

LABORATORY REPORT

Name : Mr. Juned Belim

Sex/Age : Male/35 Years

Ref. By

Client Name : Mediwheel

Reg. No : 303100523

Reg. Date

11-Mar-2023 08:49 AM

Collected On

Report Date : 11-Mar-2023 03:16 PM

Medical Summary

GENERAL EXAMINATION

Height (cms): 171

Weight (kgs): 85.9

Blood Pressure: 130/90mmHg

Pulse:68/Min

No Clubbing/Cynosis/Pallor/Pedet Oedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy - N/A

This is an electronically authenticated report

Dr.Jay Soni

M.D. GENERAL MEDICINE

Page 3 of 4

CUROVIS HEALTHCARE PVT. LTD.

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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

}

PARTICULARS	OF HEALTH CHECK UP BENEFICIARY
NAME	MINAZ JUNED BELIM
DATE OF BIRTH	05-12-1990
PROPOSED DATE OF HEALTH	
CHECKUP FOR EMPLOYEE	
SPOUSE	
BOOKING REFERENCE NO.	22M170883100045472S
	SPOUSE DETAILS
EMPLOYEE NAME	MR. ALLAUDIN BELIM JUNED
EMPLOYEE EC NO.	170883
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR B
EMPLOYEL PLACE OF WORK	DEVKARAN NA MUVADA
EMPLOYEE BIRTHDATE	02-10-1987

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 01-03-2023 till 31-03-2023. 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's spouse 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 Mediwheet (Arcotenii Hoalthcare Limited))

प्रन्थ असे MALE कुनेह अस्वाहिटीन जेविस Juned Allaudin Belim WITH MEMS

90|

9998635624 I A BOUN

मारी आधार, मारी खोलभ 9299 9786 3455

Dr.Jay Soni M.D. (General Medicine) Reg. No.: G-23899







TEST REPORT Ref ld Rea. No : 303100523 Collected On : 11-Mar-2023 08:49 AM Name : Mr. Juned Belim Reg. Date : 11-Mar-2023 08:49 AM Age/Sex : 35 Years / Male Pass, No. Tele No. : 9998635620 Ref. By Dispatch At Location Sample Type : EDTA Whole Blood Parameter Results Unit Biological Ref. Interval COMPLETE BLOOD COUNT (CBC) Specimen: EDTA blood Hemoglobin Colormetric mathod 16.1 g/dL 13.0 - 18.0 Hematrocrit (Calculated) 50.20 % 47 - 52RBC Count 5.76 million/cmm 4.7 - 6.0MCV 87.1 11.. 78 - 110 MCH (Calculated) 27.9 Pα 27 - 31MCHC (Calculated) 32.0 % 31 - 35RDW (Calculated) % 12.5 11.5 - 14.0 WBC Count 7930 4000 - 10500 /cmm MPV (Calculated) 9.0 fl. 7.4 - 10.4DIFFERENTIAL WBC COUNT [%] **EXPECTED VALUES** [Abs] **EXPECTED VALUES** Neutrophils (%) 63.70 % 42.0 - 75.2 5051 /cmm 2000 - 7000 Lymphocytes (%) 24.60 9/0 20 - 451951 /cmm 1000 - 3000 Eosinophils (%) 1.70 % 0 - 6769 /cmm 200 - 1000 Monocytes (%) 9.70 % 2 - 10135 /cmm 20 - 500Basophils (%) 0.30 % 0 1 24 0 - 100/cmm PERIPHERAL SMEAR STUDY **RBC Morphology** Normocytic and Normochromic WBC Morphology TC & DC as above. **PLATELET COUNTS** Platelet Count (Volumetric 310000 /cmm 150000 - 450000 Impedance) Platelets Platelets are adequate with normal morphology. **Parasites** Malarial parasite is not detected.

This is an electronically authenticated report.

Generated On : 11-Mar-2023 06:31 PM

* This test has been out sourced.

