

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,

Mediwheel (Arcofemi Healthcare Limited)

Helpline number: 011-41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. KHURANA GUNJAN
EC NO.	97966
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	GHAZIABAD,GOVINDPURAM
BIRTHDATE	10-07-1978
PROPOSED DATE OF HEALTH	14-10-2023
CHECKUP	
BOOKING REFERENCE NO.	23D97966100071588E

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 **09-10-2023** till **31-03-2024** 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 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 Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE		
CBC	CBC		
ESR	ESR		
Blood Group & RH Factor	Blood Group & RH Factor		
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting		
Blood and Urine Sugar PP	Blood and Urine Sugar PP		
Stool Routine	Stool Routine		
Lipid Profile	Lipid Profile		
Total Cholesterol	Total Cholesterol		
HDL	HDL		
LDL	LDL		
VLDL	VLDL		
Triglycerides	Triglycerides		
HDL / LDL ratio	HDL / LDL ratio		
Liver Profile	Liver Profile		
AST	AST		
ALT	ALT		
GGT	GGT		
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)		
ALP	ALP		
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)		
Kidney Profile	Kidney Profile		
Serum creatinine	Serum creatinine		
Blood Urea Nitrogen	Blood Urea Nitrogen		
Uric Acid	Uric Acid		
HBA1C	HBA1C		
Routine urine analysis	Routine urine analysis		
USG Whole Abdomen	USG Whole Abdomen		
General Tests	General Tests		
X Ray Chest	X Ray Chest		
ECG	ECG		
2D/3D ECHO / TMT	2D/3D ECHO / TMT		
Stress Test	Thyroid Profile (T3, T4, TSH)		
PSA Male (above 40 years)	Mammography (above 40 years)		
	and Pap Smear (above 30 years).		
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation		
Dental Check-up consultation	Physician Consultation		
Physician Consultation	Eye Check-up consultation		
Eye Check-up consultation	Skin/ENT consultation		
Skin/ENT consultation	Gynaec Consultation		

1 12 1



प्रति.

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MS. KHURANA GUNJAN
क.कू.संख्या	97966
पदनाम	BRANCH OPERATIONS
कार्य का स्थान	GHAZIABAD,GOVINDPURAM
जन्म की तारीख	10-07-1978
स्वास्थ्य जांच की प्रस्तावित तारीख	14-10-2023
बुकिंग संदर्भ सं.	23D97966100071588E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रित के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 09-10-2023 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोक्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवाँइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-(मुख्य महाप्रबंधक) मानव संसाधन प्रबंधन विभाग बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)

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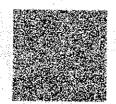




CHECKLE BREAK ACTION SET OF SET OF SET OF Unique Identification Authority of India

नामांकन ऋम/ Enrolment No.: 0728/14001/00245

গজৰ জনেন Gunjan Khurana C/O: Anii Chaturbed KB-342 B Block Chaziabad Graziabad Uttar Pradesh - 201002 852703030B



आपका आधार क्रमांक / Your Aadhaar No. :

8896 6096 0589 VID: 9197 9441 2391 2214

मेरा आधार, मेरी पहचान



श्रापटन सम्बद्धार Government of India



મુંબન વ્યુશના Qunjan Kharana चन्म लिबि/DOB: 10/07/1978 महिला/ FEMALE

8896 6096 0589

VID: 9197 9441 2391 2214 मेरा आधार मेरी पहचान





- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- 🛎 सुरक्षित QR कोड / ऑफलाइन XML/ऑनलाइन ऑध्रेटिकेशन से पहचान प्रमाणित करें।

सम्बना

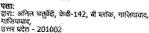
🛎 यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

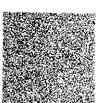
- * Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.
 - अधार देश घर में मान्य है ।
 - आधार कई सरकारी और गैर सरकारी सेवाओं को पाना आसान बनाता है।
 - अध्यार में मोबाइल नंबर और ईमेल ID अपडेट रखें।
 - * आधार को अपने स्मार्ट फोन पर रखें mAadhaar App
 - Aadhaar is valid throughout the country.
 - Audhear helps you avail various Government and non-Government services easily.
 - Keep your mobile number & email ID updated in Aadhaar.
 - Carry Aadhaar in your smart phone use mAadhaar App.



