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Mailbox of cashless@saimultispeciality.com

Subject: Health Check up Booking Request(bobS13997),Package Code(PKG10000227),Beneficiary Code(54790)

From: Mediwheel <customercare@policywheel.com> on Mon, 18 Jul 2022 16:30:12

To: "cashless@saimultispeciality.com" <cashless@saimultispeciality.com>

Cc: Mediwheel CC <customercare@mediwheel.in>, Mediwheel CC <mediwheelwellness@gmail.com>

MedSave

**Mediwheel**
...Your wellness partner**011-41195959****Email:wellness@mediwheel.in**Dear Sai Fertility Centre And Hospital,
City : Chengalpattu . Location : .Vedachalam Nagar,

We have received the following request for Health Check up from

Name : Siva s b
Age : 39
Gender : Male
Member Relations : Spouse
Package Name : Medi-wheel Full Body Health Checkup Male Below 40
Package Code : PKG10000227
User Location : Tamil Nadu,CHENGALPATTU,603001
Contact Details : 9677185148
Booking Date : 18-07-2022
Appointment Date : 23-07-2022


Member Information			
Booked Member Name	Age	Gender	Cost(In INR)
Siva s b	39	Male	Cashless
Total amount to be paid			Cashless


Please login to your account to confirm the same. Also you mail us for confirmation

Package Name : Medi-wheel Full Body Health Checkup Male Below 40 - Includes (37)Tests

Tests included in this Package : 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, General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE 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

DT 10/07/22
 Reg No 51313
 SAI FERTILITY CENTRE AND HO AL
 # 43/21
 © 2021-2022, Arcofemi Healthcare Limited.
 Vedha
 Chengalpattu


भारत-सरकार
GOVERNMENT OF INDIA



 சிவா சுப்பையன் பகவதி அம்மாள்
 Siva Subbian Bagavathi Ammal
 பிறந்த நாள்/ DOB: 30/07/1983
 ஆண் / MALE



5107 2475 3692

Handwritten signature

Dr. S. C. ARIMUGAM M.D. (P) A.
 Reg. No. 81279
 SA HEALTHY CENTRE AND MEDICAL
 # 43/21, Government Street,
 Vachachalam Nagar,
 Chengalpattu - 603 001


भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

முகவரி:
 தந்தை / தாய் பெயர்:
 சுப்பையன், 12/202,
 தெற்குத்தெரு, கொட்டாரம்,
 அகஸ்தீஸ்வரம்,
 கன்னியாகுமரி,
 தமிழ்நாடு - 629703

Address:
 S/O: Subbian, 12/202, SOUTH
 STREET, KOTTARAM,
 Agasteeswaram, Kanniyakumari,
 Tamil Nadu - 629703

5107 2475 3692

Handwritten signature

M.C. Arumugam

Dr. M.C. ARUMUGAM, M.D., D.A.,
Reg. No.: 51319,
SAI FERTILITY CENTRE AND HOSPITAL
43/21, Devaralanar Street,
Vedhachalam Nagar,
Chennai - 603 001

SAI FERTILITY CENTRE AND HOSPITAL

Index number: 2

23-Jul-2022 10:43:23 a

UHID No	: 75937	Sample ID	: OP - 78953
Patient Name	: Mr.SIVA S B	Sample Collected	: 23/07/2022 11:11:25
Age/Gender	: 39 / Male	Report Completed	: 23/07/2022 15:44:05
Referral Dr	: Dr.M.C. ARUMUGAM M.D.D.A	Page 1 of 6	

