Health Check up Booking Request(bobS45350), Beneficiary Code-49466

Mediwheel <wellness@mediwheel.in>

Mon 8/28/2023 6:09 PM

To:PHC [MH-Ghaziabad] < phc.ghaziabad@manipalhospitals.com>

Cc:customercare@mediwheel.in <customercare@mediwheel.in>



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.

: Anita Choudhary

Age

: 34

Gender

: Male

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

Contact Details: 9783103703

Booking Date

± 28-08-2023

Appointment

Date

: 29-08-2023

	Member Inform	nation	
Booked Member Name	Age	Gender	Cost(In INR)
Anita Choudhary	33	Female	Cashless
Total	amount to be paid	Cashless	

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 Female 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,

Tests included in this Package

General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Eye Check-up consultation, (ALKALINE ALP Transferase). 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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1/1



ZRE/08091:11

ELECTION COMMISSION OF INDIA IDENTITY CARD भारत निर्वाचन आयोग पहचान पत्र

: ANITA CHOUDHARI

Elector's Name

MANDIP

निर्वाचक का नाम : अनिता चौधरी

Husband's Name पति का नाम

जन्म की तारीख /Date of Birth लिंग / Sex

पता :

150, जाटों का मोहल्ला, रायला, त. चिड़ावा, जिला झुन्झुनू

ZRE/0809111

Address: 150, JATON KA MOHALLA, RAYALA, Th. CHIRAWA, Dist. JHUNJHUNU

: 14/04/1988

Facsimile Signature of Electoral Registration Officer for 025 - PILANI (SC) Constituency स्थान: पिलानी अधिकारी के हस्ताक्षर की अनुकृति 025 — पिलानी (अ.जा.) निवोचन क्षेत्र के निर्वाचक रजिस्ट्रीकरण दिनांक: 30/01/2014

Place: PILANI पता बदलने पर नथे पते पर अपना नाम निर्वाचक नामावली में दर्ज करवाने तथा उस पते पर इसी नम्बर का कार्ड पाने के लिए सम्बंधित फार्म में यह कार्ड नम्बर अवश्य तिखें Date: 30/01/2014

In case of change in address, mention this Card No. in the relevant Form for including your name in the roll at the changed address and to obtain the card with same number.

037 / 1262

















011-41195959

Email:wellness@mediwheel.in

Dear Anita Choudhary,

Please find the confirmation for following request.

