

MEDICAL EXAMINATION REPORT

NAME: MR. UMASHANKAR

AGE/SEX: 53Y/MALE

DATE OF BIRTH: 01/01/1971

ADDRESS: VISHNUPURI COLONY, NAWABGANJ – KANPUR – 208002

OBSERVATIONS

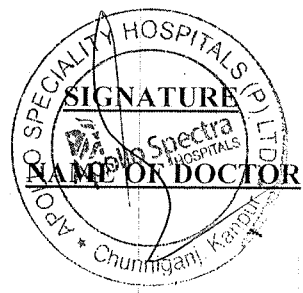
- | | |
|--------------------------|---------------------|
| 1. DIABETES MELLITUS: NO | 2. HYPERTENSION: NO |
| 3. C.O.P.D.: NO | 4. TUBERCULOSIS: NO |
| 5. EYE DISORDER: NO | 6. PARALYSIS: NO |
| ➤ EPILEPSY: NO | 8. DENTAL: NORMAL |
| 9. E.N.T.: NORMAL | |

BLOOD PRESSURE: 130/80 mmhg	PULSE: 74 bpm	WEIGHT: 80 kg
RESPIRATORY RATE: 19/m	HEIGHT: 154 cm	BMI: 33.7 Kg/m²

ADVICE:
➤ *Advice for consultation with a General Physician due to high Uric Acid and BUN.*

OBSERVATIONS:

PLACE: Kanpur
DATE: 29/10/2024

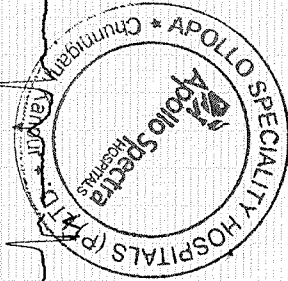
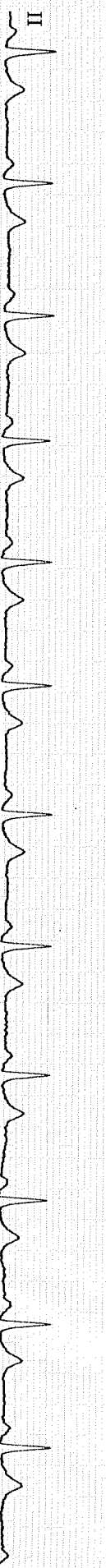
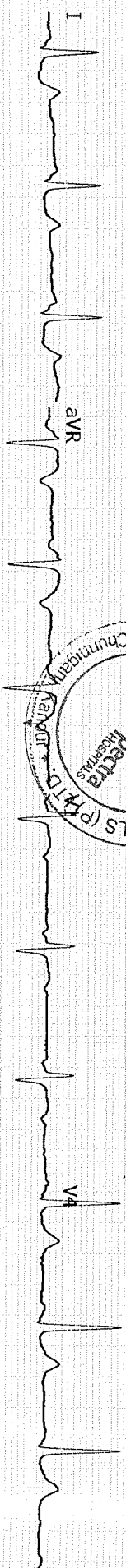


PLACE: Kanpur
DATE: 29/10/2024

Location: Room: Order No: sr: Indk n: Medication 1: Medication 2: Medication 3:

74 bpm
--/-- mmHg

QRS : 72 ms
QT / QTcBaz : 366 / 406 ms
PR : 118 ms
P : 92 ms
RR / PP : 814 / 810 ms
P / QRS / T : 55 / 33 / 57 degrees



Technician: *MR Umesh Shankar*
Ordering Ph: *MI 15444*
Referring Ph: *MI 804g*
Attending Ph: *SR 130480*

Mr. Uma Shankar

Va { R.G. 0.50 sph e/c
 (Disturb) { h.G. 0.75/0.75 + 180 e/c

Nu { Add: 2.50 sph
 { Add: 2.50 sph

Colam Usiba Team





DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. UMA SHANKAR **Age / Gender** : 53Y/Male
UHID/MR No. : SKAN.0000140382 **OP Visit No** : SKANOPV178601
Sample Collected on : 29-10-2024 11:37 **Reported on** : 29-10-2024 13:13
LRN# : LAB13687785 **Specimen** : Blood(EDTA)
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
STANDARD PLUS MALE - PAN INDIA - FY2324
Emp/Auth/TPA ID : 35ES7705 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

