





UHID No	NIC46697878
Name	Ravikant Dattatray Dhere
Age	37 Years(M)
EmployeeID	170446
Plan Period	01/10/2022 To 30/09/2023
Policy No	251100502210000169
Organisation	Bank of Baroda - Employees

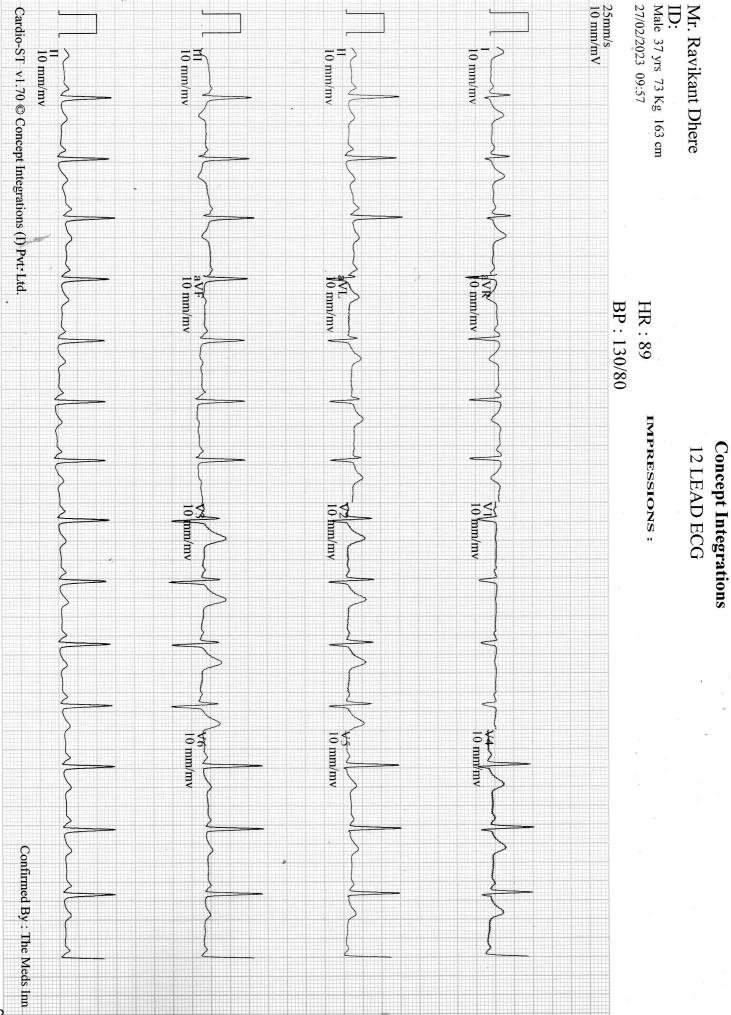
FI-IPL Family Health Plan Insurance TPA Limited