Booking Date

: 28-08-2023

Package Name

Medi-Wheel Metro Full Body Health Checkup Female

Below 40

Name of

Diagnostic/Hospital Manipal Hospitals

Address of

NH-24 Hapur Road, Oppo. Bahmeta Village, Near

Diagnostic/Hospital Lancroft Golf Links Apartment

Contact Details

: 8979619531

City

: Ghaziabad

State

: Uttar Pradesh

Pincode

: 201002

Appointment Date: 29-08-2023

Confirmation

Status

: Confirmed

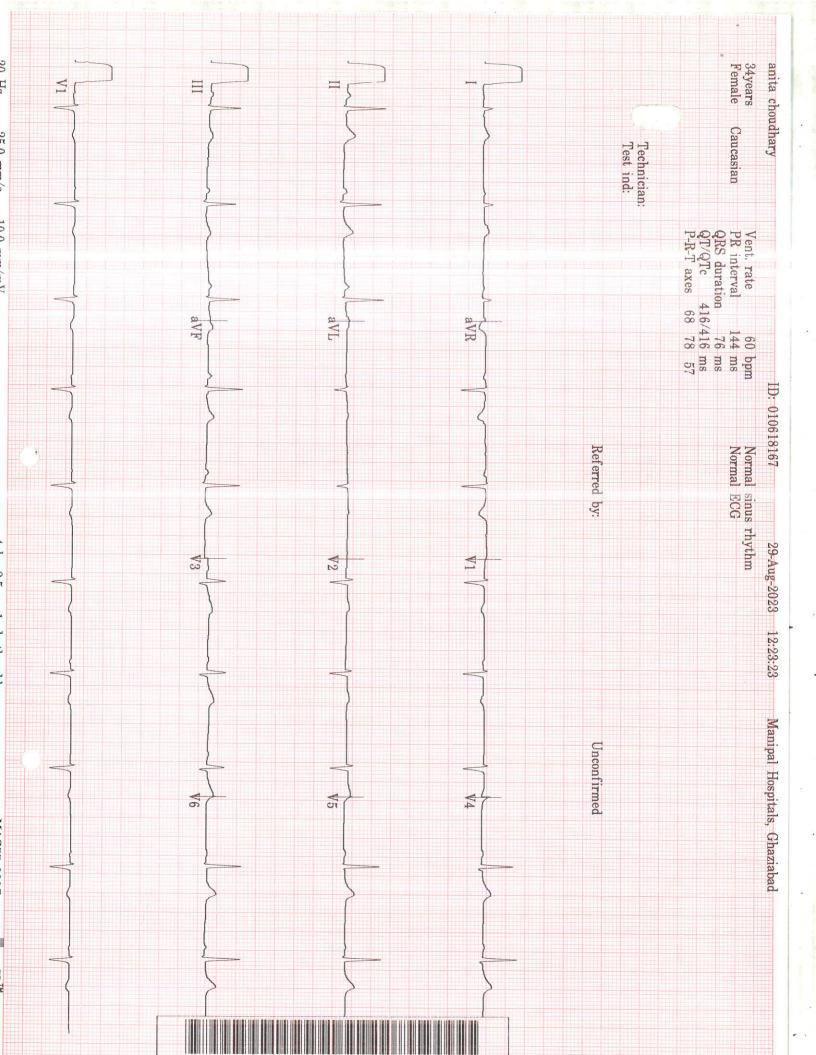
Preferred Time

: 8:00am-9:00am

Comment

: APPOINTMENT TIME 8:30AM

Instructions to undergo Health Check:







TMT INVESTIGATION REPORT

Patient Name : ANITA CHAUDHARY

Location

: Ghaziabad

Age/Sex

: 34Year(s)/Female

Visit No

: V000000001-GHZB

MRN No

MH010618167

Order Date

: 29/08/2023

Ref. Doctor : HCP

Report Date

: 29/08/2023

Protocol

: Bruce

MPHR

Duration of exercise Reason for termination : 6min 08sec

85% of MPHR

: 186BPM

: THR achieved

Peak HR Achieved

: 158BPM : 162BPM

Blood Pressure (mmHg) : Baseline BP : 100/60mmHg

% Target HR

: 87%

Peak BP

: 120/64mmHg

METS

: 7.2METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
RE- EXC.	0:00	76	100/60	Nil	No ST changes seen	Nil
STAGE 1	3:00	117	110/60	Nil	No ST changes seen	Nil
STAGE 2	3:00	161	120/64	Nil	No ST changes seen	Nil
STAGE 3	0:08	161	120/64	Nil	No ST changes seen	Nil
RECOVERY	3:23	85	110/60	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.

Fair effort tolerance.

JMPRESSION:

eadmill test is negative for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh

MD, DM (CARDIOLOGY), FACC

Dr. Abhishek Singh MD, DNB (CARDIOLOGY), MNAMS MD

Dr. Sudhanshu Mishra

Sr. Consultant Cardiology

Sr. Consultant Cardiology

Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002

P: 0120-616 5666

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 Finfo@manihospitals.com Www.maninalhospitals.com

