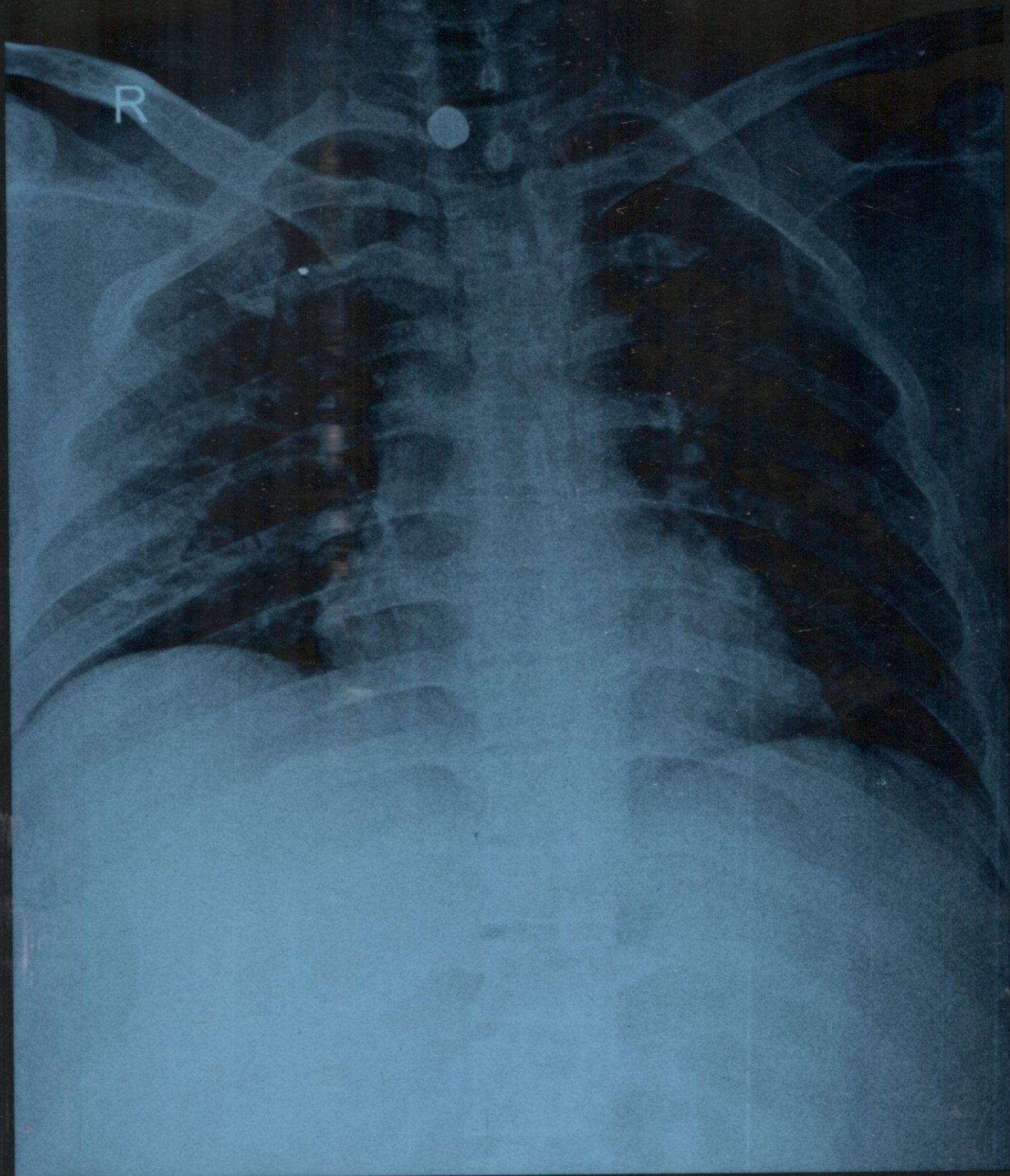
parveen kumar
Male 35Years

| | | |
|---------|---------------|-----|
| HR | : 95 | opm |
| P | : 95 | ms |
| PR | : 132 | ms |
| QRS | : 85 | ms |
| QT/QTc | : 333/414 | ms |
| P/QRS/T | : 55/36/33 | ° |
| RV5/SV1 | : 1.463/0.697 | mV |