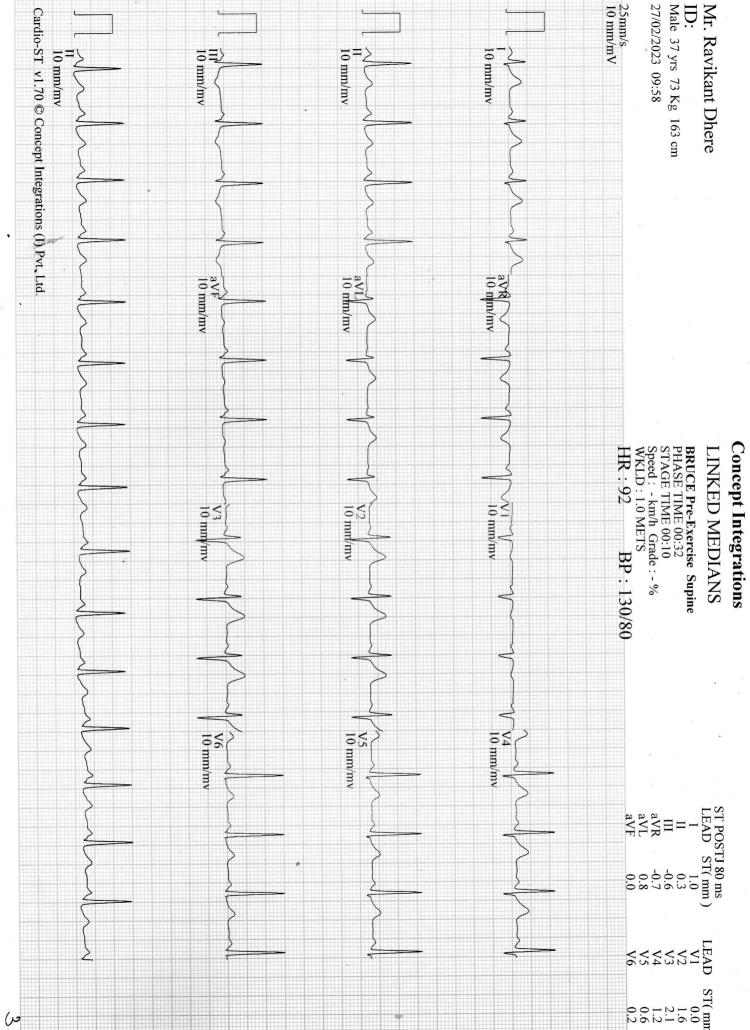


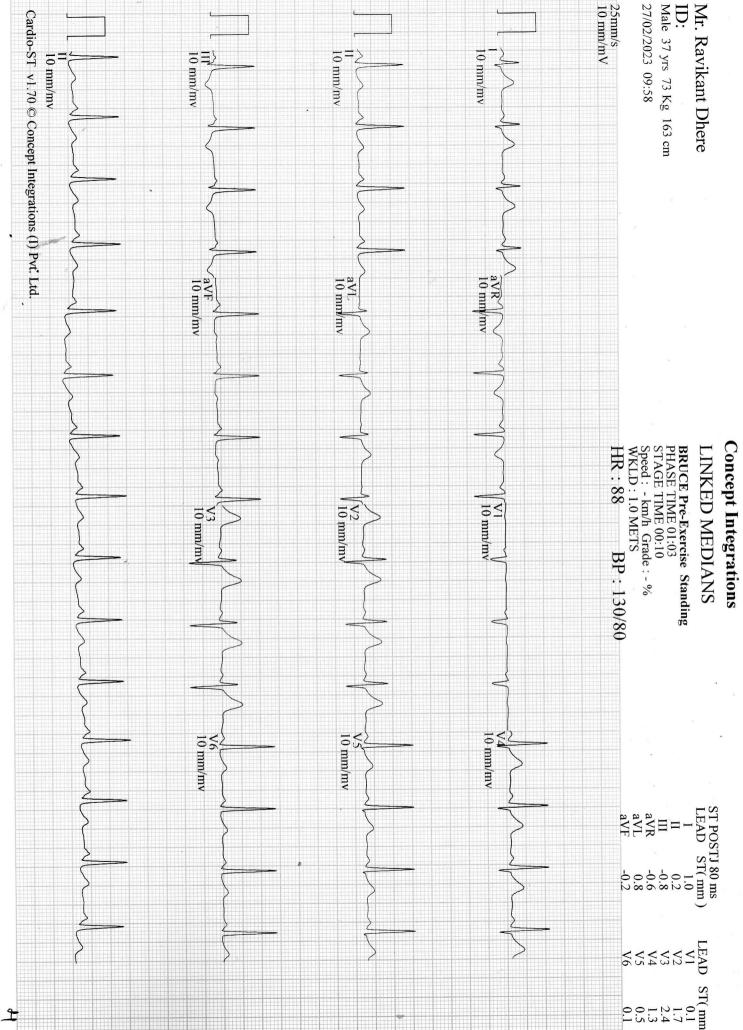


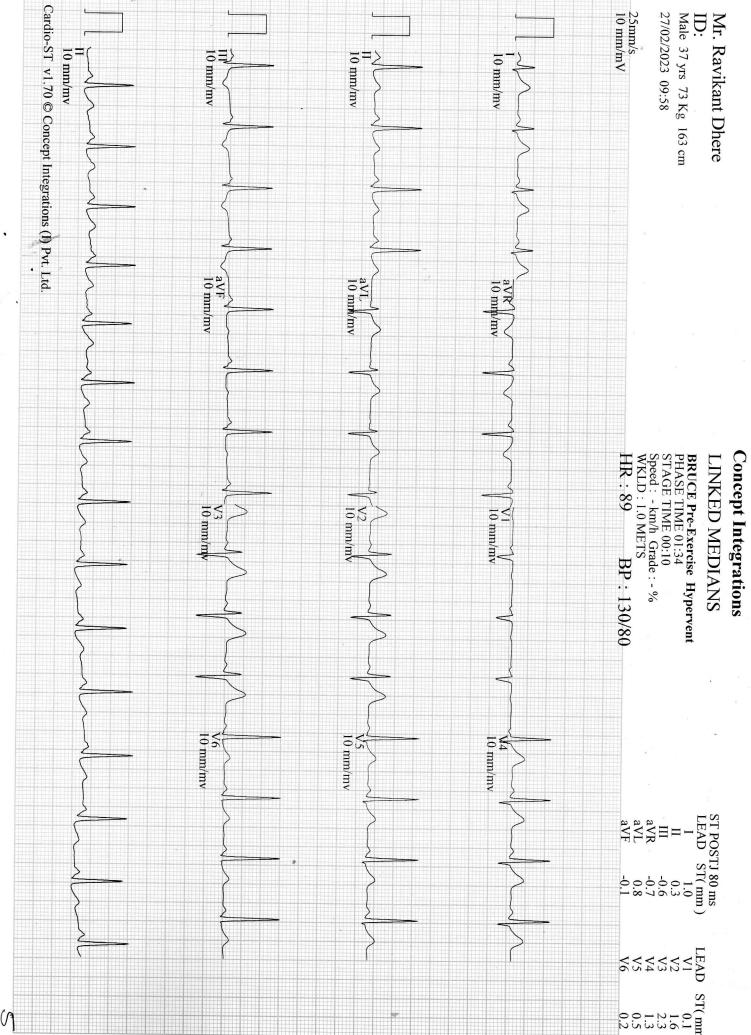
Aadhaar - Samanya Maansacha Adhika

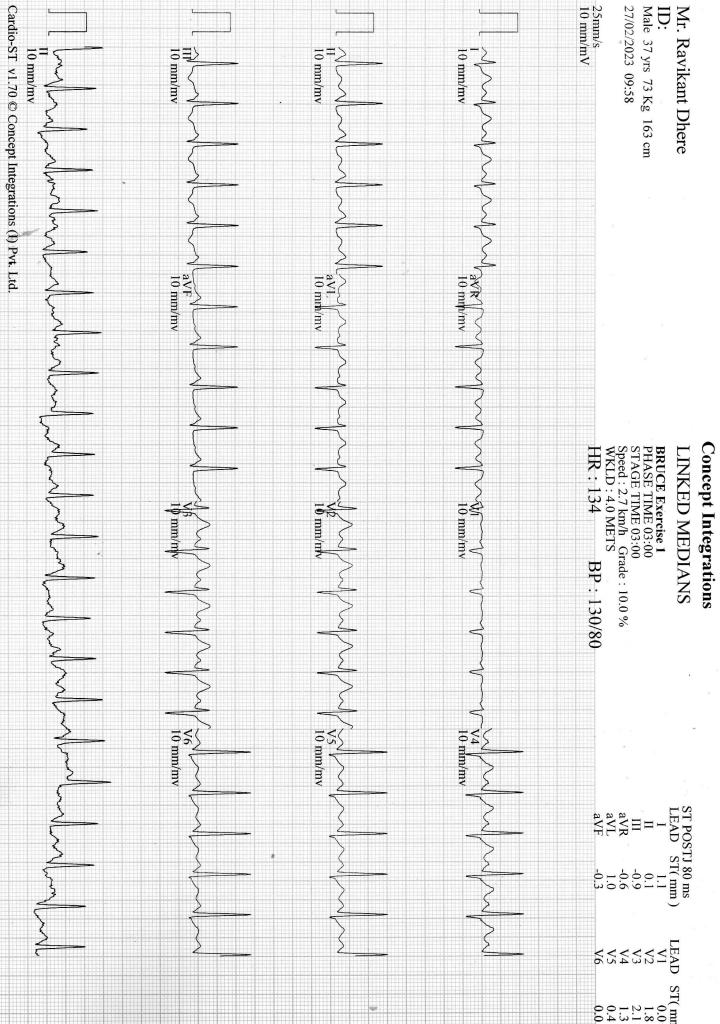


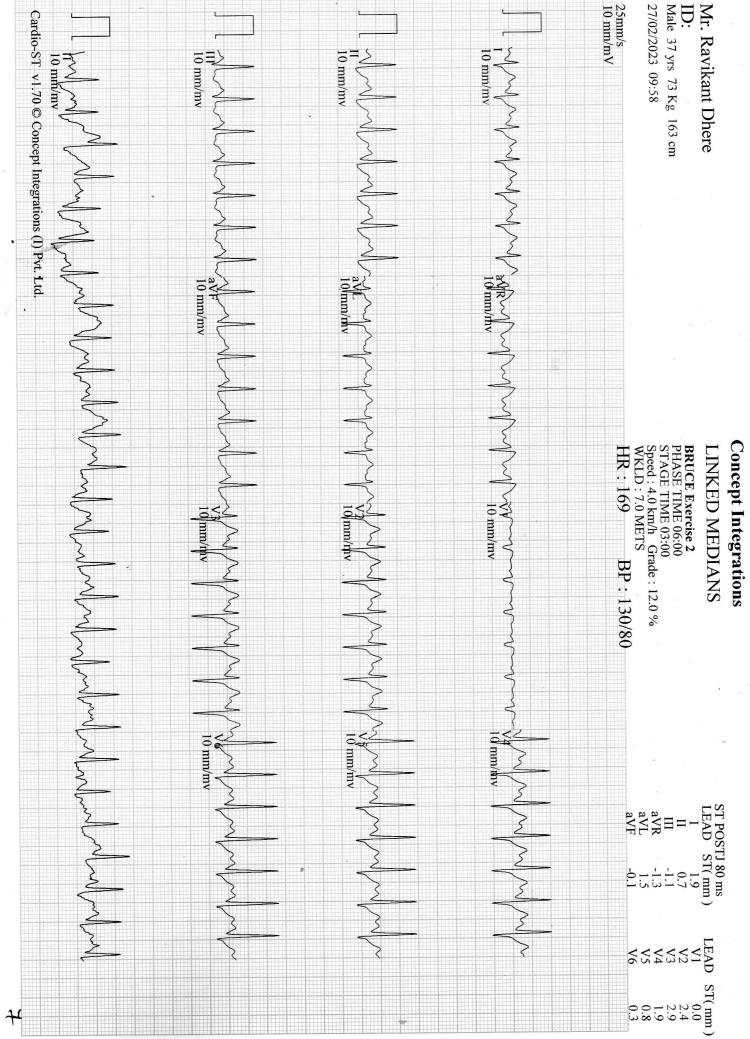














		Hema	tology Rep	port	
Sample 1 Test Time: 27/02	/2023 11:55:38 AM	Inst: E	3C 5000	Mode: O	V-WB-CBC+5DIFF
Name: Mr. RAV	VIKANT. DHERE			Ref By.: M	EDIWHEEL
Gender: Male	Age:	37 Ye	ar		
Parameter		Result	t Unit	Ref.range	
WBC		5.94	4 10^3/uL	4.00-10.00	WBC Flag
Neu#		3.51	1 10^3/uL	2.00-7.00	
Lym#		1.50	5 10^3/uL	0.80-4.00	
Mon#		0.35	5 10^3/uL	0.12-1.20	
Eos#	Н	0.52	2 10^3/uL	0.02-0.50	
Bas#		0.00	0 10^3/uL	0.00-0.10	
Neu%		59.0	0 %	50.0-70.0	
Lym%		26.	2 %	20.0-40.0	
Mon%		-5	9 % 5	3,0-12.0	RBC Flag
Eos%	Н	8	9 %	0.5-5.0	RBC Abn Distribution
Bas%		0.	0 %	0.0-1.0	Microcytosis
RBC	Н	5.8	4 10^6/uL	4.00-5.50	
