

Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj Ph: 9235432681,

CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK MISHRA Registered On : 22/Jul/2023 09:44:53 Collected Age/Gender : 33 Y 9 M 11 D /M : 22/Jul/2023 09:51:32 UHID/MR NO : CALI.0000045829 Received : 22/Jul/2023 12:50:01 Visit ID : CALI0076612324 Reported : 22/Jul/2023 15:53:34

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

#### **DEPARTMENT OF HAEMATOLOGY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

Blood Group (ABO & Rh typing) \*\*, Blood

**Blood Group** 

Α

Rh (Anti-D)

**POSITIVE** 

Complete Blood Count (CBC) \*\* , Whole Blood

complete blood count (cb	c) , whole blood			
Haemoglobin	15.90	g/dl	1 Day- 14.5-22.5 g	g/dl
			1 Wk- 13.5-19.5 g	;/dl
			1 Mo- 10.0-18.0 g	;/dl
			3-6 Mo- 9.5-13.5	g/dl
			0.5-2 Yr- 10.5-13.	5 g/dl
			2-6 Yr- 11.5-15.5	g/dl
			6-12 Yr- 11.5-15.5	g/dl
			12-18 Yr 13.0-16.0	g/dl
		The state of the s	Male- 13.5-17.5 g	g/dl
			Female- 12.0-15.	5 g/dl
TLC (WBC)	5,300.00	/Cu mm	4000-10000	ELE
DLC				

TLC (WBC)	5,300.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils )	56.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	30.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	7.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	7.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	6.00	Mm for 1st hr.		
Corrected	0.00	Mm for 1st hr.	<9	
PCV (HCT)	48.00	%	40-54	
Platelet count				
Platelet Count	2.02	LACS/cu mm	1.5-4.0	ELECTRONIC
				IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	18.60	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	44.50	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.25	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	12.40	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	5.44	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				







Since 1991

# CHANDAN DIAGNOSTIC CENTRE

 $\label{eq:Add:B1/2} Add: B\ 1/2, Sector\ J, Near\ Sangam\ Chauraha, Lda\ Stadium\ Road, Aliganj\ Ph:\ 9235432681,$ 

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#### **DEPARTMENT OF HAEMATOLOGY**

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
MCV	92.50	fl	80-100	CALCULATED PARAMETER
MCH	29.20	pg	28-35	CALCULATED PARAMETER
MCHC	31.60	%	30-38	CALCULATED PARAMETER
RDW-CV	15.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	51.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,968.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	371.00	/cu mm	40-440	

Dr. Surbhi Lahoti (M.D. Pathology)







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Patient Name : Mr.ABHISHEK MISHRA : 22/Jul/2023 09:44:54 Registered On Age/Gender : 33 Y 9 M 11 D /M Collected : 22/Jul/2023 09:51:32 UHID/MR NO : CALI.0000045829 Received : 22/Jul/2023 12:24:46 Visit ID : CALI0076612324 Reported : 22/Jul/2023 14:20:28

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

#### **DEPARTMENT OF BIOCHEMISTRY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	U	nit Bio. Ref. Inte	erval Method	
GLUCOSE FASTING ** , Plasma					
Glucose Fasting	96.90	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD	

#### **Interpretation:**

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.

## GLYCOSYLATED HAEMOGLOBIN (HBA1C) \*\*, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.60	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	38.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	114	mg/dl	

# **Interpretation:**

#### NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	<b>Degree of Glucose Control Unit</b>
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level







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## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

N.B.: Test carried out on Automated VARIANT II TURBO HPLC Analyser.