Page 1 of 2



LIFE'S ON

MRS ANITA CHOUDHARABORATORY REPORT Name

Registration No : MH010618167

: H18000000940

: HEALTH CHECK MGD

Receiving Date : 29 Aug 2023 09:57

Collection Date: 29 Aug 2023 09:57

Reporting Date: 29 Aug 2023 11:24

BIOCHEMISTRY

TEST RESULT BIOLOGICAL REFERENCE INTERVAL

Serum LIPID PROFILE

Patient Episode

Referred By

(A)		F 9 0 6		
Serum TOTAL CHOLESTEROL	168	111	mg/dl	[<200]
Method:Oxidase, esterase, peroxide			31	Moderate risk:200-239
				High risk:>240
IGLYCERIDES (GPO/POD)	105		mg/dl	[<150]
		100	包含	Borderline high: 151-199
			State Law	High: 200 - 499
				Very high:>500
HDL- CHOLESTEROL	51.0		mg/dl	[35.0-65.0]
Method: Enzymatic Immunoimhibition		37 2		**************************************
VLDL- CHOLESTEROL (Calculated)	21	4	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	96.0	13葉	mg/dl	[<120.0]
				Near/
Above optimal-100-129				58 J. V.
				Borderline High: 130-159
			11 (1) (1) (1) (1) (1) (1) (1)	High Risk:160-189
T.Chol/HDL.Chol ratio(Calculated)	3.3		C. A.	<4.0 Optimal
	W FACE			4.0-5.0 Borderline
				>6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	1.9			<3 Optimal
				3-4 Borderline
				>6 High Risk
(1) (1) (2) (2) (2) (3) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4				CO III AII IVIDA

Note:

Reference ranges based on ATP III Classifications.

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

Page 1 of 1

----END OF REPORT-

Dr. Charu Agarwal **Consultant Pathologist**

MANIPAL HOSPITALS NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002 www.manipalhospitals.com

This report is subject to the terms and conditions mentioned overleaf



NAME	ANITA CHAUDHARY	STUDY DATE	29/08/2023 11:21AM
AGE / SEX	35 y / F	HOSPITAL NO.	MH010618167
ACCESSION NO.	R6023397	MODALITY	US
REPORTED ON	29/08/2023 12:18PM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS

FINDINGS

LIVER: appears normal in size (measures 148 mm) and shape but shows minimally increase in liver

echotexture, in keeping with early grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 82 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 11 mm.

COMMON BILE DUCT: Appears normal in size and measures 3.8 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 97 x 40 mm.

Left Kidney: measures 104 x 44 mm. It shows a concretion measuring 2 mm at upper calyx.

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 79 x 50 x 37 mm), shape and echotexture.

Endometrial thickness measures 7 mm. Cervix appears normal.

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

Right ovary measures $37 \times 35 \times 16$ mm with volume 10 cc. Left ovary measures $29 \times 28 \times 20$ mm with volume 8 cc.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Early grade I fatty infiltration in liver.

-Left renal concretion.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS

CONSULTANT RADIOLOGIST

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

MANIPAL HOSPITALS

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RADIOLOGY REPORT

NAME	ANITA CHAUDHARY	STUDY DATE	29/08/2023 1:08PM
AGE / SEX	35 y / F	HOSPITAL NO.	MH010618167
ACCESSION NO.	R6023396	MODALITY	CR
REPORTED ON	29/08/2023 2:02PM	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:

-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

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Name		MRS ANITA CHOUDHARY PROPERTY F	REPORT		35 Yr(s) Sex :Female
Registration No	:	MH010618167	Lab No	:	202308004853
Patient Episode	*	H18000000940	Collection Da	te:	29 Aug 2023 09:57
Referred By	:	HEALTH CHECK MGD	Reporting Da	te:	29 Aug 2023 13:03