HGB		13.	6 g/dL	12.0-16.0	
НСТ		40.	8 %	40.0-54.0	
MCV	L	8 69	9 fL	80.0-100.0	
MCH	L L		3 pg	27.0-34.0	
MCHC		33.	And a second sec	32.0-36.0	PLT Flag
RDW-CV		12	.6 %	11.0-16.0	
RDW-SD	L	1/33	7 fL	35.0-56.0	/
PLT		32	26 10^3/uL	150-450	
MPV		8	.6 fL	6.5-12.0	
PDW		15	.1	9.0-17.0	
PCT		0.28	30 %	0.108-0.282	
101					M
	No	tic Nos	nochranic.		
LAS DIFF	- Cosi	rophilia	nochronic.		Dr. MANISH SBER
	WBC		RBC		
	MAS		0 10		10 20 30 fL
Office No	o. 12 & 13, C-1, Bram	ha Estate, N	IIBM Road,		306, Marvel Sangria,
	a, Pune - 411048				adi Road, Undri, Pune - 411060
	- 2683 6633 / 4005 3	861		Mob.: 9850078	603 / 8530097492
10111 020					

E-mail: manishberi2009@yahoo.com | Website: www.themedsinn.com | Timings: Monday to Saturday - 8 am to 8 pm

An ISO 9001:2008 Certified	d Centre			Office No. 12 Pune - 41 64 E-mail :	MED'S & 13, Bramha Est 1 048. Tel.: 020 - 1 78 3983 to 6478 3 themedsinn@yal andsource.com/th	ate, Kondhwa, 2683 6633 999 100.com
Reg. No. : 0005520				Dated on	: 27/02/2023	08:56 am
-	IT DATTATRAY	37 Years /	Male	Report Date	: 28/02/2023	
Ref. By : medwheel ins	surance			P.No	: 44851	
]		HAEMATO	OLOGY			
TEST(S)		RESULT(S)	UNITS	REFEREN	NCE RANGE	
Blood Group	:	"O" Rh Positive				
ESR (Westergren"s	Method)	10	mm after 1st hour			
GLYCOSYLATED H	EMOGLOBIN	<u>(HbA 1c)</u>				
Result	:	5.1 %				
Reference Range4.5 - 7.0 %: indicates Normal Result\$\$ 7.0 % - 10.0 %:Indicates fair diabetic control\$\$ 10-20%:Indicates poor diabetic control						
Note: Glucose combi	nes with hemog	globin continuously	and nea	rly irreversib	bly during the	
life-span of the red b		· · · ·	5	0		
proportional to mean		• •			i.	
Reported on Fully Au Sample is reprocessed & r			al II, BIOF	KAD, USA.		
sample is reprocessed & r	eport is commed.					

