Health Check up Booking Request(bobE48039), Beneficiary Code-47014

Mediwheel <wellness@mediwheel.in>

Wed 10/11/2023 2:15 PM

To: Cc:





011-41195959

Email:wellness@mediwheel.in

Dear Manipal Hospitals,

City: Ghaziabad. Address: NH-24 Hapur Road, Oppo. Bahmeta Village, Near Lancroft Golf Links Apartment,

We have received the confirmation for the following booking.

Name

: MR. GARG SAGAR

Age

: 26

Gender

: Male

Package Name : Medi-Wheel Metro Full Body Health Checkup Male Below 40

Contact Details: 9650678973

Booking Date

: 11-10-2023

Appointment

Date

: 14-10-2023

Member Information				
Booked Member Name	Age	Gender	Cost(In INR)	
MR. GARG SAGAR	26	Male	Cashless	
Total	amount to be paid	Cashless	and a second state of the second sec	

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

Package Name

: Medi-Wheel Metro Full Body Health Checkup Male Below 40 -

Includes (37)Tests

Ecg, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Blood Sugar Postprandial, A:g Ratio, Blood Group, Total Cholesterol, Triglycerides, Fasting Blood Sugar, Ultrasound Whole Abdomen, Glycosylated Haemoglobin (hba1c), Hdl, Vldl, Urine Analysis, LDL, Total Protine,

this Package

Tests included in General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl consultation, ALP (ALKALINE Transferase), Eye Check-up PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Stool Analysis, Urine Sugar Fasting, Urine Sugar PP, T3, T4. Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Bilirubin

Total & Direct and Indirect, Albumin, Globulin

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						MAC55 009C
	Unconfirmed	V44	As As	90	}	MAC
	Unc					
						1 rhythm ld
ECG	ďɔ			- E		4 by 2.5s +
Normal ECG	Referred by; hcp					
	н					
1 146 ms on 86 ms 376/387 ms 15 28 29		avr	aVL	aVF		
P.R. Interval QRS duration QT/QTc 37 P-R-T axes 1					7	10.0 mm/mV
Asian ,	Technician: Test ind:					25.0 mm/s
Male					VI	20 Hz 2





TMT INVESTIGATION REPORT

Patient Name SAGAR GARG

Location

: Ghaziabad

Age/Sex

: 29Year(s)/male

Visit No

: V000000001-GHZB

MRN No

MH011410504

Order Date

: 14/10/2023

Ref. Doctor : HCP

Report Date

: 14/10/2023

Protocol

: Bruce

MPHR

: 191BPM

Duration of exercise Reason for termination

: 4min 11sec

85% of MPHR

: 162BPM

Blood Pressure (mmHg) : Baseline BP : 124/84mmHg

: THR achieved

Peak HR Achieved % Target HR

: 180BPM : 94%

Peak BP

: 140/84mmHg

METS

: 6.0METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	65	124/84	Nil	No ST changes seen	Nil
STAGE 1	3:00	162	134/84	Nil	No ST changes seen	Nil
STAGE 2	2:11	180	140/84	Nil	No ST changes seen	Nil
RECOVERY	3:00	99	128/84	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes during test and recovery.
- Normal chronotropic response.
- Normal blood pressure response.

1.1PRESSION:

Treadmill test is negative for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh

Dr. Abhishek Singh

Dr. Sudhanshu Mishra

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

MD, DNB (CARDIOLOGY), MNAMS

MD

Sr.Consultant Cardiology

Cardiology Registrar

Manipal Hospital, Ghaziabad

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

P: 0120-3535353

Page 1 of 2

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

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

Department Of About or Kiledinine

Name

MR SAGAR GARG

29 Yr(s) Sex: Male Age

Registration No

MH011410504

Lab No 202310003018

Patient Episode

H18000001333

Referred By

Collection Date: 14 Oct 2023 10:06

Receiving Date

HEALTH CHECK MGD 14 Oct 2023 12:41

Reporting Date: 14 Oct 2023 14:39

HAEMATOLOGY

ESR	22.0 #	mm/1sthour	[0.0-10.0
Basophils	0.0	90	[0.0-2.0]
Eosinophils	3.0	90	[1.0-6.0]
Monocytes	6.0	90	[2.0-10.0]
Lymphocytes	37.0	00	[20.0-40.0]
Neutrophils	54.0	96	[40.0-80.0]
(VCS TECHNOLOGY/MICROSCOPY)			
DIFFERENTIAL COUNT			
WBC COUNT (TC) (IMPEDENCE)	6.59	x 10 ³ cells/cumm	[4.00-10.00]
	,		
MPV (DERIVED)	9.5		
Method: Electrical Impedance	507	11 10 00110, 001111	[======================================
Platelet count	337	x 10 ³ cells/cumm	[150-410]
RDW CV% (DERIVED)	14.2 #	8	[11.6-14.0]
MCHC (CALCULATED)	31.3 #	g/dl	[31.5-34.5]
MCH (CALCULATED)	28.0	pg	[25.0-32.0]
MCV (DERIVED)	89.3	fL	[83.0-101.0]
HEMATOCRIT (CALCULATED)	43.4	୍ଚ	[40.0-50.0]
Method:cyanide free SLS-colorim		g/di	[13.0 17.0]
HEMOGLOBIN	13.6	g/dl	[13.0-17.0]
RBC COUNT (IMPEDENCE)	4.86	millions/cumm	[4.50-5.50]
COMPLETE BLOOD COUNT (AUTOMATED		SPECIMEN-EDTA Whole BI	1000
COMPLETE BLOOD COUNT /AUTOMATED	N .	SPECIMEN-EDTA Whole Bl	ood