Diagnosis information:
Sinus Rhythm
Normal ECG

Report Confirmed by:





01822 PARVEEN KUMAR 35Y/M 08/11/2024 CHEST AP DR SACHIN MALHOTRA
RI OSSOMS HOSPITAL AGRA



BLOSSOMS HOSPITAL



ULTRASOUND REPORT

NAME – PRAVEEN KUMAR S/O NIRANJAN SINGH DATE-08.11.2024

(1)**LIVER**- shows normal size, shape, and echotexture. No evidence of any focal space occupying lesion seen. IHBR are not dilated. Hepatic veins are normal. PV is normal in caliber.

(2)**GALL BLADDER**- IS normal in size shape & echotexture. No stone or mass present within the lumen of gall bladder. CBD is normal.

(3)**PANCREAS**- contracted. No stone or mass is evidenced. Main pancreatic duct is not dilated. No evidence of peripancreatic collection.

(4)**SPLEEN**-appears normal in size shape and echotexture. Splenic vein is normal.

(5)**BOTH KIDNEYS**-**Left kidney** appears normal in size ,shape and echotexture. Corticomedullary differentiation is well maintained. There is no evidence of hydronephrosis.**Right kidney present in rightt iliac region ectopic kidney.Corticomedullary differentiation is well maintained**

(6)**URINARY BLADDER**-is normally distended with echofree contents and normal wall thickness. No mass lesion or calculus is seen.

(7) **PROSTRATE**- Is normal in size &shape.

IMPRESSION –RIGHT ECTOPIC KIDNEY.