--- End Of Report ---

Dr. Manish. S. Beri M.D.(Pathology) Reg.No.-74978



Office No. 12 & 13, Bramha Estate, Kondhwa, Pune - 411 048. Tel.: 020 - 2683 6633 6478 3983 to 6478 3999 E-mail : themedsinn@yahoo.com www.seekandsource.com/themed'sinn

Report Date : 28/02/2023 09:42 am

:27/02/2023 08:56 am

Reg. No. : 0005520

Name : MR RAVIKANT DATTATRAY DHERE Ref. By : medwheel insurance 37 Years / Male

P.No : 44851

Dated on

	BIOCHEMISTRY			
<u>TEST(S)</u>	<u>RESULT(S)</u>	<u>UNITS</u>	REFERENCE RANGE	
BUN	<u>.</u> 11.8	mg / dl	10-20	
<u> Plasma Glucose - Fasting</u>				
Result	<u>.</u> 90	mg/dl	70-110	
Urine Sugar(F)	<u>i</u> nil			
<u> Plasma Glucose - Post - Prandial</u>				
Result	<u>.</u> 100	mg/dl	70-160	
Urine Sugar(PP)	<u> </u>			

LIPID PROFILE			
LIPID PROFILE			
Serum Appearance	: Clear		Clear
S. Cholesterol	<u>.</u> 138	mg/dl	125-225
S. Triglycerides	<u>:</u> 69	mg/dl	25-160
HDL Cholesterol	: 39	mg/dl	30-70
LDL Cholesterol	<u>.</u> 85.2	mg/dl	85-150
VLDL Cholesterol	<u>.</u> 13.8	mg/dl	7-35
LDLC/HDLC RATIO	: 2.18		2.5-3.5
TC/HDLC RATIO	: 1.77		3.0-5.0
S.Cholesterol/HDLC Ratio	<u>.</u> 3.54		0.0-4.5
LIVER FUNCTION TEST			
Bilirubin- Total	: 0.85	mg%	0.0-1.2
Bilirubin- Direct	: 0.43	mg%	0.0-0.8
Bilirubin- Indirect	: 0.42	mg%	0.1-1.0
SGPT	: 38.4	IU/L	5-40
SGOT	: 55.3	IU/L	8-37
Alkaline Phosphatase	: 158	IU/L	40-360
Total Protein	: 7.0	gm/dl	5-8
Albumin	: 3.5	gm/dl	3.5-5.0
Globulin	: 3.5	gm/dl	2.3-3.5
Gamma GT	: 30.2	IU/L	4-60

An ISO 9001:2008 Certified Centre		Office No. 12 Pune - 41 64 E-mail :	MED'S INN & 13, Bramha Estate, Kondhwa, 1 048. Tel.: 020 - 2683 6633 78 3983 to 6478 3999 themedsinn@yahoo.com andsource.com/themed'sinn
Reg. No. : 0005520			: 27/02/2023 08:56 am
Name : MR RAVIKANT DATTATRAY DHERE	37 Years / Male	Report Date	: 28/02/2023 09:42 am
Ref. By : medwheel insurance		P.No	: 44851

Serum Creatinine	<u>.</u> 0.82	mg/dl	0.6-1.2
Serum Uric Acid	: 8.6	mg/dl	3.5-7.0

BUN/Creatinine Ratio : 14.4

Processed by Fully Automated Aspen Biochemistry Analyzer AD-300 Plus

Sample is reprocessed & report is confirmed.

--- End Of Report ---

Dr. Manish. S. Beri M.D.(Pathology) Reg.No.-74978



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Report Date : 28/02/2023 09:42 am

: 27/02/2023 08:56 am

Reg. No. : 0005520

Ref. By

Name : MR RAVIKANT DATTATRAY DHERE

: medwheel insurance

37 Years / Male

P.No

Dated on

: 44851

	ENDOCRINOLOGY			
TEST(S)	RESULT(S)	<u>UNITS</u>	REFERENCE RANGE	
THYROID FUNCTION TEST				
Triiodothyronine (T3)	<u>:</u> 1.0	ng/ml	0.79-1.58	
Thyroxine (T4)	: 5.6	µgm/dl	4.0-11.0	
Thyroid stimulating hormone (TSH)	: 2.1	µIU/ml	0.40-5.5	

Reported on Fully Automated AIA - 600 TOSOH, Japan.