Page 1 of 2

e Medical Charitable "Trust Ghaziabad - 201002

Registered Office: Sector-6, Dwarka, New Delhi 110 075

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Department Of the about or yell edicine

Name

MR SAGAR GARG

Age

29 Yr(s) Sex: Male

Registration No

MH011410504

Lab No

202310003018

Patient Episode

H18000001333

Collection Date:

14 Oct 2023 10:06

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Oct 2023 16:47

Receiving Date

14 Oct 2023 12:41

BIOCHEMISTRY

Glycosylated Hemoglobin

Specimen: EDTA

HbAlc (Glycosylated Hemoglobin)

5.9 #

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA) HbA1c in %

Non diabetic adults >= 18 years <5.7 Prediabetes (At Risk) 5.7-6.4 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

123

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.

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

Blood Group & Rh typing

B 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----

manipalities are iviedical Charitable "Trust road, wear Landcraft Golflinks, Ghaziabad - 201002

Registered Office: Sector-6, Dwarka, New Delhi 110 075

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

Department Of Laboratory Lesising

Name

: MR SAGAR GARG

Age

29 Yr(s) Sex: Male

Registration No

: MH011410504

Lab No

32231005959

Patient Episode

: R03000055142

Collection Date:

14 Oct 2023 19:21

Referred By

: MANIPAL HOSPITALS GHAZIABAD

Reporting Date:

14 Oct 2023 20:26

Receiving Date

: 14 Oct 2023 19:42

BIOCHEMISTRY

THYROID PROFILE, Serum

Specimen Type : Serum

Thyroid Stimulating Hormone (ECLIA)	4.320 #	µIU/mL	[0.340-4.250]
T4 - Thyroxine (ECLIA)	7.450	ug/dl	[4.600-10.500]
T3 - Triiodothyronine (ECLIA)	1.260	ng/ml	[0.800-2.040]

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

Page1 of 1

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

Dr. Neelam Singal CONSULTANT BIOCHEMISTRY





LABORATORY REPORT

Name

: MR SAGAR GARG

Age

29 Yr(s) Sex: Male

Registration No

: MH011410504

Lab No

202310003018

Patient Episode

: H18000001333

Collection Date:

14 Oct 2023 12:41

Referred By

: HEALTH CHECK MGD

Reporting Date:

14 Oct 2023 16:09

Receiving Date

: 14 Oct 2023 12:41

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

CLEAR

7.0

(4.6 - 8.0)

Reaction[pH] recific Gravity

1.010

(1.003 - 1.035)

CHEMICAL EXAMINATION

Protein/Albumin

Negative

(NEGATIVE)

Glucose

NIL

(NIL)

Ketone Bodies Urobilinogen

Negative Normal

(NEGATIVE) (NORMAL)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells **RBC**

NIL

(0-5/hpf)

NIL

(0-2/hpf)

Epithelial Cells CASTS

NIL NIL ·/hpf

Crystals

NIL

Bacteria

NIL

CHERS

NIL

Page 1 of 7





LABORATORY REPORT

Name : MR SAGAR GARG

Registration No : MH011410504

Patient Episode : H18000001333

Referred By : HEALTH CHECK MGD

Receiving Date : 14 Oct 2023 12:41

Age

29 Yr(s) Sex :Male

Lab No

202310003018

Collection Date:

14 Oct 2023 10:06

Reporting Date :

14 Oct 2023 15:21

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVA
Serum LIPID PROFILE			
Serum TOTAL CHOLESTEROL Method:Oxidase, esterase,	162 peroxide	mg/dl	[<200] Moderate risk:200-239
TRIGLYCERIDES (GPO/POD)	85	mg/dl	High risk:>240 [<150] Borderline high:151-199
HDL- CHOLESTEROL	46.0	mg/dl	High: 200 - 499 Very high:>500 [35.0-65.0]
Method: Enzymatic Immuno VLDL- CHOLESTEROL (Calcul CHOLESTEROL, LDL, CALCULA	ated) 17	9/ 0.1	[0-35] [<120.0]
Above optimal-100-129			Near/
T.Chol/HDL.Chol ratio(Ca	lculated) 3.5		Borderline High:130-159 High Risk:160-189 <4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(C	alculated) 2.2		<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