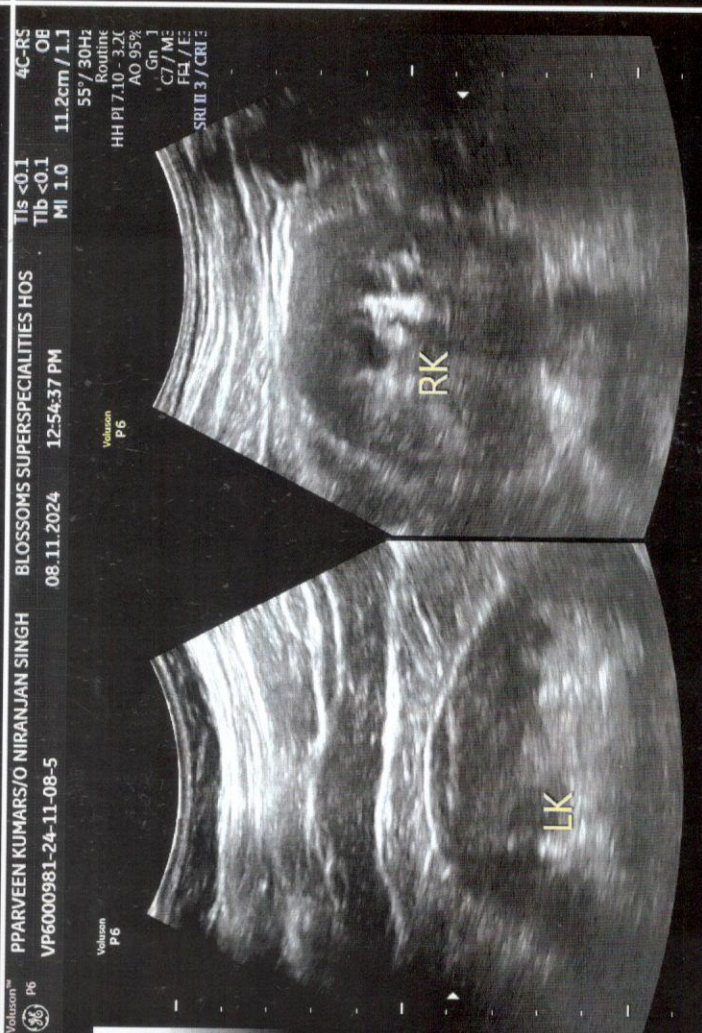
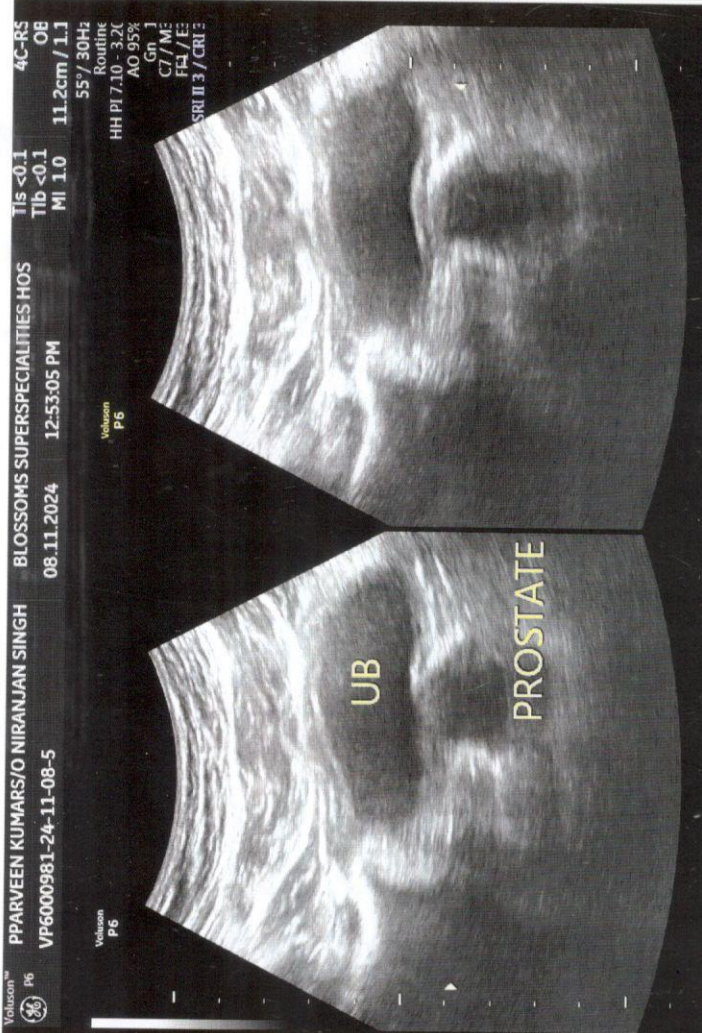
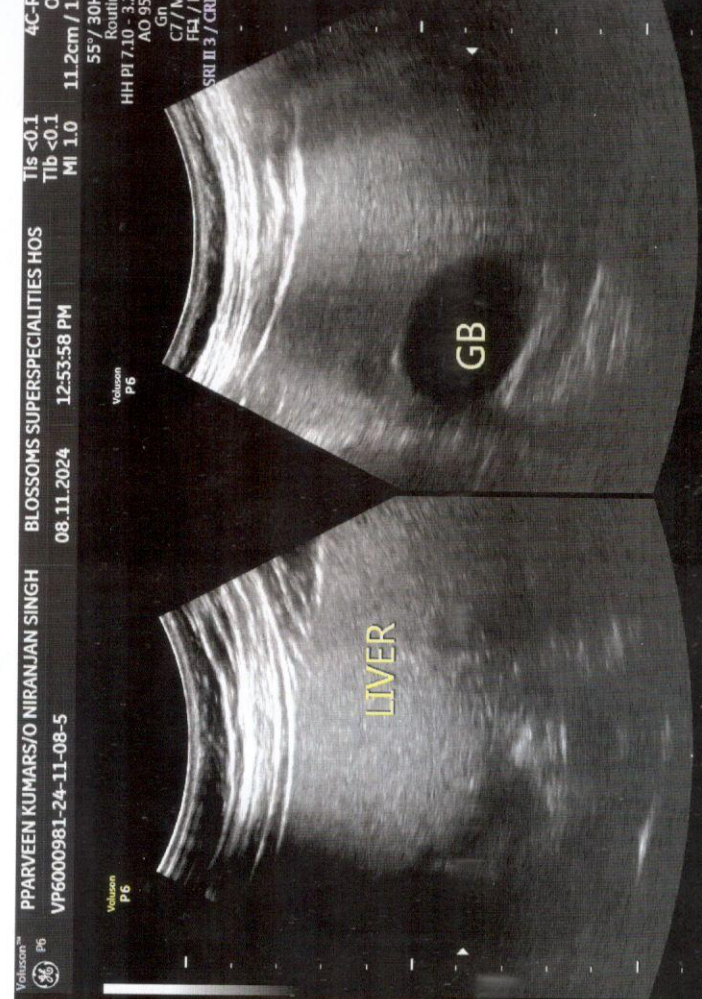
DR.SUNITA MALHOTRA