Note Three common ways in which there may be inadequate amounts of the thyroid hormone for normal metabolism. 1. Primary hypothyroidism, in which there is a raised TSH and a low T4 and low T3. This is due to failure of the thyroid gland, possibly due to autoantibody disease, possibly due to toxic stress or possibly due to iodine deficienc 2. The second, the most common cause of thyroid failure, occurs at the pituitary level. In this condition there is inadequate thyroid stimulating hormone (TSH) produced from the pituitary and so one tends to see low or normal TSH, low T4s and variable T3s. This condition is most common in many patients with chronic fatigue syndrome, where there is a general suppression of the hypothalamic-pituitary-adrenal axis. 3. The third type of under-functioning is due to poor conversion of T4 to T3. This requires enzymes and co-factors, in particular selenium, zinc and iron. In this condition there are normal or possibly slightly raised levels of TSH, normal levels of T4 but low levels of T3. This requires micronutrients and also T3 to correct. Therefore, in any patient suspecting of thyroid problem routinely TSH, a Free T4 and a Free T3 are also advisable. Any patients who are taking T3 as part of their thyroid supplement need to have their T3 levels monitored as well as T4. T3 is much more quickly metabolized than T4 and blood tests should be done between 4-6 hours after their morning dose. The Guideline for pregnancy reference ranges for Total T3,T4, TSH Level in pregnancy

Т3	T4	TSH
First Trimester 0.86-1.87	6.60-12.4	0.30-4.50
2nd Trimester 1.0-2.60	6.60-15.5	0.50-4.60
3rd Trimester 1.0-2.60	6.60-15.5	0.80-5.20
The guideline for age relat	ed reference ra	nges for T3,T4,& TSH
Т3	T4	TSH
Cord Blood 0.30-0.70 1-3	3 day 8.2-19.9	Birth-4 day:1.0-38.9
New Born 0.75-2.60 1 V	Week 6.0-15.9	2-20 Week 1.7-9.1
1-5 Years 1.0-2.60 1-12	Months 6.8-14	.9 20 Week-20 years 0.7-6.4
5-10 Years 0.90-2.40 1-3	Years 6.8-13.5	
10-15 Years 0.80-2.10 3-1	0 Years 5.5-12	.8

Processed by Fully Automated ELISA Analyser

Sample is reprocessed & report is confirmed.

--- End Of Report ---

Dr. Manish. S. Beri M.D.(Pathology) Reg.No.-74978



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Reg. No. : 0005520

: MR RAVIKANT DATTATRAY Name DHERE

THE MED'S INN

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	Dated on	:27/02/2023	08:56 am
•	Report Date	:28/02/2023	09:42 am

Ref. By : medwheel insurance

37 Years / Male

: 44851 P.No

	CLINICAL PATHOLOGY		
<u>TEST(S)</u>	RESULT(S)	<u>UNITS</u>	REFERENCE RANGE
URINE ANALYSIS REPORT			
Physical Examination			
Colour	: Pale Yellow		
Quantity	: 20 ml		
Appearance	. Clear		
Deposits	Absent		
Specific gravity	<u>:</u> 1.024		1.016-1.026
Reaction (pH)	: 5.6		4.8-7.6
	Acidic		
Chemical Examination			A1 /
Proteins	Absent		Absent
SUGAR	: Absent		Absent
Bile Salts	. Absent		Absent
Bile Pigments	. Absent		Absent
Urobilinogen	: Normal		Absent
Microscopic Examination			
RBC	Absent		Absent / hpf
PUS(WBC) Cells	: 2 - 4		Absent / hpf
Epithelial Cells	· occasional		Absent / hpf
Casts	Absent		Absent / hpf
Crystals	: Calcium Oxalate	++	Absent / hpf
Special note	Certain Physiological Conditions and Drugs alter the and sugar Values.		