Mixelia falanc upan untili co Unique Identification Authority of India



Address: C/O: Anil Chaturbedi, KB-142, B Block, Ghaziabad, Ghaziabad, Ultar Pradesh - 201002



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VID: 9197 9441 2391 2214

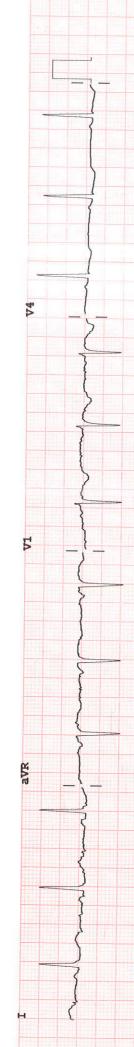
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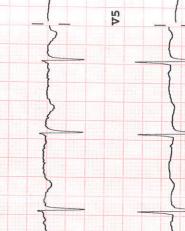
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- ABNORMAL ECG -

Unconfirmed Diagnosis

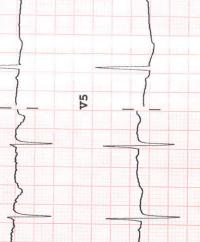


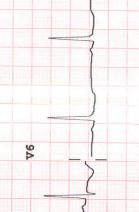


Δ2

aVL

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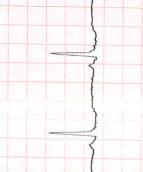


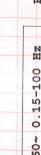
V3

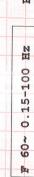
aVF

III

II







Chest: 10.0 mm/mV

Limb: 10 mm/mV

Speed: 25 mm/sec

Dev:



CI P?





INVESTIGATION REPORT

Patient Name : GUNJAN KHURANA

Location

Ghaziabad

Age/Sex

45Year(s)/Female

Visit No

: V0000000001-GHZB

MRN No

10382154

Order Date

:14/10/2023

Ref. Doctor

HCP

Report Date

:14/10/2023

Echocardiography

Final Interpretation

1. No RWMA, LVEF=60%.

2. Normal cardiac chambers.

- 3. Grade I LV diastolic dysfunction (E=A).
- 4. No MR, No AR.
- 5. Trace TR, Normal PASP.
- 6. No intracardiac clot/mass/pericardial pathology.
- 7. IVC normal.

Chambers & valves:

- Left Ventricle: It is normal sized.
- **Left Atrium:** It is normal sized.
- Right Atrium: It is normal sized.
- Right Ventricle: It is normal sized.
- Aortic Valve: It appears normal.
- Mitral Valve: Opens normally. Subvalvular apparatus appear normal.
- **Tricuspid Valve:** It appears normal.
- <u>Pulmonic Valve:</u> It appears normal.
- Main Pulmonary artery & its branches: Appear normal.
- Pericardium: There is no pericardial effusion.

Description:

¬LV is normal size with normal contractility.

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P: 0120-3535353

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017

P +91 80 4936 0300 E info@manihospitals.com www.manipalhospitals.com





INVESTIGATION REPORT

Patient Name: GUNJAN KHURANA

Location

Ghaziabad

Age/Sex

45Year(s)/Female

Visit No

: V0000000001-GHZB

10382154

Order Date

14/10/2023

Ref. Doctor : HCP

Report Date

14/10/2023

Echocardiography

Measurements (mm):

	Observed values	Normal values
Aortic root diameter	33	20-36 (22mm/M ²)
Aortic valve opening	19	15-26
Left atrium size	34	19-40

	End Diastole	End Systole	Normal Values
Left ventricle size	40	- 24	(ED=37-56:Es=22-40)
Interventricular septum	10	13	(ED=6-12)
Posterior wall thickness	09	12	(ED=5-10)

LV Ejection Fraction (%)	60%	55%-80%
HR		

Color & Doppler evaluation

Valve		Velocity(cm/s)	Regurgitation
Mitral	E=A	DT-	Nil
Aortic	153	14	Nil
Tricuspid	58		Trace
Pulmonary	96		Nil

Dr. Bhupendra Singh

MD, DM (CARDIOLOGY),FACC Sr. Consultant Cardiology

Dr. Abhishek Singh

MD, DNB (CARDIOLOGY), MNAMS
Sr. Consultant Cardiology

Dr. Sudhanshu Mishra

Manipal Hospital, Ghaziabad

Cardiology Registrar

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P: 0120-3535353

Page 2 of 2

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

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e Medical Analitable in medical ed Office: Sector-6, Dwarka, New Delhi 110 075