ULTRASONOLOGIST



Reg. No. UP/AGR/2016/AL/2596

2. Khandari Quarters, Master Plan Road, Agra - 282002





MC-5622

Booking Time 18:38:06
Sample Drawn: 08/11/2024 18:40:49
Sample Received: 08/11/2024 18:40:51
Print Date & Time: 08/11/2024 18:45:14



Date: 08/11/2024 Patient ID: 10246920

Refd by Lab:

Name : MR. PRAVEEN KUMAR

Age :

Sex: Male

Ref. By: BLOSSOM'S SUPER SPECIALITIES HOSPITAL

Sample Type: Urine, SERUM, EDTA, Fluoride Fasting

Investigation : C.B.C., E.S.R., FT3, FT4 & TSH, HbA1C, LIPID PROFILE, LIVER FUNCTION TEST, RENAL FUNCTION TEST, SUGAR FASTING

| Test Name | Value | Unit | Biological Ref Interval |
|-----------|-------|------|-------------------------|
|-----------|-------|------|-------------------------|

HAEMATOLOGY

COMPLETE BLOOD COUNT

HAEMOGLOBIN (Hb)
Method: Non Cyanide.

14.2

gm/dl

13.0 - 17.0

TLC (Total Leucocyte Count)
Method: DC Detection

8700

/cu mm

4000 - 10000

DIFFERENTIAL LEUCOCYTE COUNT

Method: Method: Flowcytometry / Microscopy

NEUTROPHILS

Method: Flow cytometry / Microscopy

65

%

45 - 70

LYMPHOCYTES

Method: Flow cytometry / Microscopy

31

%

20 - 45

MONOCYTES

Method: Flow cytometry / Microscopy

02

%

00 - 12

EOSINOPHILS

Method: Flow cytometry / Microscopy

02

%

01 - 06

R B C (Red Blood Cell Count)
Method: DC Detection

4.69

Millions/cm m 4.50 - 5.50

PCV / Hct (Hematocrit)
Method: Electrical Impedance

46.2

%

40.0 - 50.0

M C V (Mean Corp Volume)
Method: Calculated.

89.1

Femtoliter

82.0 - 101.0

M C H (Mean Corp Hb)
Method: Calculated

29.5

Picogram

27.0 - 32.0

M C H C (Mean Corp Hb Conc)
Method: Calculated.

32.0

gm/dl

31.5 - 34.5



Dr. Sakshi Mishra
M.D. (Path.)