Processed By Automated Urine Analizer URISTAR

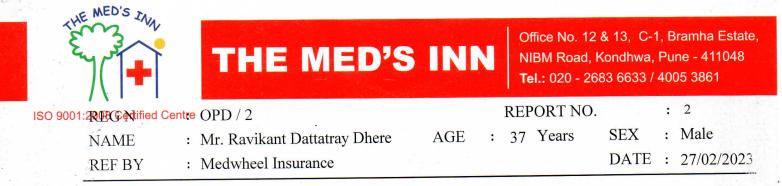
STOOL EXAMINATION

Physical Examination	
Colour	. Brownish
Consistency	: semi solid
Mucus	: Trace
Blood	. Nil
Chemical Examination	
Reaction	. Acidic

An ISO 9001:2008 Certified Centre				Office No. 12 Pune - 41 647 E-mail :	MED'S & 13, Bramha Esta 1 048. Tel.: 020 - 2 78 3983 to 6478 39 themedsinn@yah andsource.com/the	te, Kondhwa, 683 6633 99 po.com
Reg. No. : 0005520				Dated on	: 27/02/2023	08:56 am
Name : MR RAVIKANT DATTATRAY DHERE		37 Years /	Male	Report Date	: 28/02/2023	09:42 am
Ref. By : medwheel insurance				P.No	: 44851	
Occult blood	: Absent (Confi	rmed by Iod	ine meth	od)		
Fat Globules	: ++	5		,		
Microscopic Examination						
RBC	: Absent	Į	/hpf			
Pus cells	: 4 - 6		/hpf			
Epithelial cells	. Absent	I				
OVA/LARVAE	. Absent	I				
Cysts	: absent					
Veg. cells / Fibres	: ++		/hpf			
Bacteria	: ++					
Sample is reprocessed & report is confirmed.						

--- End Of Report ---

Dr. Manish. S. Beri M.D.(Pathology) Reg.No.-74978



Ultrasound Abdomen and Pelvis

Liver : Normal in position shape and shows diffuse bright Echotexture s/o Grade I fatty liver. Span: 12.0 cms No IHBR dilatation seen. No focal lesion seen

Spleen: Normal position & echopattern.

Pancreas: Head, body and tail well visualized, normal echo texture and size. No dilatation of main pancreatic duct or focal lesion seen.

Gall bladder: Contracted, no obvious calculus noted.

Common duct and Portal vein: Normal.

Kidneys:Size:Right kidney: 10.0 x 4.4 cms

Normal position, shape, echo pattern and corticomedullary differentiation seen. No calculi, hydronephrosis or focal parenchymal lesion seen. Moves freely with respiration.

Left kidney: 10.7 x 4.3 cms

Normal position, shape, echo pattern and corticomedullary differentiation seen. No hydronephrosis or focal parenchymal lesion seen. Evidence of 4 mm calculus noted in lower pole calyx

Retroperitoneum: Not visualised due to bowel gas.

Urinary bladder: Well distended and normal in shape. Wall thickness is within normal limits. No calculus, mural lesion or diverticulum seen. Prevoid volume: 200 cc Post void residue: 10 cc (Insignificant postvoid residue)

Prostate: Normal in echopattern and shape. No focal lesion seen.

IMPRESSION: 1. Grade I Fatty Liver 2. Left Non Obstructive Renal Calculus

Suggest: Clinical pathological correlation.



THE MEDs INN

Office No.12 and 13,1st floor,C-1,Brahma Estate, Above Apolo Medical,Kondhwa Khurd Pune - 411048

Phone No: 02026836633

Patient ID: 2023020145 Name: Mr. Ravikant Dattatray Dhere Sex: M Date: 27-Feb-2023

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Ref By: SELF Study: Abdomen Pelvis





Office No. 12 & 13, C-1, Bramha Estate, NIBM Road, Kondhwa, Pune - 411048 **Tel.:** 020 - 2683 6633 / 4005 3861

ISO 9001:2008 Certified Centre

		DAT!	
Reffered By	: medwheel insurance	Center Name : MAIN LAB	
Age & Sex	: 37 Year Male	Report Date	00.50 AN
Patient ID	: 0005520		
Patient Name	: Mr ravikant dattatray dhere		
		Registration Date : 27/02/2023 08:56 AN	18.56 AM

Radiograph: Chest PA View:

Bony cage and soft tissues are normal.

Trachea is central in position.

Costophrenic and cardiophrenic angles are clear.

Both domes of the diaphragm are normal in position and contour.

Lung fields are clear.

Cardia is normal in position, shape and size.