HAEMATOLOGY

Receiving Date

: 29 Aug 2023 09:57

TEST	RESULT	UNIT BIOLOG	ICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMAT	ED)	SPECIMEN-EDTA Whol	e Blood
RBC COUNT (IMPEDENCE)	4.74	millions/cumm	[3.80-4.80]
HEMOGLOBIN	10.8	g/dl	[12.0-15.0]
Method:cyanide free SLS-color	imetry	-	
HEMATOCRIT (CALCULATED)	33.7	%	[36.0-46.0]
MCV (DERIVED)	71.1	fL	[83.0-101.0]
MCH (CALCULATED)	22.8	pg	[25.0-32.0]
MCHC (CALCULATED)	32.0	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	14.8	8	[11.6-14.0]
Platelet count	271	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	9.6		
WBC COUNT (TC) (IMPEDENCE) DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)	4.51	\times 10 3 cells/cumm	[4.00-10.00]
Neutrophils	44.0	90	[40.0-80.0]
Lymphocytes	48.0	ક	[20.0-40.0]
Monocytes	6.0	96	[2.0-10.0]
Eosinophils	2.0	%	[1.0-6.0]
Basophils	0.0	90	[0.0-2.0]
ESR	10.0	mm/1sthour	[0.0-

Page1 of 8



LABORATORY REPORT

35 Yr(s) Sex :Female

Registration No

: MH010618167

Lab No : 20

202308004853

Patient Episode

: H18000000940

Collection Date:

29 Aug 2023 09:57

Referred By

Nam

: HEALTH CHECK MGD

Reporting Date:

29 Aug 2023 17:14

Receiving Date

: 29 Aug 2023 09:57

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

HbAlc (Glycosylated Hemoglobin)

5.6

2

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA

HbAlc in %

Non diabetic adults >= 18 years <5.7

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

Estimated Average Glucose (eAG)

114

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.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

ACROSCOPIC DESCRIPTION

Colour

Light-Yellow

(Pale Yellow - Yellow)

Appearance Reaction[pH]

CLEAR 7.0

(4.6 - 8.0)

Specific Gravity

1.005

(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin

Negative

(NEGATIVE)

Glucose

NIL

(NIL)

Ketone Bodies Urobilinogen Negative Normal (NEGATIVE)
(NORMAL)

Page 2 of 8

MANIPAL HOSPITALS
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Name	: MRS ANITA CHOUDHARY CHOUDHARY		35 Yr(s) Sex :Female
------	---------------------------------	--	----------------------

Referred By : HEALTH CHECK MGD Reporting Date : 29 Aug 2023 15:09

Receiving Date : 29 Aug 2023 11:35

CLINICAL PATHOLOGY

MICROSCOPIC	EXAMINATION (Automated/Manual)
	0 0 0

is Cells	2-3/hpf	(0-5/hpf)
BC	NIL	(0-2/hpf)
Epithelial Cells	1-2 /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	168	mg/dl	[<200]
Method:Oxidase, esterase, peroxide			Moderate risk:200-239
			High risk:>240
TRIGLYCERIDES (GPO/POD)	105	mg/dl	[<150]
			Borderline high:151-199
			High: 200 - 499
			Very high:>500
HDL- CHOLESTEROL	51.0	mg/dl	[35.0-65.0]
Method: Enzymatic Immunoimhibition			
LDL- CHOLESTEROL (Calculated)	21	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	96.0	mg/dl	[<120.0]
			Near/
Above optimal-100-129			
			Borderline High:130-159
			High Risk:160-189
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)	1.9		<3 Optimal
			3-4 Borderline
			>6 High Risk

Page 3 of 8

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LIFE'S ON

LABORATORY REPORT Nam

MH010618167 Lab No 202308004853 Registration No

H18000000940 **Collection Date:** 29 Aug 2023 09:57 **Patient Episode**

HEALTH CHECK MGD Reporting Date: 29 Aug 2023 11:24 Referred By

Receiving Date 29 Aug 2023 09:57

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

Note:

Reference ranges based on ATP III Classifications.