Comment

Approved By:

Dr. Deval Patel

MD (Pathology)

Approved On:

11-Mar-2023 02:03 PM Page 1 of 13

CUROVIS HEALTHCARE PVT. LTD.







Reg. No

: 303100523

Ref Id

Collected On

: 11-Mar-2023 08:49 AM

Name

: Mr. Juned Belim

Reg. Date

: 11-Mar-2023 08:49 AM

Age/Sex

: 35 Years

) Male

Pass. No. :

Tele No.

: 9998635620

Ref. By Location

Dispatch At Sample Type

: EDTA Whole Blood

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11-Mar-2023 02:03 PM Page 2 of 13

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HEMATOLOGY

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Forward Reverse Tube Agglutination

ABO

"AB"

Rh(D)

Positive

Note -

ERYTHROCYTE SEDIMANTATION RATE [ESR]

ESR 1 hour tofa red measurement

03

mm/hr

ESR AT 1 hour: 1-7

ERYTHRO SEDIMENTION RATE, BLOOD -

Erythrocyte sedimentation rate (ESR) is a non-specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants. The ESR is increased in prenancy from about the 3rd month and returns to normal by the 4th week post partum. ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives). It is especially low (o-1mm) in polycythaemia, hypofibrinogenemia or or congestive cardiac failure and when there are abnormalities or the red cells such as poikilocytosis, spherocytosis or sickle cells.

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11-Mar-2023 02:03 PM Page 3 of 13

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Reg. No Name

: Mr. Juned Belim

Reg. Date

: 11-Mar-2023 08:49 AM

Age/Sex

/ Male

Tele No.

: 9998635620

: 35 Years

: 303100523

Pass. No.

Ref Id

Dispatch At

Ref. By

Sample Type

: Flouride F.Flouride PP

Location Parameter

Result

Unit

Biological Ref. Interval

FASTING PLASMA GLUCOSE Specimen: Flouride plasma

Fasting Blood Sugar (FBS)

110.40

mg/dl.

70 - 110

GOD-POD Method

Criteria for the diagnosis of diabetes

1. HbA1c >/≈ 6.5 *

Or

2. Fasting plasma glucose ≥126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

3. Two hour plasma glucose >/= 200mg/dL during an oral glucose tolerence test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

GOD-POD Method

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >/= 200 mg/dl...

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011, Diabetes care 2011;34;S11,

POST PRANDIAL PLASMA GLUCOSE

Specimen: Flouride plusma

Post Prandial Blood Sugar (PPBS)

114.2

mg/dl.

70 - 140

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Dr. Deval Patel

MD (Pathology)

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Approved On:

11-Mar-2023 02:

CUROVIS HEALTHCARE PVT. LTD.

B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad - 380 054, Gujarat

€ 079 40308700

%+91 75730 30001

info@curovis.co.in







: 303100523

Ref Id

TEST REPORT

Collected On

: 11-Mar-2023 08:49 AM

Name

: Mr. Juned Belim

Reg. Date

: 11-Mar-2023 08:49 AM

: 9998635620

Age/Sex Ref. By

Reg. No

: 35 Years / Male Pass. No. Tele No.

Dispatch At

Location		Sample Type	: Serum
Parameter	Result	Unit	Biological Ref. Interval
	Lipid Profile		
Cholesterol	216.00	mg/dL	Desirable. < 200 Boderline High: 200 - 239 High: > 240
Enzymatic, columntue method			
Triglyceride	98.50	mg/dL	Normal; < 150 Boderline High: 150 - 199 High: 200 - 499 Very High: > 500
Enzymatic, colorimetric method			
HDL Cholesterol	45.80	mg/dL	High Risk : < 40 Low Risk = 60
Accolerator selective datergent method			
LDI.	150.50	mg/dl.	Optimal: < 100.0 Near / above optimal: 100-129 Borderline High: 130- 159 High: 160-189 Very High: >190.0
Calculated			, .,
VLDL Calculated	19.70	mg/dt.	15 - 35
LDL / HDL RATIO	3.29		0 - 3.5
Cholesterol /HDL Ratio	4.72		0 - 5.0