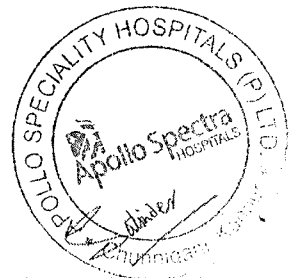
DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	12.0*	13 - 17	g/dL
RBC Count Method: Electrical Impedance	4.26*	4.5 - 5.5	millions/cu mm
Haematocrit Method: Calculated	36.6*	40 - 50	%
MCV Method: Calculated	85.9	83 - 101	fl
MCH Method: Calculated	28.2	27 - 32	pg
MCHC Method: Calculated	32.8	31.5 - 34.5	g/dl
RDW	15.1*	11.6 - 14	%
Platelet Count Method: Electrical Impedance	1.87	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	6600	4000 - 11000	cells/cumm

Results are to be correlated clinically

Lab Technician / Technologist

NOTE: All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.



Excel Hospitals (P) Ltd.

Dr. SATINDER SINGH
MD
14/138, Chunniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. UMA SHANKAR	Age / Gender : 53Y/Male
UHID/MR No. : SKAN.0000140382	OP Visit No : SKANOPV178601
Sample Collected on : 29-10-2024 11:37	Reported on : 29-10-2024 13:13
LRN# : LAB13687785	Specimen : Blood(EDTA)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324	
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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)

Neutrophils	66	40 - 80	%
Lymphocytes	30	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	02	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	14	0 - 14	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
BLOOD GROUP ABO AND RH FACTOR			
ABO Method: Microplate Hemagglutination	A		
Rh (D) Type: Method: Microplate Hemagglutination	POSITIVE		

End of the report

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♦ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. UMA SHANKAR **Age / Gender** : 53Y/Male
UHID/MR No. : SKAN.0000140382 **OP Visit No** : SKANOPV178601
Sample Collected on : 29-10-2024 11:37 **Reported on** : 29-10-2024 18:08
LRN# : LAB13687785 **Specimen** : Blood(EDTA)
Ref Doctor : SELF **Adm/Consult Doctor** :
Emp/Auth/TPA ID : 35ES7705
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology : Microscopic
RBC : Normocytic Normochromic
WBC : within normal limits. DLC is (P 66 L 30 M 02 E 02 B 00)
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic blood picture
Note/Comment : Please Correlate clinically

End of the report

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DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. UMA SHANKAR **Age / Gender** : 53Y/Male
UHID/MR No. : SKAN.0000140382 **OP Visit No** : SKANOPV178601
Sample Collected on : 29-10-2024 11:37 **Reported on** : 29-10-2024 18:07
LRN# : LAB13687785 **Specimen** : Plasma(Flouride)
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
STANDARD PLUS MALE - PAN INDIA - FY2324
Emp/Auth/TPA ID : 35ES7705 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE, FASTING			
Glucose - Plasma Method: GOD-PAP	88*	Fasting - Normal : < 100mg/dL - Prediabetes : 100 – 125 mg/dL - Diabetes : 126 mg/dL or higher	mg/dL
GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)			
Glucose - Plasma Method: GOD-PAP	107	Post prandial : < 140 mg/dL Random : <200mg/dL	mg/dL
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA Method: Jaffe's Kinetic	1.4*	0.7 - 1.3	mg/dl
URIC ACID - SERUM Method: Modified Uricase	12.8*	3.5 – 7.2	mg/dl
UREA - SERUM/PLASMA Method: Urease with indicator dye	74*	Male: 19 - 43	mg/dl
CALCIUM	10.4*	8.5 - 10.1	mg/dl

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LRN#	: LAB13687785	Specimen	: Plasma(Flouride)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 35ES7705	Adm/Consult Doctor	:
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

Method: O-Cresolphthalein complexone

BUN	34.5*	9-20	mg/dl
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Method: Urease with indicator dye

PHOSPOHORUS	5.2*	2.5 - 4.5	mg/dl
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Method: Phosphomolybdate -UV

ELECTROLYTES (Na)	138	135 - 145	meq/L
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Method: ISE-Direct