Page 2 of 7





Name

: MR SAGAR GARG

Age

29 Yr(s) Sex: Male

Registration No

: MH011410504

Lab No

202310003018

Patient Episode

: H18000001333

Collection Date:

14 Oct 2023 10:06

Referred By

: HEALTH CHECK MGD

Reporting Date:

14 Oct 2023 15:21

Receiving Date

: 14 Oct 2023 12:41

BIOCHEMISTRY

TEST	RESULT	UNIT BIO	LOGICAL REFERENCE INTERVA
KIDNEY PROFILE	8		
Specimen: Serum			
UREA Method: GLDH, Kinatic assay	34.1	mg/dl	[15.0-40.0]
BUN, BLOOD UREA NITROGEN Method: Calculated	15.9	mg/dl	[8.0-20.0]
CREATININE, SERUM Method: Jaffe rate-IDMS Standa	0.89 ardization	mg/dl	[0.70-1.20]
URIC ACID Method:uricase PAP	5.8	mg/dl	[4.0-8.5]
an e			
SODIUM, SERUM	136.30	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	5.09	mmol/L	[3.60-5.10]
SERUM CHLORIDE Method: ISE Indirect	104.0	mmol/L	[101.0-111.0]
eGFR (calculated) Technical Note	115.5	ml/min/1.73s	q.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. eGFR 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.

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LABORATORY REPORT

Name

: MR SAGAR GARG

Registration No

: MH011410504

Patient Episode

: H18000001333

Referred By

: HEALTH CHECK MGD

Receiving Date

: 14 Oct 2023 12:41

Age

29 Yr(s) Sex :Male

Lab No

202310003018

Collection Date:

14 Oct 2023 10:06

Reporting Date:

14 Oct 2023 15:21

BIOCHEMISTRY

TEST	RESULT	UNIT BIO	OLOGICAL REFERENCE INTERVA
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL Method: D P D	0.94	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.22	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.72	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	6.80	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.00	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.80	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.43		[1.00-2.50]
AST(SGOT) (SERUM) Method: IFCC W/O P5P	42.00 #	U/L	[0.00-40.00]
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	33.60	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	85.0	IU/L	[32.0-91.0]
GGT	24.0	U/L	[7.0-50.0]

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LABORATORY REPORT

Name

: MR SAGAR GARG

Registration No

: MH011410504

Patient Episode

: H18000001333

Referred By

: HEALTH CHECK MGD

Receiving Date

: 14 Oct 2023 12:41

Age

29 Yr(s) Sex: Male

Lab No

202310003018

Collection Date:

14 Oct 2023 10:06

Reporting Date:

14 Oct 2023 15:21

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVA

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.

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-----END OF REPORT-





Name

: MR SAGAR GARG

Age

29 Yr(s) Sex: Male

Registration No

: MH011410504

Lab No

202310003019

Patient Episode

: H18000001333

Collection Date:

14 Oct 2023 10:06

Referred By

: HEALTH CHECK MGD

Reporting Date :

14 Oct 2023 15:21

Receiving Date

: 14 Oct 2023 10:06

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVA

GLUCOSE-Fasting

Specimen: Plasma GLUCOSE, FASTING (F)

Method: Hexokinase

95.0

mg/dl

[70.0-110.0]

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), Drugs-

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

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----END OF REPORT---





LABORATORY REPORT

Name

: MR SAGAR GARG

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Registration No Patient Episode

: MH011410504

.

: H18000001333

Referred By

: HEALTH CHECK MGD

Receiving Date

: 14 Oct 2023 16:36

Age

29 Yr(s) Sex :Male

Lab No

202310003020

Collection Date:

14 Oct 2023 16:36

Reporting Date:

14 Oct 2023 18:14

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVA

PLASMA GLUCOSE

Specimen: Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS

101.0

mg/dl

[80.0-140.0]

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

Page 7 of 7

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



RADIOLOGY REPORT

NAME	MR Sagar GARG	STUDY DATE	14/10/2023 12:28PM
AGE / SEX	29 y / M	HOSPITAL NO.	MH011410504
ACCESSION NO.	R6251365	MODALITY	US
REPORTED ON	14/10/2023 10:08PM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS FINDINGS

The patient has a high body mass index and excessive bowel echoes are seen all over the abdomen obscuring the details. Hence suboptimal study is possible.

LIVER: appears normal in size (measures 149 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

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

PORTAL VEIN: Appears normal in size and measures 10.3 mm.

COMMON BILE DUCT: Appears normal in size and measures 3.2 mm.

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

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. 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 93 x 49 mm. Left Kidney: measures 91 x 43 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.

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 30 x 34 x 22 mm with volume 12 cc.

Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.

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	MR Sagar GARG	STUDY DATE	14/10/2023 10:29AM
AGE / SEX	29 y / M	HOSPITAL NO.	MH011410504
ACCESSION NO.	R6251364	MODALITY	CR
REPORTED ON	14/10/2023 4:09PM	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

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