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Name : Mr. Juned Belim			Reg, Date	: 11-Mar-2023 08:49 AM
Age/Sex : 35 Years / Male	Pass. No.	:	Tele No.	: 9998635620
Ref. By :			Dispatch At	
Location :			Sample Type	: Serum
Parameter		Result	Unit	Biological Ref. Interval
	BIO -	CHEMISTRY		
		L.	FT WITH GGT	
Total Protein Bianet Reaction		7.73	gm/dl.	Premature 1 Day : 3.4 - 5.0 1 Day to 1 Month : 4.6 - 6.8 2 to 12 Months : 4.8 - 7.6 1 Year : 6.0 - 8.0 Adults : 6.6 - 8.7
Albumin By Bromocrosol Green		5.22	g/dL	0 ~ 4 days: 2.8 ~ 4.4 4 days - 14 yrs: 3.8 ~ 5.4 14 ~ 19 yrs: 3.2 ~ 4.5 20 ~ 60 yrs = 3.5 ~ 5.2 60 ~ 90 yrs = 3.2 ~ 4.6 > 90 yrs: 2.9 ~ 4.5
Globulin Calculated		2.51	g/dl.	2.3 - 3.5
A/G Ratio Calculated		2.08		0.8 - 2.0
SGOT UV without P5P		24.20	U/L	0 - 40
SGPT UV without P5P		32.10	U/L	0 - 40
Alakaline Phosphatase P-ndrophenyl phosphatase-AMP Butter, Multiple-point rate		62.1	10/1	53 - 128
Total Bilirubin Vamadate Oxidation		0.63	mg/dL	0 - 1.2
Conjugated Bilirubin		0.26	mg/dL	0.0 - 0.4
This is an electronically authenticated report. * This test has been out sourced.	ort.			erred.

CUROVIS HEALTHCARE PVT. LTD.

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B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad - 380 054, Gujarat

Dr. Deval Patel

MD (Pathology)

11-Mar-2023 02:03 PM Page 6 of 13

Approved By:

Approved On:



SZASZ Method





		TEST REPORT		
Reg. No	: 303100523	Ref Id ;	Collected On	: 11-Mar-2023 08:49 AM
Name	: Mr. Juned Belim		Reg. Date	: 11-Mar-2023 08:49 AM
Age/Sex	: 35 Years / Male	Pass. No.	Tele No.	: 9998635620
Ref. By	;		Dispatch At	•
Location			Sample Type	: Serum
Unconjuga Galculated	ted Bilirubin	0.37	mg/dL	0.0 - 1.1
GGT		21 00	mg/dL	< 49

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Dr. Deval Patel

MD (Pathology)

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11-Mar-2023 02:03 PM Page 7 of 13

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UV Method





		TEST REPORT		***************************************
Reg. No	: 303100523	Ref ld :	Collected On	: 11-Mar-2023 08;49 AM
Name	: Mr. Juned Belim		Reg. Date	: 11-Mar-2023 08:49 AM
Age/Sex	: 35 Years / Male	Pass. No.	Tele No.	: 9998635620
Ref. By	1		Dispatch At	1
Location	:		Sample Type	: Serum
Parameter		Result	Unit	Biological Ref. Interval
		BIO - CHEMISTRY		
Uric Acid Enzymatic, color	mutuc method	4.82	mg/dL	3.5 - 7.2
Creatinine Enzymalic Metho	od	0.93	mg/dl.	0.9 - 1.3
BUN		14.90	mg/dL	6.0 - 20.0

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Dr. Deval Patel

MD (Pathology)

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11-Mar-2023 05:44 PM Page 8 of 13

CUROVIS HEALTHCARE PVT. LTD.





Reg. No : 303100523

Ref Id

: Mr. Juned Belim

Age/Sex : 35 Years

7 Male Pass. No.

Collected On

Reg. Date

: 11-Mar-2023 08:49 AM : 11-Mar-2023 08:49 AM

Tele No.