ELECTROLYTES (K)	4.7	3.5 - 5.1	meq/L
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Method: ISE-Direct

GAMMA GLUTAMYL TRANSFERASE (GGT)

GAMMA GT	22	< 55	U/L
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Method: Kinetic Photometric

LIVER FUNCTION TEST (LFT)

BILIRUBIN TOTAL	0.78	0.2 - 1.3	mg/dL
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Method: Azobilirubin/dyphylline

BILIRUBIN (DIRECT)	0.24	Adults: 0.0 - 0.3	mg/dL
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Method: Dual Wavelength Spectrophotometric

BILIRUBIN UNCONJUGATED(INDIRECT)	0.54	0.0 - 1.1	mg/dL
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Method: Dual Wavelength Spectrophotometric

ALBUMIN	4.4	3.0 - 5.0	g/dL
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Method: Bromocresol Green dye binding

PROTEIN TOTAL	7.5	6.0 - 8.2	g/dL
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Method: Biuret Reaction

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Dr. SATINDER SINGH

MD

Pathology

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❖ Emergency No. 9935577550



DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. UMA SHANKAR **Age / Gender** : 53Y/Male
UHID/MR No. : SKAN.0000140382 **OP Visit No** : SKANOPV178601
Sample Collected on : 29-10-2024 11:37 **Reported on** : 29-10-2024 18:07
LRN# : LAB13687785 **Specimen** : Plasma(Flouride)
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
STANDARD PLUS MALE - PAN INDIA - FY2324
Emp/Auth/TPA ID : 35ES7705 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

AST (SGOT) Method: Kinetic (Leuco dye) with P 5 P	26	14 - 36	U/L
GLOBULINN Method: Calculation	3.1	2.8 - 4.5	g/dL
ALT(SGPT)	23	9 - 52	U/L
HbA1c, GLYCATED HEMOGLOBIN HbA1c, GLYCATED HEMOGLOBIN Method:HPLC	5.4	<=5.6: Non-Diabetic 5.7-6.4: Prediabetes (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	108.28		mg/dL
LIPID PROFILE			
CHOLESTEROL Method: CHOD-End Point POD (Enzymatic)	181	<200 - Desirable 200-239 - Borderline High >=240 - High	mg/dL
HDL	56	<40 - Low	mg/dL

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DEPARTMENT OF LABORATORY SERVICES

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UHID/MR No. : SKAN.0000140382 **OP Visit No** : SKANOPV178601
Sample Collected on : 29-10-2024 11:37 **Reported on** : 29-10-2024 18:10
LRN# : LAB13687785 **Specimen** : Urine
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
STANDARD PLUS MALE - PAN INDIA - FY2324
Emp/Auth/TPA ID : 35ES7705 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.015	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	6.0 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	1-2	2-3	/hpf

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SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 8858154254, 9918123109

e-mail : sonidiagnostics01@gmail.com

Patient Name : MR. UMA SHANKER

Age / Gender : 53 years / Male

Patient ID : 59410

Source : Excel Hospital

Referral : Dr. HEALTH CHECKUP

Collection Time : 29/10/2024, 02:45 p.m.

Reporting Time : 29/10/2024, 06:59 p.m.

Sample ID :



243030027

Test Description	Value(s)	Reference Range	Unit(s)
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T3,T4,TSH

SAMPLE TYPE : SERUM

T3	1.32	0.79 - 1.58	ng/mL
Method : CLIA			
T4	10.6	5.2-12.7	µg/dL
Method : CLIA			
TSH	0.787	0.3-4.5	µIU/mL
Method : CLIA			

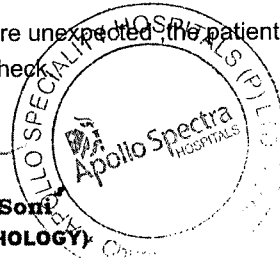
Interpretation

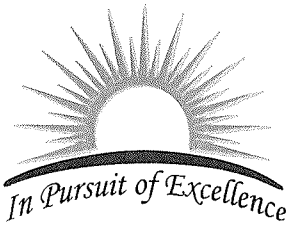
TSH	T4	T3	INTERPRETATION
HIGH	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPOTHYROIDISM
HIGH	LOW OR NORMAL	LOW OR NORMAL	HYPOTHYROIDISM
LOW	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPERTHYROIDISM
LOW	HIGH OR NORMAL	HIGH OR NORMAL	HYPERTHYROIDISM
LOW	LOW OR NORMAL	LOW OR NORMAL	NON-THYROIDAL ILLNESS: RARE PITUITARY (SECONDARY)HYPOTHYROIDISM

****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected, the patient is advised to contact the lab immediately for a recheck.