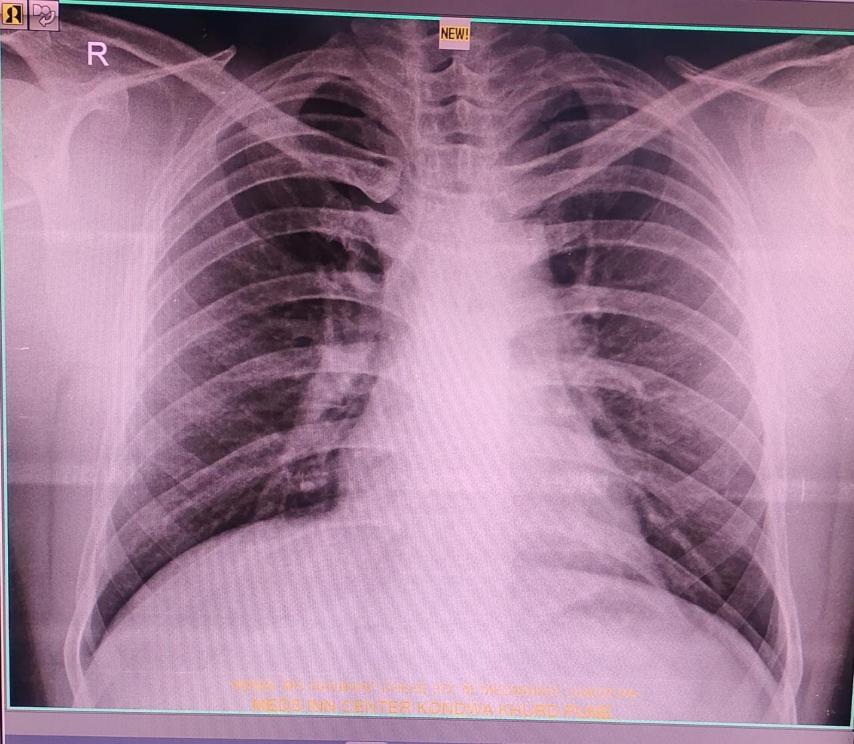
Both hila are normal in position, shape, size and density.

Pulmonary vasculature is normal.

Impression : Normal chest.

Dr. Trupti Jagdale **Consultant Radiologist**







Dr. Manish S. Beri (M.D.) Consultant Pathology

Date : 27/02/2023

PUNE.

FITNESS CERTIFICATE

This is to certify that I have examined Mr. Ravikant. Dhere, Aged 37Yrs, Male.

- $\blacktriangleright \qquad \text{Height} = 163 \text{cms}$
- Weight = 73Kgs
- **BP** = 120/74 mmHg
- Pulse = 89/mins
- **BMI** = 27.5
- General examination = W.N.L
- Systemic examination
 - R.S. clear
 - C.V.S s1 s2
 - P/A soft
 - C.N.S N.A.D.

> EYE EXAMINATION:-

- Left Eye 6/6
- Right Eye 6/6

The client is physically and medically fit.

THE MED'S INN Multi Speciality Polyclinic And Diagnostic Center C1 Off. No. 12 & 13 Bramha Estate Kondhwa, Pune-411048. 2020-26836633, 240053861 ISO-9001-2008

WITHIN NORMAL LIMITS

Dr. Manish Beri

(MD) Pathologist Reg No - 74978

Dr. MANISH S. BERI M.D. (PATHOLOGY)

Office No. 12 & 13, C-1, Bramha Estate, NIBM Road, Kondhwa, Pune - 411048 **Tel.:** 020 - 2683 6633 / 4005 3861 Office No. 305-306, Marvel San**Risg. No. - 74978** Mohammad Wadi Road, Undri, Pune - 411060 **Mob.:** 9850078603 / 8530097492

E-mail : manishberi2009@yahoo.com | Website : www.themedsinn.com | Timings : Monday to Saturday - 8 am to 8 pm

Concept Integrations

SUMMARY REPORT

B

Mr. Ravikant	Mr. Ravikant Dhere Male 37 yrs 73 Kg 163 cms		
Referred By	: Mediweel		
Indications			
Medications			
Results	: Protocol : BRUCE Maximum Heart Rate : 184 bpm 100% of max predicted 183 bpm in Recovery. at StageTime 07:42.	bpm in Recovery.	
	Criteria of -1.5mm with horizantal slope was not reached. Maximum time spent in Exercise phase was 07:42. Maximum Blood Pressure : 140 / 92 mm Hg.		
	Maximum workload : 8.7 Mets.		
•	Total Distance Covered : 0.52 Km		
	Termination criteria : Fatigue	>	*
Impressions	: Chronotropic Response.	<u> </u>	
	Good Exercise Tolerance. Haemodynamic Response.	and the second se	
		Dr. MANISH S. BERI	THE MED'S INN
	No ST-T Changes, No Arrhythmias. Normal HR and BP Response.	M.D. (PATHOLOGY) Reg. No 74978	Multi Speciality Polyclinic And Diagnostic Center
			C1Off.No.12 & 13 Brannha Estate Kondhwa Duma-Antonestate
	Test Negative For Exercise inducible Ischemia.		C20-26836833, 240053861 ISO-9001-2008
Cardio-ST v1.	Cardio-ST v1.70 © Concept Integrations (I) Pvt. Ltd.		Confirmed By : The Meds Inn

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