: 9998635620

Dispatch At

Sample Type

: EDTA Whole Blood

Parameter Result Unit Biological Ref. Interval

HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

'Hb A1C

Name

Rof. By

Location

6.5

% of Total Hb

Normal : < 5.7 %

Pre-Diabetes . 5.7 % -

6.4 %

Diabetes: 6.5 % or

higher

Boronnte Affinity with Fluorescent Quenchina

Mean Blood Glucose

139.85

mg/dl.

Calculated

Degree of Glucose Control Normal Range:

Poor Control > 7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

* Some danger of hypoglycemic reaction in Type I diabetics.

* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate FIbA1c levels in this area.

EXPLANATION :-

*Total haemoglobin At c is continuously synthesised in the red blood cell throught its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurnment which effects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Ermeous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

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11-Mar-2023 02:03 PM Page 9 of 13

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Ref ld

Collected On

: 11-Mar-2023 08:49 AM

Name

: Mr. Juned Belim

Reg. Date

: 11-Mar-2023 08:49 AM

Age/Sex

: 35 Years

/ Male Pass. No. Tele No.

: 9998635620

Ref. By

Result

Dispatch At

Test

Location

Sample Type

Unit

: Urine Spot

Biological Ref. Interval

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity

20 cc

Colour

Pale Yellow

Clarity

Clear

Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

ρН

6

4.6 - 8.0

Sp. Gravity

1.030

1.001 - 1.035

Protein

Nil

Nil

Glucose

Nil

Ketone Bodies

Nil

Nii

Urobilinogen

Nil

Nit Nil

Bilirubin

Nil

Nil

Nitrite Blood

Nil Nil

Níl

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)

1 - 2/hpf

Absent

Erythrocytes (Red Cetts)

Nil

Absent

Epithelial Cells

1 2/hpf

Absent

Crystals

Absent

Absent

Casts

Absent

Amorphous Material

Absent

Absent Absent

Bacteria

Remarks

Absent

Absent

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MD (Pathology)

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11-Mar-2023 02:03 PM Page 10 of 1

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Rea. No

: 303100523

Ref ld

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: 11-Mar-2023 08:49 AM

Name

: Mr. Juned Belim

Reg. Date

: 11-Mar-2023 08:49 AM

Age/Sex

: 35 Years / Male

Tele No.

: 9998635620

Ref. By

Pass. No.

Dispatch At

Location

Sample Type

: Serum

Parameter

Result

Unit

Biological Ref. Interval

IMMUNOLOGY

THYROID FUNCTION TEST

T3 (Trilodothyronine)

CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

1.23

ng/ml.

0.86 - 1.92

Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus.

In the circulation, 99.7% of T3 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.

In hypothyroidism and hyperthyroidism, F T3 (free T3) levels parallel changes in total T3 levels. Measuring F T3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

T4 (Thyroxine)

CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

7.10

ug/dL

3.2 - 12.6

Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus. In the circulation, 99.95% of 14 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to triiodothyronine (T3)

In hypothyroidism and hyperthyroidism, F T4 (free T4) levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when aftered levels of total 14 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

1. The anticonvulsant drug phenytoin may interfere with total and F T4 levels due to competition for TBG binding

2.F T4 values may be decreased in patients taking carbamazepine.

3. Thyroid autoantibodies in human serum may interfere and cause falsely elevated F-T4 results.

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MD (Pathology)

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11-Mar-2023 02:03 PM of 1

CUROVIS HEALTHCARE PVT LTD.





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Name

: Mr. Juned Belim

Reg. Date

: 11-Mar-2023 08:49 AM

Age/Sex

: 35 Years

Pass. No.

Tele No.