Dr. S.S.Soni
M.D. (PATHOLOGY)





SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 8858154254, 9918123109

e-mail : sonidiagnostics01@gmail.com

Patient Name : MRS. RAJ LAXMI

Age / Gender : 38 years / Female

Patient ID : 59411

Source : Excel Hospital

Referral : Dr. HEALTH CHECKUP

Collection Time : 29/10/2024, 02:46 p.m.

Reporting Time : 29/10/2024, 06:57 p.m.

Sample ID :



243030028

Test Description	Value(s)	Reference Range	Unit(s)
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T3,T4,TSH

SAMPLE TYPE : SERUM

T3	1.42	0.79 - 1.58	ng/mL
T4	11.4	5.2-12.7	µg/dL
TSH	2.72	0.3-4.5	µIU/mL

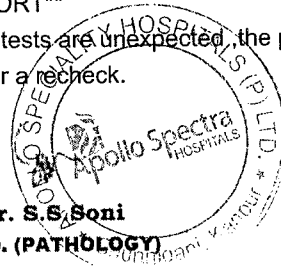
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TSH	T4	T3	INTERPRETATION
HIGH	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPOTHYROIDISM
HIGH	LOW OR NORMAL	LOW OR NORMAL	HYPOTHYROIDISM
LOW	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPERTHYROIDISM
LOW	HIGH OR NORMAL	HIGH OR NORMAL	HYPERTHYROIDISM
LOW	LOW OR NORMAL	LOW OR NORMAL	NON-THYROIDAL ILLNESS: RARE PITUITARY (SECONDARY)HYPOTHYROIDISM

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Dr. S.S. Soni
M.D. (PATHOLOGY)





भारत सरकार
Unique Identification Authority of India
Government of India

नामांकन क्रम / Enrollment No 1171/10824/01283

To,
उमाशंकर .
UMASHANKAR .
S/O VISHWANATH
15/10
VISHNUPURI COLONY KANPUR
THANA NAWABGANJ
Kanpur
Nawabganj Kanpur Nagar
Uttar Pradesh 208002

Ref: 625 / 20E / 919821 / 920687 / P



UE491746609IN



आपका आधार क्रमांक / Your Aadhaar No. :

2768 5290 6540

आधार — आम आदमी का अधिकार



भारत सरकार
GOVERNMENT OF INDIA



उमाशंकर .
UMASHANKAR .
जन्म वर्ष / Year of Birth : 1971
पुरुष / Male



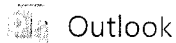
2768 5290 6540

आधार — आम आदमी का अधिकार



3/1/21/22

Submitted for H/C



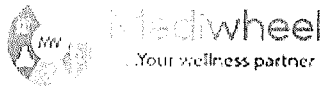
Health Check up Booking Confirmed Request(35ES7705),Package Code-PKG10000361, Beneficiary Code-322035

From Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Date Tue 22-10-2024 17:46

To grishsingh32@gmail.com <grishsingh32@gmail.com>

Cc Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>



011-41195959

Dear **UMA SHANKER**,

We are pleased to confirm your health checkup booking request with the following details.

Hospital Package Name : Mediwheel Full Body Standard Plus

Name of Diagnostic/Hospital : Apollo Spectra - Kanpur

Address of Diagnostic/Hospital- : 14/138 ,Chunni Ganj Mal Road,Kanpur,Kanpur Nagar - 208001

City : Kanpur

State : Uttar Pradesh

Pincode : 208001

Appointment Date : 29-10-2024

Confirmation Status : Booking Confirmed

Preferred Time : 08:00 AM - 08:30 AM

Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
UMA SHANKER	53 year	Male
Raj Laxmi	54 year	Female

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).

10/28/24 2:37 PM

Mail - Customer Care :Mediwheel : New Delhi - Outlook

- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,
Mediwheel Team

Please Download Mediwheel App



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