



Ph: 9235400973,

CIN: U85110DL2003PLC308206



Patient Name : Mr.SHIVAKANT KAUSHAL Registered On : 24/Feb/2023 11:37:29 Age/Gender : 29 Y 6 M 24 D /M Collected : 24/Feb/2023 11:46:34 UHID/MR NO : CHFD.0000233591 Received : 24/Feb/2023 12:00:55 Visit ID : CHFD0576262223 Reported : 24/Feb/2023 14:37:46

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

# DEPARTMENT OF HAEM ATOLOGY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

Blood Group (ABO & Rh typing) \*, Blood

**Blood Group** 

AB

Rh (Anti-D)

**POSITIVE** 

Complete Blood Count (CBC) \*, Whole Blood

Haemoglobin 14.40 g/dl 1 Day- 14.5-22.5 g/dl

1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5

g/dl

2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0

g/dl

Male- 13.5-17.5 g/dl

Female- 12.0-15.5 g/dl

52.00	%	55-70	ELECTRONIC IMPEDANCE
43.00	%	25-40	ELECTRONIC IMPEDANCE
1.00	%	3-5	ELECTRONIC IMPEDANCE
4.00	%	1-6	ELECTRONIC IMPEDANCE
0.00	%	<1	ELECTRONIC IMPEDANCE
12.00	Mm for 1st hr.		
6.00	Mm for 1st hr.	< 9	
43.50	%	40-54	
2.05	LACS/cu mm	1.5-4.0	ELECTRONIC
			IMPEDANCE/MICROSCOPIC
16.00	fL	9-17	ELECTRONIC IMPEDANCE
33.00	%	35-60	ELECTRONIC IMPEDANCE
0.22	%	0.108-0.282	ELECTRONIC IMPEDANCE
10.80	fL	6.5-12.0	ELECTRONIC IMPEDANCE
4.64	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
	43.00 1.00 4.00 0.00 12.00 6.00 43.50 2.05 16.00 33.00 0.22 10.80	43.00 % 1.00 % 4.00 % 0.00 %  12.00 Mm for 1st hr. 6.00 Mm for 1st hr. 43.50 %  2.05 LACS/cu mm  16.00 fL 33.00 % 0.22 % 10.80 fL	43.00 % 25-40 1.00 % 3-5 4.00 % 1-6 0.00 % <1  12.00 Mm for 1st hr. 6.00 Mm for 1st hr. <9 43.50 % 40-54  2.05 LACS/cu mm 1.5-4.0  16.00 fL 9-17 33.00 % 35-60 0.22 % 0.108-0.282 10.80 fL 6.5-12.0









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# DEPARTMENT OF HABMATOLOGY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	93.60	fl	80-100	CALCULATED PARAMETER
MCH	31.10	pg	28-35	CALCULATED PARAMETER
MCHC	33.20	%	30-38	CALCULATED PARAMETER
RDW-CV	13.00	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	47.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,380.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	260.00	/cu mm	40-440	









Add: Mukut Complex, Rekabganj,Faizabad Ph: 9235400973,

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Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

# DEPARTMENT OF BIOCHEMISTRY

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE FASTING, Plasma				
Glucose Fasting	100.53	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

# **Interpretation:**

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.

Glucose PP	161.84	mg/dl	<140 Normal	GOD POD
Sample:Plasma After Meal			140-199 Pre-diabetes	
			>200 Diabetes	

# **Interpretation:**

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.









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Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

# DEPARTMENT OF BIOCHEMISTRY

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	

# GLYCOSYLATED HAEM OGLOBIN (HBA1C) \*\*, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	4.90	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	30.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	94	mg/dl	

# **Interpretation:**

# NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	<b>Degree of Glucose Control Unit</b>
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

<sup>\*</sup>High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

N.B.: Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

# **Clinical Implications:**

- \*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.
- \*With optimal control, the HbA 1c moves toward normal levels.
- \*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated \*Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy





<sup>\*\*</sup>Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.





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# DEPARTMENT OF BIOCHEMISTRY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

c. Alcohol toxicity d. Lead toxicity



Dr. Anupam Singh (MBBS MD Pathology)





<sup>\*</sup>Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

<sup>\*</sup>Pregnancy d. chronic renal failure. Interfering Factors:

<sup>\*</sup>Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.