Ghaziabad - 201002

Ph. +91 120 353 5353, M. 88609 45566 www.manipalhospitals.com

Department Of Laboratory Medicine

LABORATORY REPORT

Name

: GUNJAN KHURANA

Age

45 Yr(s) Sex :Female

Registration No

: MH010382154

Lab No

32231005965

Patient Episode

: R03000055146

Collection Date:

14 Oct 2023 19:20

Referred By

: MANIPAL HOSPITALS GHAZIABAD

Reporting Date:

15 Oct 2023 18:04

Receiving Date

: 14 Oct 2023 19:41

BIOCHEMISTRY

THYROID PROFILE, Serum

Specimen Type : Serum

T3 - Triiodothyronine (ECLIA)

0.844

ng/ml

[0.800 - 2.040][5.500-11.000]

T4 - Thyroxine (ECLIA) Thyroid Stimulating Hormone (ECLIA)

6.620 4.890 # μg/dl µIU/mL

[0.340-4.250]

t Trimester: 0.6 - 3.4 2nd Trimester: 0.37 - 3.6 micIU/mL 3rd Trimester: 0.38 - 4.04 micIU/mL

Note: TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm. Factors such as change of seasons hormonal fluctuations, Ca or Fe supplements, high fibre diet, stress and illness affect TSH results.

* References ranges recommended by the American Thyroid Association

1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128

2) http://www.thyroid-info.com/articles/tsh-fluctuating.html

Page 1 of 1

----END OF REPORT---

Dr. Neelam Singal

CONSULTANT BIOCHEMISTRY





LABORATORY REPORT

Name

GUNJAN KHURANA

Age : 45 Yr(s) Sex :Female

Registration No

: MH010382154

Lab No : 202310002981

Patient Episode

: H18000001325

ab 110 . 20231000296

Collection Date:

Referred By

H18000001325

14 Oct 2023 09:20

Receiving Date

: HEALTH CHECK MGD : 14 Oct 2023 09:20 **Reporting Date:** 14 Oct 2023 11:32

HAEMATOLOGY

TEST	RESULT	UNIT BIOLOGI	CAL REFERENCE INTERVA
COMPLETE BLOOD COUNT (AUTOMATE	D)	SPECIMEN-EDTA Whol	e Blood
RBC COUNT (IMPEDENCE)	3.96	millions/cumm	[3.80-4.80]
HEMOGLOBIN	9.5 #	g/dl	[12.0-15.0]
Method:cyanide free SLS-coloring	M-10-02-04-1		
HEMATOCRIT (CALCULATED)	32.5 #	8	[36.0-46.0]
MCV (DERIVED)	82.1 #	fL	[83.0-101.0]
MCH (CALCULATED)	24.0 #	pg	[25.0-32.0]
MCHC (CALCULATED)	29.2 #	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	17.7 #	8	[11.6-14.0]
Platelet count	242	\times 10 3 cells/cumm	[150-410]
Method: Electrical Impedance	11 0		
MPV (DERIVED)	11.2		
WBC COUNT(TC) (IMPEDENCE) DIFFERENTIAL COUNT	6.73	\times 10 3 cells/cumm	[4.00-10.00]
(VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	64.0	96	[40.0-80.0]
Lymphocytes	26.0	%	[20.0-40.0]
Monocytes	8.0	%	[2.0-10.0]
Eosinophils	2.0	8	[1.0-6.0]
Basophils	0.0	8	[0.0-2.0]
J			
ESR	40.0 #	mm/1sthour	[0.

Page 2 of 9





14 Oct 2023 11:37

Collection Date:

Name **GUNJAN KHURANA** Age 45 Yr(s) Sex: Female

Registration No MH010382154 Lab No 202310002981

Referred By HEALTH CHECK MGD Reporting Date: 14 Oct 2023 16:07

Receiving Date 14 Oct 2023 11:37

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

H18000001325

MACROSCOPIC DESCRIPTION

Patient Episode

Colour PALE YELLOW (Pale Yellow - Yellow)

Appearance CLEAR

Reaction[pH] 7.0 (4.6 - 8.0)

Specific Gravity 1.010 (1.003 - 1.035)

CHEMICAL EXAMINATION

Protein/Albumin Negative (NEGATIVE)

Glucose NIL (NIL)

Ketone Bodies Negative (NEGATIVE) Urobilinogen Normal (NORMAL)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells 2-3/hpf (0-5/hpf)RBC NIL (0-2/hpf)

Epithelial Cells 4-6 /hpf CASTS

NIL Crystals NIL Bacteria NIL

OTHERS NIL

Page 3 of 9





LABORATORY REPORT

Name

GUNJAN KHURANA

Age

45 Yr(s) Sex :Female

Registration No

MH010382154

Lab No

202310002981

Patient Episode

H18000001325

Collection Date:

14 Oct 2023 09:20

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Oct 2023 16:46

Receiving Date

14 Oct 2023 09:20

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVA

Glycosylated Hemoglobin

Specimen: EDTA

Method: HPLC

HbA1c (Glycosylated Hemoglobin)

5.7 #

[0.0-5.6]

As per American Diabetes Association (A HbA1c in %

Non diabetic adults >= 18years <5.7

Prediabetes (At Risk) 5.7-6.4 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

117

mg/dl

Comments : HbAlc provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

Serum LIPID PROFILE

	4.5		
Serum TOTAL CHOLESTEROL Method:Oxidase,esterase, peroxide	209 #	mg/dl	[<200] Moderate risk:200-239
PRIGLYCERIDES (GPO/POD)	100	mg/dl	High risk:>240 [<150] Borderline high:151-199
			High: 200 - 499
HDL- CHOLESTEROL Method: Enzymatic Immunoimhibition	63.0	mg/dl	Very high:>500 [35.0-65.0]
VLDL- CHOLESTEROL (Calculated) CHOLESTEROL, LDL, CALCULATED	20 126.0 #	mg/dl	[0-35] [<120.0]
			Near/

Above optimal-100-129

Borderline High: 130-159 High Risk: 160-189

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LABORATORY REPORT

Name

GUNJAN KHURANA

Age

45 Yr(s) Sex :Female

Registration No

MH010382154

Lab No

202310002981

Patient Episode

: H18000001325

Collection Date:

14 Oct 2023 09:20

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Oct 2023 15:04

Receiving Date

THE

14 Oct 2023 09:20

BIOCHEMISTRY

TEST	R	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVA
T.Chol/HDL.Chol	ratio(Calculated)	3.3		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL	Ratio (Calculated	2.0		<pre><3 Optimal 3-4 Borderline >6 High Risk</pre>

Note:

Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening too for abnormalities in lipids, the results of this tests can identify certain genetic diseas and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

KIDNEY PROFILE

Specimen: Serum				
UREA	22.3	mg/dl	[15.0-40.0]	
Method: GLDH, Kinatic assay		3	[==:0 10.0]	
BUN, BLOOD UREA NITROGEN	10.4	mg/dl	[8.0-20.0]	
Method: Calculated				
CREATININE, SERUM	0.81	mg/dl	[0.70-1.20]	
Method: Jaffe rate-IDMS Standardizat:	ion			
URIC ACID	5.1	mg/dl	[4.0-8.5]	
Method:uricase PAP				
SODIUM, SERUM	134.80 #	mmol/L	[136.00-144.00]	
DOWN COTTON				
POTASSIUM, SERUM	4.04	mmol/L	[3.60-5.10]	
SERUM CHLORIDE	97.0 #	mmol/L	[101.0-111.0]	
Method: ISE Indirect				

Page 5 of 9





Name

GUNJAN KHURANA

Age

45 Yr(s) Sex: Female

Registration No

MH010382154

Lab No

202310002981

Patient Episode

H18000001325

Collection Date:

14 Oct 2023 09:20

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Oct 2023 15:04

Receiving Date

14 Oct 2023 09:20

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVA

eGFR (calculated)

88.0

Technical Note

ml/min/1.73sq.m

[>60.0]

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to1.73 sq.m BSA and is not applicable to individuals below 18 years. pGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolys Icterus / Lipemia.

LIVER FUNCTION TEST

BILIRUBIN - TOTAL Method: D P D	0.48	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.10	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.38	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	6.30 #	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	3.79	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.50	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.51		[1.00-2.50]
AST(SGOT) (SERUM) Method: IFCC W/O P5P	12.00	U/L	[0.00-40.00]

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LABORATORY REPORT

Name

GUNJAN KHURANA

Age

45 Yr(s) Sex : Female

Registration No

MH010382154

Lab No

202310002981

Patient Episode

Collection Date:

14 Oct 2023 09:20

Referred By

H18000001325

Receiving Date

HEALTH CHECK MGD 14 Oct 2023 09:20

Reporting Date:

14 Oct 2023 15:05

BIOCHEMISTRY

TEST ALT(SGPT) (SERUM) Method: IFCC W/O P5P	RESULT 11.80 #	UNIT BIO	LOGICAL REFERENCE INTERVA [14.00-54.00]	A
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	76.0	IU/L	[40.0-98.0]	
GGT	15.0	U/L	[7.0-50.0]	

Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

Blood Group & Rh Typing (Agglutination by gel/tube technique)

Blood Group & Rh typing

O Rh(D) Positive

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

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-----END OF REPORT-----

Dr. Charu Agarwal Consultant Pathologist





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Name

GUNJAN KHURANA

Age

45 Yr(s) Sex: Female

Registration No

MH010382154

Lab No

202310002982

Patient Episode

H18000001325

Collection Date:

14 Oct 2023 09:20

Referred By

: HEALTH CHECK MGD

Reporting Date:

14 Oct 2023 15:06

Receiving Date

: 14 Oct 2023 09:20

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVA

GLUCOSE-Fasting

Specimen: Plasma

LUCOSE, FASTING (F)

77.0

mg/dl

[70.0-110.0]

Method: Hexokinase

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%). Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocorti insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia), rugs-

insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

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---END OF REPORT---

Dr. Alka Dixit Vats Consultant Pathologist





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Name

GUNJAN KHURANA

Age

45 Yr(s) Sex :Female

Registration No

: MH010382154

Lab No

202310002983

Patient Episode

H18000001325

Collection Date:

14 Oct 2023 14:11

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Oct 2023 16:00

Receiving Date

: 14 Oct 2023 14:11

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVA

PLASMA GLUCOSE

Specimen: Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS

128.0

mg/dl

[80.0-140.0]

Page 9 of 9

Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption , post exercise

-----END OF REPORT-----

Dr. Alka Dixit Vats Consultant Pathologist



RADIOLOGY REPORT

NAME	GUNJAN KHURANA	STUDY DATE	14/10/2023 9:33AM
AGE / SEX	45 y / F	HOSPITAL NO.	MH010382154
ACCESSION NO.	R6250864	MODALITY	CR
REPORTED ON	14/10/2023 4:13PM	REFERRED BY	HEALTH CHECK MGD

XR- CHEST PA VIEW

FINDINGS:

LUNGS: Normal. TRACHEA: Normal. CARINA: Normal.

RIGHT AND LEFT MAIN BRONCHI: Normal.

PLEURA: Normal. HEART: Normal.

RIGHT HEART BORDER: Normal. LEFT HEART BORDER: Normal. PULMONARY BAY: Normal. PULMONARY HILA: Normal.

AORTA: Normal.

THORACIC SPINE: Normal.

OTHER VISUALIZED BONES: Normal. VISUALIZED SOFT TISSUES: Normal.

DIAPHRAGM: Normal.

VISUALIZED ABDOMEN: Normal. VISUALIZED NECK: Normal.

IMPRESSION:

XR- CHEST PA VIEW

No significant abnormality seen.

Please correlate clinically

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS

CONSULTANT RADIOLOGIST

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

MANIPAL HOSPITALS

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

www.manipalhospitals.com



RADIOLOGY REPORT

NAME	GUNJAN KHURANA	STUDY DATE	14/10/2023 11:10AM
AGE / SEX	45 y / F	HOSPITAL NO.	MH010382154
ACCESSION NO.	R6250865	MODALITY	US
REPORTED ON	14/10/2023 10:22PM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS

FINDINGS

LIVER: Liver is normal in size (measures 144 mm), shape and echotexture. Rest normal. SPLEEN: Spleen is normal in size (measures 87mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 9.2 mm.

COMMON BILE DUCT: Appears normal in size and measures 3.1 mm.

IVC, HEPATIC VEINS: Normal. BILIARY SYSTEM: Normal.

GALL BLADDER: Well distended with normal walls (~2.1mm). Its lumen shows a single mobile calculus within

measuring 11.7 mm. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is

maintained. Rest normal.

Right Kidney: measures 89 x 36 mm.It shows a concretion measuring 2.7 mm at lower calyx.

Left Kidney: measures 97 x 42 mm. PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged. FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest

normal.

UTERUS: Uterus is anteverted, normal in size (measures 76 x 63 x 40 mm), shape and echotexture.

Endometrial thickness measures 9.4 mm. Cervix appears normal.

OVARIES: Both ovaries are normal in size, shape and echotexture. Rest normal.

Right ovary measures $30 \times 28 \times 16$ mm with volume 7.3 cc. Left ovary measures $28 \times 22 \times 19$ mm with volume 6.3 cc.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

- -Cholelithiasis.
- -Right renal concretion.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS

CONSULTANT RADIOLOGIST

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

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