#### **Clinical Implications:**

- \*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.
- \*With optimal control, the HbA 1c moves toward normal levels.
- \*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated \*Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy
- c. Alcohol toxicity d. Lead toxicity
- \*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss
- \*Pregnancy d. chronic renal failure. Interfering Factors:
- \*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) ** Sample:Serum	7.09	mg/dL	7.0-23.0	CALCULATED
Creatinine ** Sample:Serum	0.93	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- Female-20-320	MODIFIED JAFFES 275
Uric Acid ** Sample:Serum	6.10	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) **, Serum				
SGOT / Aspartate Aminotransferase (AST)	50.30	U/L	<35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	92.60	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	129.40	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.32	gm/dl	6.2-8.0	BIURET
Albumin	4.31	gm/dl	3.4-5.4	B.C.G.
Globulin	2.01	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	2.14		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	131.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	1.21	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.45	mg/dl	< 0.30	JENDRASSIK & GROF





<sup>\*</sup>High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

<sup>\*\*</sup>Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.



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#### **DEPARTMENT OF BIOCHEMISTRY**

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	U	Init Bio. Ref. Inte	rval Method
Bilirubin (Indirect) Result Rechecked	0.76	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE ( MINI ) ** , Serum				
Cholesterol (Total)	163.00	mg/dl	<200 Desirable 200-239 Borderline Hi > 240 High	CHOD-PAP igh
HDL Cholesterol (Good Cholesterol)	47.50	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	84	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optir 130-159 Borderline Hi 160-189 High > 190 Very High	
VLDL	31.90	mg/dl	10-33	CALCULATED
Triglycerides	159.50	mg/dl	< 150 Normal 150-199 Borderline Hi 200-499 High >500 Very High	GPO-PAP

Bring

Dr. Anupam Singh (MBBS MD Pathology)







Since 1991

Test Name

# CHANDAN DIAGNOSTIC CENTRE

Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj Ph: 9235432681,

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Method

Patient Name : Mr.ABHISHEK MISHRA Registered On : 22/Jul/2023 09:44:54 Age/Gender Collected : 33 Y 9 M 11 D /M : 22/Jul/2023 10:44:38 UHID/MR NO : CALI.0000045829 Received : 22/Jul/2023 12:18:34 Visit ID : CALI0076612324 Reported : 22/Jul/2023 19:00:49

Result

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

#### **DEPARTMENT OF CLINICAL PATHOLOGY**

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Unit

Rio Ref Interval

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE *	* , Urine			
Color	PALE YELLOW			
Specific Gravity	1.015			
Reaction PH	Acidic ( 5.0 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
		,	10-40 (+)	
			40-200 (++)	
			200-500 (+++) > 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
Sugai	ADJLINI	g111570	0.5-1.0 (++)	DIFSTICK
			1-2 (+++)	
			>2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobi <mark>lino</mark> gen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	0-1/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	ABSENT			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
SUGAR, FASTING STAGE ** , Urine				
Sugar, Fasting stage	ABSENT	gms%		

Interpretation:

(+) < 0.5

(++) 0.5-1.0

(+++) 1-2

(++++) > 2

Brin

Dr. Anupam Singh (MBBS MD Pathology)







Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj Ph: 9235432681,

CIN: U85110DL2003PLC308206



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Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

#### **DEPARTMENT OF IMMUNOLOGY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interva	l Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	125.62	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	9.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.89	μIU/mL	0.27 - 5.5	CLIA
Interpretation:				
, r		0.3-4.5 μIU/n	nL First Trimes	ster
		0.5-4.6 μIU/n	nL Second Trin	nester
		0.8-5.2 μIU/n	nL Third Trime	ster
		0.5-8.9 µIU/n	nL Adults	55-87 Years
		0.7-27 μIU/n	nL Premature	28-36 Week
		2.3-13.2 μIU/n	nL Cord Blood	> 37Week
		0.7-64 μIU/n		z - 20 Yrs.)
			/mL Child	0-4 Days
		1.7-9.1 μIU/r		2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- **4)** Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- **6**) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- **8)** Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

Bring

Dr. Anupam Singh (MBBS MD Pathology)



Home Sample Collection 1800-419-0002





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CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK MISHRA Registered On : 22/Jul/2023 09:44:56

 Age/Gender
 : 33 Y 9 M 11 D /M
 Collected
 : N/A

 UHID/MR NO
 : CALI.0000045829
 Received
 : N/A

Visit ID : CALI0076612324 Reported : 22/Jul/2023 13:08:04

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

#### **DEPARTMENT OF X-RAY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA \*

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

# **DIGITAL CHEST P-A VIEW**

- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

#### **IMPRESSION:**

NO SIGNIFICANT DIAGNOSTIC ABNORMALITY SEEN.