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

KIDNEY PROFILE

Specimen: Serum			
UREA	18.7	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	8.7	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	0.80	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardizatio	on		
URIC ACID	3.0	mg/dl	[4.0-8.5]
Method:uricase PAP			
	-		
SODIUM, SERUM	135.30	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.69	mmol/L	[3.60-5.10]
SERUM CHLORIDE	103.1	mmol/L	[101.0-111.0]

eGFR (calculated) 95.8 ml/min/1.73sq.m

Technical Note

Method: ISE Indirect

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 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 Hemolysis Icterus / Lipemia.

Page 4 of 8

MANIPAL HOSPITALS NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002 www.manipalhospitals.com



Name : MRS ANITA CHOUDHAR ORATORY REPORT : 35 Yr(s) Sex :Female

 Registration No
 : MH010618167
 Lab No
 : 202308004853

 Patient Episode
 : H18000000940
 Collection Date : 29 Aug 2023 09:57

Patient Episode: H18000000940Collection Date : 29 Aug 2023 09:57Referred By: HEALTH CHECK MGDReporting Date : 29 Aug 2023 11:24

Receiving Date : 29 Aug 2023 09:57

BIOCHEMISTRY

TEST	RESULT	UNIT BIOI	LOGICAL REFERENCE INTERVAL	
IVER FUNCTION TEST				
BILIRUBIN - TOTAL Method: D P D	0.67	mg/dl	[0.30-1.20]	
BILIRUBIN - DIRECT Method: DPD	0.13	mg/dl	[0.00-0.30]	
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.54	mg/dl	[0.10-0.90]	
TOTAL PROTEINS (SERUM) Method: BIURET	7.30	gm/dl	[6.60-8.70]	
ALBUMIN (SERUM) Method: BCG	4.20	g/dl	[3.50-5.20]	
GLOBULINS (SERUM) Method: Calculation	3.10	gm/dl	[1.80-3.40]	
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.35		[1.00-2.50]	
AST(SGOT) (SERUM) Method: IFCC W/O P5P	16.00	U/L	[0.00-40.00]	
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	13.80	U/L	[14.00-54.00]	
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	53.0	IU/L	[40.0-98.0]	
GGT	8.0	U/L	[7.0-50.0]	

Page 5 of 8



Name : MRS ANITA CHOUDHARY REPORT : 35 Yr(s) Sex :Female

Referred By : HEALTH CHECK MGD Reporting Date : 29 Aug 2023 11:24

Receiving Date : 29 Aug 2023 09:57

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic uses 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) Specimen-Blood

Blood Group & Rh typing

B Rh(D) Negative

Technical note:

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

Page 6 of 8

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

Dr. Charu Agarwal Consultant Pathologist

Chaery

MANIPAL HOSPITALS
NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002
www.manipalhospitals.com

This report is subject to the terms and conditions mentioned overleaf



Name : MRS ANITA CHOUDHARY REPORT : 35 Yr(s) Sex :Female

Patient Episode : H18000000940 Collection Date : 29 Aug 2023 09:56

Referred By : HEALTH CHECK MGD Reporting Date : 29 Aug 2023 11:22

Receiving Date : 29 Aug 2023 09:56

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

GLUCOSE-Fasting

Specimen: Plasma
GLUCOSE, FASTING (F)

87.0 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, adrenocortica insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia),

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

Page 7 of 8

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

Dr. Charu Agarwal Consultant Pathologist

Chaery



Name : MRS ANITA CHOUDHARY REPORT : 35 Yr(s) Sex :F

Patient Episode : H18000000940 Collection Date : 29 Aug 2023 15:06

Referred By : HEALTH CHECK MGD Reporting Date : 29 Aug 2023 17:17

Receiving Date : 29 Aug 2023 15:06

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Specimen: Plasma
GLUCOSE, POST PRANDIAL (PP), 2 HOURS 129.0 mg/dl [80.0-140.0]

Method: Hexokinase

Method: Hexokinase

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 8 of 8

Dr. Alka Dixit Vats Consultant Pathologist