: 9998635620

Ref. By

/ Male

Dispatch At

Sample Type : Serum

TSH

Location

1.510

ulU/ml

0.35 - 5.50

CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

Thyroid slimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-relasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy: First Trimester :0.1 to 2.5 µIU/mL Second Trimester: 0.2 to 3.0 µtU/mt. Third trimester: 0.3 to 3.0 µtU/mL

Referance: Carl A.Burtis, Edward R.Ashwood, David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular

Diagnostics, 5th Eddition, Philadelphia; WB Sounders, 2012;2170

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IMMUNOLOGY

*TOTAL PROSTATE SPECIFIC ANTIGEN (PSA) CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

0.90

ng/ml.

0.4

Measurement of total PSA alone may not clearly distinguish between benign prostatic hyperplasia (BPH) from cancer, this is especially true for the total PSA values between 4-8 ng/mL.

Percentage of free PSA = free PSA/total PSA X 100

Percentage of free PSA: Patients with prostate cancer generally have a lower percentage of Free PSA than patients with benign prostatic hyperplasia, Percentage Free PSA of less than 25% is a high likelihood of prostatic cancer.

..... End Of Report

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B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad - 380 054, Gujarat

079 40308700

\$\pmu+91 75730 30001 \info@curovis.co.in \info\text{www.curovis.co.in}



LABORATORY REPORT

Name

Mr. Juned Belim

Sex/Age

Mediwheel

Ref. By

Client Name

Male/35 Years

Reg. Date

Reg. No

303100523

11-Mar-2023 08:49 AM

Collected On

Report Date

11-Mar-2023 04:10 PM

Electrocardiogram

Findings

Normal Sinus Rhythm.

Within Normal Limit.

This is an electronically authenticated report

Dr.Jay Soni

M.D, GENERAL MEDICINE

Page 1 of 4

CUROVIS HEALTHCARE PVT. LTD.

	a C			JUNEO BELIM BELIM Tale RR 882 ms 171 cm / 86 kg DRS 88 ms OF 376 ms OF 484 ms (Bazett) 18 mm/mU
The same			description of the second of t	9xis: P 41 * 1285 12 * 19 * 19 * 19 * 10 *
The state of the s		S		10 mm/mu

t & mm/mU

[D] 18 18 / 18

8,85-25 Hz F58 55F 585

11.23.2223 29:42:25

CURGUIS HEALTHCARE

AT-182plus 1.24 C



			LABORATORY REPORT		
Name	:	Mr. Juned Belim	Reg. No	:	303100523
Sex/Age	:	Male/35 Years	Reg. Date	:	11-Mar-2023 08:49 AM
Ref. By	:		Collected On	:	
Client Name	:	Mediwheel	Report Date	;	

2D Echo Colour Doppler

OBSERVATION:

- 2 D Echo and color flew studies were done in long and short axis, apical and Sub coastal views.
- Normal LV size. No RWMA at rest.
- 2. Normal RV and RA. No Concentric LVH.
- 3. All Four valves are structurally normal.
- 4. Good LV systolic function. LVEF = 60%.
- 5. Normal LV Compliance.
- 6. Trivial TR. Mild MR. No AR.
- 7. No PAH. RVSP ≈ 30 mmHG.
- 8. Intact IAS and IVS.
- 9. No Clot, No Vegetation.
- 10. No perleardial effusion.

CONCLUSION

- 1. Normal LV size with Good LV systolic function.
- 2. No Concentric LVH , Normal LV Compliance
- 3. Trivial TR with No PAH. Mild MR. No AR
- 4. No RWMA at rest.

This echo doesn't rule out any kind of congenital cardiac anomalies.

Approximately the second secon

This is an electronically authenticated report

Dr.Jay Sonl

M.D, GENERAL MEDICINE

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CUROVIS HEALTHCARE PVT. LTD.