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|-----------|-------|------|-------------------------|
|-----------|-------|------|-------------------------|

| | | | |
|---|-----|----------------------|-----------|
| PLATELET COUNT Method: DC Detection & Microscopy | 187 | X10 ³ /μL | 150 - 450 |
|---|-----|----------------------|-----------|

| | | | |
|---|------|----------------------|-------------|
| ABSOLUTE NEUTROPHIL COUNT Method: Calculated | 5.66 | X10 ³ /μL | 2.00 - 7.00 |
|---|------|----------------------|-------------|

| | | | |
|---|------|----------------------|-------------|
| ABSOLUTE LYMPHOCYTE COUNT Method: Calculated | 2.70 | X10 ³ /μL | 1.00 - 3.00 |
|---|------|----------------------|-------------|

| | | | |
|---|------|----------------------|-------------|
| ABSOLUTE MONOCYTE COUNT Method: Calculated | 0.17 | X10 ³ /μL | 0.20 - 1.00 |
|---|------|----------------------|-------------|

| | | | |
|---|------|----------------------|-------------|
| ABSOLUTE EOSINOPHIL COUNT Method: Microscopy | 0.17 | X10 ³ /μL | 0.04 - 0.44 |
|---|------|----------------------|-------------|

| | | | |
|--|----|------------|---------|
| E.S.R. (Westergren) Method: Sedimentation | 07 | mm 1st hr. | 00 - 10 |
|--|----|------------|---------|

BIOCHEMISTRY

| | | | |
|---|-------|-------|----------------|
| BLOOD SUGAR FASTING Method: Hexokinase | 75.00 | mg/dl | 70.00 - 100.00 |
|---|-------|-------|----------------|

Glucose Fasting: <100.0
Impaired Glu. Tolerance: 101.0-125.0
Diabetics : >125.0

HAEMATOLOGY

| GLYCOSYLATED HAEMOGLOBIN (HbA1c) | | | |
|---|------|---|--|
| GLYCOSYLATED HAEMOGLOBIN (HbA1c) | 4.89 | % | |

Non Diabetic : <6.00
Good Control : 6.00 - 7.00
Fair Control : 7.00 - 8.00
Poor Control : >8.00

| | | | |
|---------------------------------|-------|-------|----------------|
| ESTIMATED AVERAGE GLUCOSE (eAG) | 93.64 | mg/dl | 65.00 - 135.00 |
|---------------------------------|-------|-------|----------------|





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Age :

Sex: Male

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Sample Type: Urine,SERUM,EDTA,Flouride Fasting

Investigation : C.B.C.,E.S.R.,FT3, FT4 & TSH,HbA1c,LIPID PROFILE,LIVER FUNCTION TEST,RENAL FUNCTION TEST,SUGAR FASTING

| Test Name | Value | Unit | Biological Ref Interval |
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|-----------|-------|------|-------------------------|

REMARKS :

In vitro quantitative determination of **HbA1c** in whole blood is utilized in long term monitoring of glycemia. The HbA1c level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 8-12 weeks) and therefore provides much more reliable information for glycemia monitoring than determination of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1c** be performed at intervals of 3-6 months during diabetes mellitus therapy. Results of **HbA1c** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

Estimated average glucose (eAG) - There is a predictable relationship between HbA1c and eAG. It helps people with diabetes to correlate their A1c to daily glucose monitoring levels. It reflects the average glucose levels in the past 2-3 months. The eAG calculation converts the A1c percentage to the same units used by glucometers mg/dl. The following table shows the relationship of eAG and A1c.

| HbA1c | eAG (mg/dl) |
|-------|-------------|
| 5 | 97 |
| 6 | 126 |
| 7 | 154 |
| 8 | 183 |
| 9 | 212 |
| 10 | 240 |
| 11 | 269 |
| 12 | 298 |

BIOCHEMISTRY

LIVER FUNCTION TEST

SERUM BILIRUBIN (TOTAL) 0.87 mg/dl 0.00 - 1.10
Method: Colorimetric-Diazo

CONJUGATED (Direct) 0.21 mg/dl 0.00 - 0.30
Method: Colorimetric-Diazo

UNCONJUGATED (Indirect) 0.66 mg/dl 0.10 - 1.00
Method: Calculated

Full Term
Age of New Born



Dr. Sakshi Mishra
M.D. (Path.)

24x7

All tests have technical limitations, Corroborative clinicopathological interpretation is indicated. In case of any disparity including machine error or typing error the test should be repeated immediately. NOT VALID FOR MEDICO LEGAL PURPOSE.