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# DEPARTMENT OF BIOCHEMISTRY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) Sample:Serum	8.14	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	1.17	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid Sample:Serum	6.87	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT) Gamma GT (GGT) Protein Albumin Globulin A:G Ratio Alkaline Phosphatase (Total) Bilirubin (Total) Bilirubin (Direct) Bilirubin (Indirect)  LIPID PROFILE ( MINI ) * , Serum Cholesterol (Total)	25.64 44.25 13.58 6.24 4.50 1.74 2.59 59.51 0.61 0.27 0.34	U/L U/L gm/dl gm/dl gm/dl U/L mg/dl mg/dl mg/dl	< 35 < 40 11-50 6.2-8.0 3.8-5.4 1.8-3.6 1.1-2.0 42.0-165.0 0.3-1.2 < 0.30 < 0.8  <200 Desirable 200-239 Borderline Hig	IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET B.C.G. CALCULATED CALCULATED IFCC METHOD JENDRASSIK & GROF JENDRASSIK & GROF JENDRASSIK & GROF
HDL Cholesterol (Good Cholesterol) LDL Cholesterol (Bad Cholesterol)  VLDL Triglycerides	64.54 115 16.04 80.19	mg/dl mg/dl mg/dl mg/dl	> 240 High 30-70 < 100 Optimal 100-129 Nr. Optimal/Above Optima 130-159 Borderline Hig 160-189 High > 190 Very High 10-33 < 150 Normal 150-199 Borderline Hig 200-499 High	DIRECT ENZYMATIC CALCULATED  al gh  CALCULATED  GPO-PAP









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Ref Doctor

Registered On

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# DEPARTMENT OF BIOCHEMISTRY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Unit Bio. Ref. Interval Test Name Result Method

>500 Very High











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Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

# DEPARTM ENT OF CLINICAL PATHOLOGY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
JRINE EXAMINATION, ROUTINE*	. Urine			
Color	PALE YELLOW			
Specific Gravity	1.015			
Reaction PH	Acidic ( 5.0 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
rioteili	ADSLINI	, ilig /o	10-40 (+)	DIFSTICK
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
			> 2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobil <mark>inogen(1:20 dilution)</mark>	ABSENT			
Microscopic Examination:				
Epithelial cells	OCCASIONAL			MICROSCOPIC
				EXAMINATION
Pus cells ·	ABSENT			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
UGAR, FASTING STAGE*, Urine				
Sugar, Fasting stage	ABSENT	gms%		

# **Interpretation:**

(+) < 0.5

(++) 0.5-1.0

(+++) 1-2

(++++) > 2









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# DEPARTMENT OF CLINICAL PATHOLOGY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

SUGAR, PP STAGE\*, Urine

Sugar, PP Stage

**ABSENT** 

# **Interpretation:**

(+) < 0.5 gms%

(++) 0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%









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Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

# DEPARTMENT OF IMMUNOLOGY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL ** , Serum				
·	111.62		04.64.204.7	CLIA
T3, Total (tri-iodothyronine)	114.63	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	8.50	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	4.65	μIU/mL	0.27 - 5.5	CLIA
		,		
Interpretation:				
· ·		0.3-4.5 μIU/r	nL First Trimeste	er
		0.5-4.6 μIU/r		ester
		0.8-5.2 μIU/n		
		0.5-8.9 µIU/r		55-87 Years
		0.7-27 µIU/r		28-36 Week
		2.3-13.2 µIU/n		
		0.7-64 μIU/n		
			mL Child	0-4 Days
		1.7-9.1 μIU/r		2-20 Week
		1.7-9.1 μ10/1	IIL CIIIU	Z-ZU WEEK

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- **4)** Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- **5**) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- **6)** In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- **8**) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

Bring

Dr. Anupam Singh (MBBS MD Pathology)



Home Sample Collection 1800-419-0002

# CHANDAN DIAGNOSTIC CENTRE



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# DEPARTMENT OF X-RAY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

## X-RAY DIGITAL CHEST PA \*

# X-RAY REPORT (300 mA COMPUTERISED UNIT SPOT FILM DEVICE) CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

# **IMPRESSION:**

NO SIGNIFICANT RADIOLOGICAL ABNORMALITY SEEN ON PRESENT STUDY.

Adv: clinico-pathological correlation and further evaluation.

Manufuda Sift







# CHANDAN DIAGNOSTIC CENTRE



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Visit ID : 24/Feb/2023 13:53:49 : CHFD0576262223 Reported

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# DEPARTMENT OF ULTRASOUND

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

# ULTRASOUND WHOLE ABDOM EN (UPPER & LOWER) \*

# WHOLE ABDOMEN ULTRASONOGRAPHY REPORT

## LIVER

• The liver is normal in size 13.33 cm in longitudinal span and has a normal homogenous echotexture. No focal lesion is seen.

# PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- The portal vein is not dilated.
- Porta hepatis is normal.

# BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct is not dilated.
- The gall bladder is normal in size. GB Wall thicknes is normal.

# **PANCREAS**

• The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

# GREAT VESSELS

• Great vessels are normal.

# KIDNEYS

- Both the kidneys are normal in size and cortical echotexture.
- The collecting system of both the kidneys is normal and cortico-medullary demarcation is clear.