Laboratory Report

Test Description (Method - Sample Type)	Observed Value	Units	Biological Reference Range
HEMATOLOGY			
CBC			
HAEMOGLOBIN (Electrical Impedance - Whole Blood EDTA)	14.8	gms%	Male : 13 - 18 Female : 11 - 16
TOTAL WBC COUNT (Electrical Impedance - Whole Blood EDTA)	8,590	cells/cumm	4000 - 11000
RBC (Electrical Impedance - Whole Blood EDTA)	5.08	mill/cumm	Male : 4.5 - 5.5 Female : 3.8 - 5.2
PCV (Electrical Impedance - Whole Blood EDTA)	44.7	%	Male : 40 - 55 Female : 35 - 48
PLATELET COUNT (Electrical Impedance - Whole Blood EDTA)	3.87	lakhs/cumm	1.5 - 4.5
M C V (Electrical Impedance - Whole Blood EDTA)	88.1	fml	82 - 98
M C H (Electrical Impedance - Whole Blood EDTA)	29.2	pg	28 - 32
M C H C (Electrical Impedance - Whole Blood EDTA)	33.2	%	32 - 36
DIFFERENTIAL COUNT			
NEUTROPHILS	52	%	40 - 75
LYMPHOCYTES	40	%	20 - 45
EOSINOPHILS	04	%	01 - 06
MONOCYTES	04	%	00 - 02
BASOPHILS	00	%	
ESR			
ESR 1/2 Hour (Westergren Method - Sodium Citrate)	12	mm	0-9
ESR 1 Hour (Westergren Method - Sodium Citrate)	25	mm	0-20

Contd..

Dr. M.C. Arumugam

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Laboratory Report

Test Description (Method - Sample Type)	Observed Value	Units	Biological Reference Range
BIOCHEMISTRY			
BUN/CREATININE RATIO			
Bun	12.0	mg/dl	7-20 mg/dl
Creatinine	0.9	mg/dl	0.7-1.2 mg/dl
Bun/Creatinine Ratio	13.0	mg/dl	10-20
FBS (God/Pod - SERUM)	85	mg/dl	70-110
PPBS (God/Pod - SERUM)	113	mg/dl	80-160
URIC ACID (Uricase/Peroxidase - SERUM)	7.3	mg/dl	Newborn : 2.0-6.2 mg/dl Child : 2.5-5.5 mg/dl Men : 3.5-7.2 mg/dl Women : 2.6-6.0 mg/dl
BUN (UV - SERUM)	12.0	mg/dl	7-18
HBA1C			
Glycosylated Haemoglobin (HbA1c) (Nephelometry - Whole Blood EDTA)	5.8	%	Non Diabetic : < 6 Good Control :6.1 - 7.0 Fair Control :7.1 - 8.0 Unsatisfactory Control :8.1-10 Poor Control :> 10 (HbA1c is an index of your blood sugar control for the past 3 months)
Estimated Average Glucose (eAG) (Calculation)	119	mg/dl	
LIPID PROFILE (TCHO,TGL,HDL,LDL,VLDL)			
Total Cholestrol (Oxidase/Peroxidase - SERUM)	180	mg/dl	< 200 : Desirable 200 - 239 : Boderline High > 240 : High

Contd..

Dr. M.C. Arumugam

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Laboratory Report

Test Description (Method - Sample Type)	Observed Value	Units	Biological Reference Range
Triglycerides (Glycerol Phosphate Oxidase/Peroxidase - SERUM)	95	mg/dl	< 150 : Normal 150 - 199 : Boderline High 200 - 499 : High > 500 : Very High
HDL-cholesterol (Direct Detergent)	36	mg/dl	< 40 : High risk 40 - 60 :Low risk >60 :No risk
LDL-cholesterol (Calculation)	131	mg/dl	< 100 : Optimal 100- 129 : Above Optimal 130 -159 : Boderline High 160- 189 : High > 190 : Very High
VLDL-Cholesterol (Calculation)	19	mg/dl	< 40
Chol/HDL ratio (Calculation)	5.0		< 4.0 : Optimal 4.0 - 5.0 : Boderline > 6.0 :High Risk

LIVER FUNCTION TEST

Serum Bilirubin Total (Diazotized Sulfanilic - SERUM)	1.0	mg/dl	0.1 - 1.0
Serum Bilirubin Direct (Diazotized Sulfanilic - SERUM)	0.5	mg/dl	0.0 - 0.2
Serum Bilirubin Indirect (Calculation)	0.5	mg/dl	upto 1.0
Serum SGOT (AST) (IFCC - SERUM)	20	U/L	< 40
Serum SGPT (ALT) (IFCC - SERUM)	21	U/L	< 40
serum ALP (IFCC - SERUM)	55	U/L	35-105
Serum GGT (IFCC - SERUM)	32	U/L	Upto 55
Serum Total Protein (Biuret - SERUM)	7.9	g/dl	6.0 - 8.0

Contd..