		LABORATORY REPO	DRT		
Vanse			Reg. No	;	303100523
ex/Age	; Male/35 Years		Reg. Date	:	11-Mar-2023 08:49 AN
Ref. By	:		Collected On	:	
lient Name	: Mediwheel		Report Date	:	11-Mar-2023 05:15 PN
		X RAY CHEST P	Δ		
Both lung	fields appear clear.				
No evider	nce of any active infiltra	ations or consolidation,			
Cardiac si	ze appears within norm	al limits.			
Both cost	o-phrenic angles appea	r free of fluid.			
Both dom	nes of diaphragm appea	r normal.			
COMMEN	VT: No significant abno	rmality is detected.			
		End Of Report			

DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494

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CUROVIS HEALTHCARE PVT. LTD.

This is an electronically authenticated report



*			LABORATORY REPORT			
Name	:	Mr. Juned Belim		Reg. No	:	303100523
Sex/Age	:	Male/35 Years		Reg. Date	;	11-Mar-2023 08:49 AM
Ref. By	;			Collected On	:	
Client Name		Mediwheel		Report Date		11-Mar-2023 05:14 PM

USG ABDOMEN

Liver appears normal in size, show increased homogenous parenchymal echo. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic billiary or portal radicals. PV is normal in caliber,

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas appears normal in size and echopattem. No evidence of focal lesions.

Spleen appears normal in size & normal in echopattern.

Both kidneys are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass on either side.

Left renal concretion

Urinary bladder contour is normal, No evidence of calculus or mass lesion.

Prostate is normal in size, show homogenous echo, outline is smooth.

No evidence of ascites,

No any lymphadenopathy seen.

No evidence of dilated small bowel loops.

COMMENTS:

- Grade I fatty liver.
- Left renal concretion.

This is an electronically authenticated report

DR DHAVAL PATEL Consultant Radiologist MB, DMRE

Reg No:0494

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CUROVIS HEALTHCARE PVT. LTD.



			LABORATORY REPORT		
Name	:	Mr. Juned Belim	Reg. No	:	303100523
Sex/Age	:	Male/35 Years	Reg. Date	;	11-Mar-2023 08:49 AM
Ref. By	;		Collected Or	:	
Client Name	<u>:</u>	Mediwheel	Report Date	:	11-Mar-2023 02:18 PM

Eye Check - Up

No Eye Complaints

RIGHT EYE.

SP: -0.50

CY: ±0.00

AX: 00

LEFT EYE.

 $\mathrm{SP}: -0.50$

CY : -0.25

AX:164

	Without Glasses	With Glasses
Right Eye	6/5	N.A
Left Eye	6/5	N.A

Near Vision: Right Eye - N/6, Left Eye - N/6

Fundus Examination - Within Normal Limits.

ColorVision: Normal

Comments: Normal

----- End Of Report

This is an electronically authenticated report

Dr Kejal Patel MB,DO(Ophth)

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CUROVIS HEALTHCARE PVT. LTD.



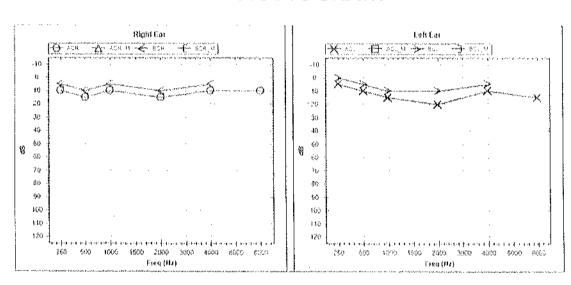
NAME:- JUNED BELIM.

ID NO :-

AGE:- 35Y/ M

Date:- 11/03/2023

AUDIOGRAM



-	MODE Air Conduction Bune		Bune Co	onduction	Colour		PALCYL PAR	l lance	
	EAR	Masked	betasked		onMasked		Threshold In dB	RIGHT	LEFT
	4 E F T		×)	>	β n-	AIR CONDUCTION	10.5	1.1
	RIGHT	Δ	0	1,	<	Prof	BONE CONDUCTION		
	NO RESPONS	šE: Add	l J below (he respe	ctive symb	ols	SPEECH		

Comments:-

Bilateral Hearing Sensitivity Within Normal Limits.

CUROVIS HEALTHCARE PVT. LTD.