# SPLEEN

• The spleen is normal in size and has a normal homogenous echo-texture.

# LYMPH NODES

• No pre- or para - aortic lymph node mass is seen.

# RETROPERITONEUM

• Retroperitoneum is free.

# ILIAC FOSSAE & PERITONEUM

• Scan over the iliac fossae does not reveal any fluid collection or mass.









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# DEPARTMENT OF ULTRASOUND

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

• No free fluid is noted in peritoneal cavity.

# **URETERS**

- The upper parts of both the ureters are normal.
- Thevesico ureteric junctions are normal.

# URINARY BLADDER

• The urinary bladder is normal.

# PROSTATE

• The Prostate gland is normal in size.

# FINAL IMPRESSION:-

No significant abnormality is seen in present study.

Adv: Clinico-pathological correlation and follow-up.

\*\*\* End Of Report \*\*\*

(\*\*) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG



Dr. R. B. Varshney Ultrasonologist

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \*

\*Facilities Available at Select Location









# Re: Health Check up Booking Confirmed Request(bobE30536), Package Code-PKG10000238, Beneficiary Code-47677

anurag sri <anurag.idc@gmail.com>

23 February 2023 at 16:53

To: Mediwheel <wellness@mediwheel.in>, cdc faizabad1 <cdcfaizabad1@gmail.com> Cc: mediwheelwellness@gmail.com

Confirmed

Pack code 2613

On Thu, Feb 23, 2023 at 3:58 PM Mediwheel <wellness@mediwheel.in> wrote:



011-41195959 Email:wellness@mediwheel.in

Phivakens kayshal

nostic

#### Hi Chandan Healthcare Limited,

Diagnostic/Hospital Location : Mukut Complex, Rekabganj, City: Faizabad

We have received the confirmation for the following booking.

Beneficiary Name: PKG10000238

Beneficiary Name: MR. KAUSHAL SHIVAKANT

Member Age : 27
Member Gender : Male

Member Relation : Employee

Package Name : Full Body Health Checkup Male Below 40

Location : DHARAMGANJ,Uttar Pradesh-224225

 Contact Details
 : 8960145491

 Booking Date
 : 22-02-2023

 Appointment Date
 : 24-02-2023

# Instructions to undergo Health Check:

- 1. 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.
- 3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
- 4. Please bring all your medical prescriptions and previous health medical records with you.
- 5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

## For Women:

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

We request you to facilitate the employee on priority.

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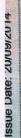
Good Day

Please find the attachment



# भारत सरकार Government of India







शिवाकान्त कौशल Shivakant Kaushal जन्म तिथि / DOB: 01/08/1993 प्रष / MALE



3652 6541 1923

मेरा आधार, मेरी पहचान





# भारतीय विशिष्ट पहुंचान प्राधिकरण Unique Identification Authority of India

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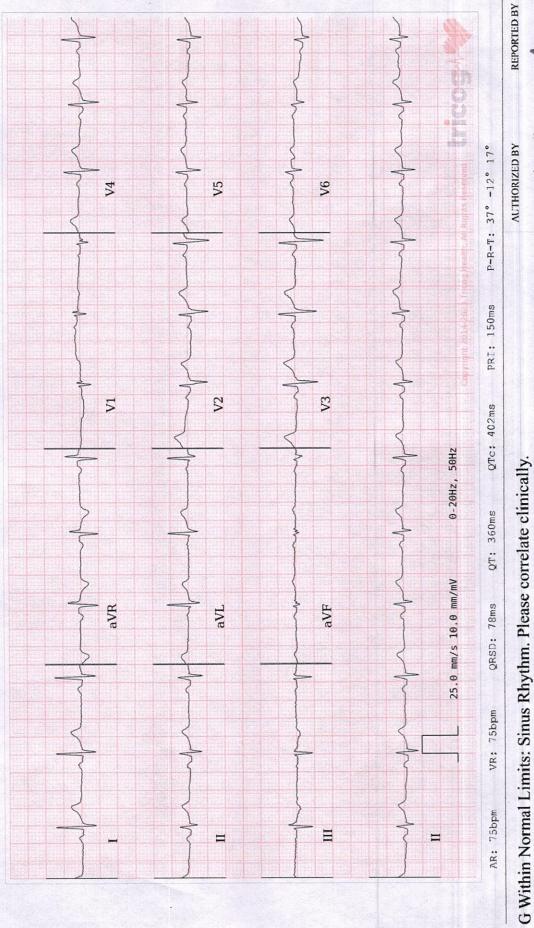
# Chandan Diagnostic

Date and Time: 24th Feb 23 12:28 PM



29/Male Age / Gender:

Mr.SHIVAKANT KAUSHAL CHFD0576262223 Patient Name: Patient ID:



Dr. Charit MD, DM; Cardiology

34384

63382

mer. Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.