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Laboratory Report

Test Description (Method - Sample Type)	Observed Value	Units	Biological Reference Range
Serum Albumin (Bromocresol green - SERUM)	4.4	g/dl	3.2 - 5.1
Serum Globulin (Calculation)	3.5	g/dl	2.5 - 3.3
A/g Ratio (Calculation)	1.2		1.5 - 2.0

ENDOCRINOLOGY

TFT

Total T3 (Enzyme Linked Fluourescent Assay (ELFA) - SERUM)	1.27	ng/ml	1-4 days	: 0.96 - 7.30
			1-4 weeks	: 1.02 - 3.39
			1-12 months	: 1.02 - 2.43
			1-5 years	: 1.02 - 2.62
			6-10 years	: 0.89 - 2.37
			11-15 years	: 0.83 - 2.11
			16-20 years	: 0.76 - 2.05
			Adult Range	: 0.51 - 1.61
Total T4 (Enzyme Linked Fluourescent Assay (ELFA) - SERUM)	8.70	ug/dL	1-4 days	: 11.0 - 21.3
			1-4 weeks	: 8.1 - 17.0
			1-12 months	: 5.8 - 16.1
			1-5 years	: 7.2 - 14.8
			6-10 years	: 6.3 - 13.16
			11-15 years	: 5.4 - 11.62
			16-20 years	: 4.1 - 11.7
			Adult Range	: 4.6 - 9.3
TSH (Enzyme Linked Fluourescent Assay (ELFA) - SERUM)	3.34	µIU/ml	1-4 days	: 1.0 - 39.0
			1-4 weeks	: 1.7 - 9.1
			1-12 months	: 0.8 - 8.2
			1-5 years	: 0.7 - 5.7
			6-10 years	: 0.7 - 5.7
			11-15 years	: 0.7 - 5.7
			16-20 years	: 0.7 - 5.7
			Adult Range	: 0.25 - 5.0

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Laboratory Report

Test Description (Method - Sample Type)	Observed Value	Units	Biological Reference Range
CLINICAL PATHOLOGY			
URINE GLUCOSE(F) (Photo Reflection Method - URINE)	Nil		
URINE GLUCOSE(PP) (Photo Reflection Method - URINE)	Nil		
URINE COMPLETE EXAMINATION			
Macroscopic Examination			
Colour	Pale Yellow		
Reaction	Acidic		
Specific gravity (Photo Reflection Method - URINE)	1.010		
Appearance	Clear		
Bile Pigment (Photo Reflection Method)	Absent		
Bile Salt (Photo Reflection Method - URINE)	Absent		
Blood (Photo Reflection Method - URINE)	Absent		
Ketone (Photo Reflection Method - URINE)	Negative		
Albumin (Photo Reflection Method - URINE)	Nil		
Urobilinogen (Photo Reflection Method - URINE)	Normal		
Microscopic Examination			
Pus cells	2-3/hpf		
Epithelial cells	1-2/hpf		
RBC	Occa/hpf		

Contd..

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Chengalpattu - 603 001

UHID No : 75937
Patient Name : Mr.SIVA S B
Age/Gender : 39 / Male
Referral Dr : Dr.M.C. ARUMUGAM M.D.D.A

Sample ID : OP - 78953
Sample Collected : 23/07/2022 11:11:25
Report Completed : 23/07/2022 15:44:05

Page 6 of 6

Laboratory Report

Test Description (Method - Sample Type)	Observed Value	Units	Biological Reference Range
Cast	Nil		
Crystals	Nil		