Dr. Pankaj Kumar Gupta (M.B.B.S D.M.R.D)









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Visit ID : CALI0076612324 Reported : 22/Jul/2023 12:03:28

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#### **DEPARTMENT OF ULTRASOUND**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

# **ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) \***

# WHOLE ABDOMEN ULTRASONOGRAPHY REPORT LIVER

 The liver is borderline enlarged in size (measures 15.4 cm) and shows diffused raised echogenicity of hepatic parenchyma with loss of periportal echoes ..... S/O grade II fatty liver. No focal lesion is seen.

#### PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- The portal vein is not dilated.
- Porta hepatis is normal.

#### **BILIARY SYSTEM**

- The intra-hepatic biliary radicles are normal.
- · Common duct is not dilated.
- The gall bladder is normal in size and has regular walls. Lumen of the gall bladder is anechoic.

#### **PANCREAS**

• The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

#### **KIDNEYS**

- Right kidney is normal in size ~ 11.8 x 4.3 cm position and cortical echotexture. Corticomedullary demarcation is maintained.
- Left kidney is normal in size ~ 11.9 x 4.5 cm position and cortical echotexture. Cortico-medullary demarcation is maintained.
- The collecting system of both the kidneys are not dilated.

## SPLEEN

• The spleen is borderline enlarged in size ~ 12.1 cm and has a normal homogenous echo-texture.

# **ILIAC FOSSAE & PERITONEUM**

- Scan over the iliac fossae does not reveal any fluid collection or mass.
- No free fluid is noted in peritoneal cavity.

# **URINARY BLADDER**







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#### DEPARTMENT OF ULTRASOUND

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

 The urinary bladder is normal. Bladder wall is normal in thickness and is regular. No calculus is seen.

#### **PROSTATE**

The prostate gland is normal in size with smooth outline. (volume ~ 14.2 cc).

#### FINAL IMPRESSION

- BORDERLINE HEPATOMEGALWITH GRADE II FATTY INFILTRATION.
- BORDERLINE SPLENOMEGALY.

## Adv: Clinico-pathological correlation and follow-up.

#### \*\*\* End Of Report \*\*\*

(\*\*) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, GLUCOSE PP, SUGAR, PP STAGE, ECG / EKG



Dr. Pankaj Kumar Gupta (M.B.B.S D.M.R.D)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \*

\*Facilities Available at Select Location









Chandan healthcare <chandanhealthcare26@gmail.com>

# Re: Health Check up Booking Request(bobE42088), Beneficiary Code-82036

1 message

anurag sri <anurag.idc@gmail.com>

Thu, Jul 13, 2023 at 3:16 PM

To: Mediwheel <wellness@mediwheel.in>, Chandan healthcare <chandanhealthcare26@gmail.com> Cc: customercare@mediwheel.in

Confirmed

Pack Code: 2613

On Thu, Jul 13, 2023 at 12:39 PM Mediwheel <wellness@mediwheel.in> wrote:



011-41195959 Email:wellness@mediwheel.in

Dear Chandan Healthcare Limited.

City: Lucknow. Address: B1/2 Sec-J, Aligani, Lucknow. We have received the confirmation for the following booking .

Name : MR. MISHRA ABHISHEK

Age : 31 Gender : Male

**Package Name** : Full Body Health Checkup Male Below 40

: 96167 40675 **Contact Details Booking Date** : 13-07-2023

Appointment Date: 22-07-2023



	Member Inform	nation		
Booked Member Name	Age	Gender	Cost(In INR)	
MR. MISHRA ABHISHEK	31	Male	Cashless	
To	tal amount to be paid	Cashless		Y

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

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

> Ecg, Eye Check Up, TSH, X-ray Chest, Blood Sugar Postprandial, A:q 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,

Tests included in this Package

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

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Good Day

Please find the attachment