SAMPLE COLLECTION FACILITY AVAILABLE FROM HOME & NURSING HOME.

HELP LINE NO. : Delhi Gate : 7534855577, Rajpur Chungi : 7534955577

E-mail - standardpathology@gmail.com



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| Test Name | Value | Unit | Biological Ref Interval |
|---|-------|-------|--|
| SGOT /AST Method: without P5P | 24.00 | U/L | 24 hrs : 2 - 6 mg/dl 48 hrs : 6 - 7 mg/dl 3-5 Days: 4 - 12 mg/dl Premature Age of New Born 24 hrs: 1- 6 mg/dl 48 hrs: 6 - 8 mg/dl 3-5 Days: 10 - 15 mg/dl |
| SGPT /ALT Method: without P5P | 17.00 | U/L | 0.00 - 50.00 |
| S. ALKALINE PHOSPHATASE Method: Colorimetric Assay | 89.10 | U/L | 25.00 - 140.00 Male (Adult): 25.0 - 140.0 Female (Adult): 37.0 - 103.0 Child(10 -17) : 350.0 - 500.0 2-10 Yrs : 100.0 - 350.0 New Born: 1-4 Times the Adult Values |
| TOTAL PROTEIN Method: Biuret | 6.22 | gm/dl | 6.40 - 8.30 |
| ALBUMIN Method: BCG | 4.68 | gm/dl | 3.47 - 4.94 |
| GLOBULIN Method: Calculated | 1.54 | gm/dl | 2.10 - 5.60 |
| A/G RATIO Method: Calculated | 3.04 | gm/dl | 1.00 - 2.30 |





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| Test Name | Value | Unit | Biological Ref Interval |
|--|--------|-------|---|
| Gamma GT Method: Enzymatic colorimetric assay | 26.00 | U/L | 0.00 - 61.00 |
| LIPID PROFILE | | | |
| CHOLESTEROL Method: Enzymatic Colorimetric | 142.00 | mg/dl | 82.00 - 200.00 Optimal : < 200.00 Border line High Risk : 200.0 - 239.0 High Risk: >240.0 |
| TRIGLYCERIDES Method: Enzymatic Colorimetric | 111.00 | mg/dl | 0.00 - 150.00 Optimal: < 150.0 Borderline High Risk:150.0 - 199.0 High Risk :200.0 - 499.0 Very High Risk :>500.0 |
| HDL CHOLESTEROL Method: CHOD-PAP | 65.00 | mg/dl | 35.30 - 79.50 |
| LDL CHOLESTEROL Method: CHOD-PAP | 54.80 | mg/dl | 0.00 - 129.00 Optimal: < 100.0 Near Optimal: 100.0 - 129.0 Border line High Risk: 130.0 - 159.0 High Risk:160.0 - 189.0 Very High Risk: >190.0 |
| VLDL CHOLESTEROL Method: Calculated | 22.20 | mg/dl | 25.00 - 40.00 |
| CHOLESTEROL / HDL RATIO Method: Calculated | 2.18 | mg/dl | 0.00 - 4.90 |



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MC-5822

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| Test Name | Value | Unit | Biological Ref Interval |
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|-----------|-------|------|-------------------------|

Low Risk: 3.3-4.4
Avg. Risk: 4.5-7.1
Mod. Risk: 7.2-11.0

LDL / HDL RATIO
Method: Calculated

0.84

mg/dl

0.00 - 3.50

NON-HDL CHOLESTEROL
Method: Calculated

77.00

mg/dl

<130.0

RENAL FUNCTION TEST

BLOOD UREA
Method: Urease

28.00

mg/dl

17.00 - 43.00

SERUM CREATININE
Method: Jaffe's reaction.