--End of The Report--

for xaley
LAB DIRECTOR

M. Kuzhal Mozhi

Dr.M.Kuzhal Mozhi.M.D,
Consultant Pathologist

M.C. Arumugam

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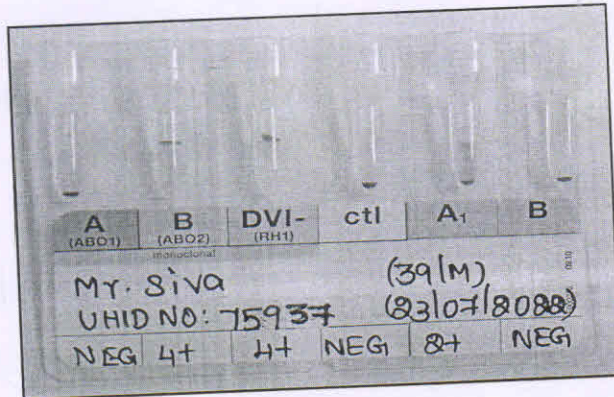
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Patient Name	: Mr. SIVA S B	Sample Collected	: 23.07.2022
Age/Gender	: 39 / Male	Report Completed	: 23.07.2022
Referral Dr	: Dr.M.C. ARUMUGAM M.D.D.A		

Laboratory Report

DEPARTMENT : Immuno-Hematology
METHOD : Column Agglutination Technology-(Forward & Reverse)
SAMPLE TYPE : EDTA Blood

RESULT:

BLOOD GROUP : "B"
RH TYPE : POSITIVE



--End of the Report--

for ASP
TECHNICAL SUPERVISOR

W. Medhe
LAB DIRECTOR

M.C. Arumugam

23-07-22

From

Siva. S.B

4/p. Subha E.R.

To

Sai Hospital.
Changanpattu

Sir,

I would like to inform you
that I have not taken these
tests again as I have
take those tests only
last weeks.

Test

1) ECG

2) Scan

3) X-Ray

Note: ECG doctor not available.

Date: 23-7-22, So. ~~I not take~~

I request. Next Saturday (30-07-22) (Siva. S.B)

Regards.

[Signature]

എഴുതിയിരിക്കുന്നു

S.B. ഡോ.

H.O. / E.R. Subha

റൂമി

ജനറൽ ഹോസ്പിറ്റൽ

എറണാകുളം

ജനറൽ,

കുടുംബാരോഗ്യ പരിരക്ഷാ പരിഷ്കരണ പദ്ധതി

ആരോഗ്യ സൗകര്യങ്ങൾ വേഗം ലഭ്യമാക്കുന്നതിനായി

കുടുംബാരോഗ്യ പരിരക്ഷാ പരിഷ്കരണ പദ്ധതി

കുടുംബാരോഗ്യ പരിരക്ഷാ പരിഷ്കരണ പദ്ധതി

Test ECG, Scan, X-Ray

Note: Echo test ഓരോ രോഗിയ്ക്കും

അനുസരിച്ച് available (23-7-22) മുൻപായി

കുടുംബാരോഗ്യ പരിരക്ഷാ പരിഷ്കരണ പദ്ധതി

കുടുംബാരോഗ്യ പരിരക്ഷാ പരിഷ്കരണ പദ്ധതി

appointment കഴിഞ്ഞശേഷം

(കുടുംബാരോഗ്യ പരിരക്ഷാ പരിഷ്കരണ പദ്ധതി)

എഴുതിയിരിക്കുന്നു

2022

TO WHOMSOEVER IT MAY CONCERN

We have received the following Client for Health Check up on 23.07.2022

Name : Siva s b
Age : 39
Gender : Male
Member Relations : Spouse
Package Name : Medi-wheel Full Body Health Checkup Male Below 40
Package Code : PKG10000227
User Location : Tamil Nadu,CHENGALPATTU,603001
Contact Details : 9677185148
Booking Date : 18-07-2022
Appointment Date : 23-07-2022

Member Information			
Booked Member Name	Age	Gender	Cost(In INR)
Siva s b	39	Male	Cashless
Total amount to be paid			Cashless

Package Name : Medi-wheel Full Body Health Checkup Male Below 40 - Includes (37) Tests

Tests included in this Package : 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, General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE 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

Note: Due to the patient not willingness and doctor non availability. We unable to able to complete 2d ECHO, Stool Analysis on 23.07.2022.

Hence now we are sending the completed investigations only.

Still of 2d Echo and stool analysis investigation not done by client.