0.87

mg/dl

0.00 - 1.20

SERUM URIC ACID
Method: Uricase-Peroxidase

4.98

mg/dl

3.60 - 8.20

GLOBULIN
Method: Calculated

1.54

gm/dl

2.10 - 5.60

A/G RATIO
Method: Calculated

3.04

gm/dl

1.00 - 2.30

SERUM SODIUM
Method: Indirect ISE

132.00

mmol/L

132.00 - 146.00

SERUM POTASSIUM
Method: Indirect ISE

3.88

mmol /L

3.40 - 5.40

SERUM CALCIUM
Method: NM-BAPTA

9.88

mg/dl

8.60 - 10.20



Page No: 6 of 8

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SERUM PHOSPHORUS
Method: UV Molybdate

4.21

mg/dl

2.50 - 4.50

URINE EXAMINATION REPORT

PHYSICAL

COLOUR
Method: Visual

STRAW

Pale Yellow

TRANSPARENCY
Method: Visual

CLEAR

Clear

SPECIFIC GRAVITY
Method: Strip

1.025

1.001 - 1.030

PH
Method: pH paper

6.0

5.0 - 8.0

DEPOSIT

ABSENT

Absent

BIOCHEMICAL

ALBUMIN
Method: Heat Coagulation

NIL

Nil

SUGAR
Method: Benedict's

NIL

Nil

BILE SALTS (BS)
Method: Hay's sulphur

ABSENT

Absent

BILE PIGMENT (BP)
Method: Fouchet's

ABSENT

Absent

MICROSCOPIC

PUS CELLS
Method: Microscopy

0-1

/HPF

0 - 5

EPITHELIAL CELLS
Method: Microscopy

NIL

/HPF

0 - 5

RBC'S
Method: Microscopy

NIL

/HPF

0 - 2

CASTS
Method: Microscopy

ABSENT

Absent



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|--------------------------------|--------|------|-------------------------|
| CRYSTALS Method: Microscopy | NIL | | Nil |
| BACTERIA Method: Microscopy | ABSENT | | ABSENT |
| OTHERS Method: Microscopy | NIL | | Nil |

ENDOCRINOLOGY

| | | | |
|-----------------------------------|------|--------|-------------|
| FREE TRIIODOTHYRONINE (FT3) | 3.99 | pmol/l | 3.10 - 6.80 |
| FREE THYROXINE (FT4) | 1.02 | ng/dl | 0.89 - 1.76 |
| THYROID STIMULATING HORMONE (TSH) | 3.01 | uIU/mL | 0.27 - 5.50 |

Adults > 20 Yrs : 0.270 - 5.500
Children
1-3 Days : 5.17 - 14.6
4 - 30 Days : 0.43 - 16.1
2 -12 Months : 0.62 - 8.05
2 - 6 Yrs : 0.54 - 4.53
7 - 11Yrs : 0.66 - 4.14
12 - 19 Yrs : 0.53 - 3.59

The new recommendations for TSH levels during pregnancy are the following:

First trimester: less than 2.5 with a range of 0.1-2.5.

Second trimester: 0.2-3.0

Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4 am and at a minimum 6-10 pm
The variation is of the order of 50%, hence time of the day has influence on the measured TSH concentrations.

**** End Of Report ****

Result Awaited : RENAL FUNCTION TEST(ALKALINE PHOSPHATASE, TOTAL PROTEIN, ALBUMIN)



Page No: 8 of 8

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M.D. (Path.)

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Praveen Kumar

MediWheel Full Body Annual Plus

Test Name

For the most Comprehensive Check of all Pathology for complete understanding of your body.

CBC with ESR, Urine analysis Blood Group, BMI

Blood Sugar & Urine Sugar Fasting, Blood Sugar - Post Prandial, Urine Sugar PP, Hba1c

TSH, T3, T4

Triglycerides, Cholesterol Total, HDL, LDL, VLDL, LDL/HDL Ratio, Cholesterol Total / HDL Ratio

Uric Acid, BUN, Creatinine, BUN/Creatinine Ratio, Total Protein

Bilirubin Total & Direct and Indirect, Alkaline Phosphatase, Albumin, Globulin, A:G Ratio, Serum Protein, GGT, AST/ALT Ratio

ECG, (2D or TMT)

X Ray Chest

Ultrasound

General, Dental, Eye, ENT, Dietician

2400