



LETTER OF APPROVAL / RECOMMENDATION

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

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. SUDHA
EC NO.	127318
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	AHMEDABAD, MOTERA
BIRTHDATE	20-07-1993
PROPOSED DATE OF HEALTH CHECKUP	28-10-2023
BOOKING REFERENCE NO.	23D127318100070204E

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 **22-09-2023** till **31-03-2024** 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 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 Mediwheel (Arcofemi Healthcare Limited))

भारत सरकार
Government of India

सुधा
SUDHA
पिता : महाबीर सिंह
Father : MAHABEER SINGH
जन्म तिथि / DOB : 20/07/1993
महिला / Female

7336 0115 7467

आधार - आम आदमी का अधिकार

8708853983

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



Unique Identification Authority of India

पता:
D/O: महाबीर सिंह, क्यू आर टी
64/2, ई एस टी लेन, अजयभाघ,
मिनी बे, साउथ अंडमान, स्कूल
लाइन, अंडमान एंड निकोबार दीप,
744103

Address:
D/O: Mahaboor Singh, QRT NO
74/2, IST LANE, AJAYBHAG,
Minnie Bay, South Andaman,
School Line, Andaman And
Nicobar Islands, 744103

1947
1800 300 1947

help@uidai.gov.in

www
www.uidai.gov.in

7336 0115 7467


TEST REPORT

Reg. No : 310101307	Ref Id :	Collected On : 28-Oct-2023 11:21 AM
Name : Ms. Sudha Mahabeer Singh		Reg. Date : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female	Pass. No. :	Tele No. : 8708853983
Ref. By :		Dispatch At :
Sample Type : EDTA		Location : CHPL

Parameter	Results	Unit	Biological Ref. Interval
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COMPLETE BLOOD COUNT (CBC)

Hemoglobin (Colorimetric method)	13.2	g/dL	12.5 - 16
Hematocrit (Calculated)	L 38.70	%	40 - 50
RBC Count (Electrical Impedance)	4.76	million/cmm	4.73 - 5.5
MCV (Calculated)	L 81.3	fL	83 - 101
MCH (Calculated)	27.7	Pg	27 - 32
MCHC (Calculated)	34.1	%	31.5 - 34.5
RDW (Calculated)	12.8	%	11.5 - 14.5
WBC Count Flowcytometry with manual Microscopy	9000	/cmm	4000 - 10000
MPV (Calculated)	10.5	fL	6.5 - 12.0

<u>DIFFERENTIAL WBC COUNT</u>	[%]		<u>EXPECTED VALUES</u>	[Abs]	<u>EXPECTED VALUES</u>
Neutrophils (%)	63	%	40 - 80	5670 /cmm	2000 - 7000
Lymphocytes (%)	30	%	20 - 40	2700 /cmm	1000 - 3000
Eosinophils (%)	02	%	0 - 6	450 /cmm	200 - 1000
Monocytes (%)	05	%	2 - 10	180 /cmm	20 - 500
Basophils (%)	00	%	0 - 2	0 /cmm	0 - 100

PERIPHERAL SMEAR STUDY

RBC Morphology Normocytic and Normochromic.
 WBC Morphology Normal

PLATELET COUNTS

Platelet Count (Electrical Impedance) 399000 /cmm 150000 - 450000
 Electrical Impedance
 Platelets Platelets are adequate with normal morphology.
 Parasites Malarial parasite is not detected.
 Comment -

This is an electronically authenticated report.
 * This test has been out sourced.

Approved By : 
 Dr. Keyur V Patel
 MB,DCP

Generated On : 28-Oct-2023 07:10 PM

Approved On : 28-Oct-2023 03:27 PM

Page 1 of 10



LABORATORY REPORT

Name : Ms. Sudha Mahabeer Singh
Sex/Age : Female/30 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 310101307
Reg. Date : 28-Oct-2023 11:21 AM
Collected On :
Report Date : 28-Oct-2023 02:54 PM

Medical Summary

GENERAL EXAMINATION

Height (cms) :156

Weight (kgs) :56.5

Blood Pressure : 118/78mmHg

Pulse :76 /Min

No Clubbing/Cynosis/Pallor/PedelOedem

Systemic Examination:

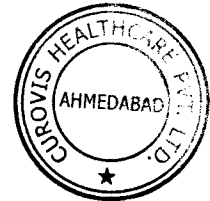
Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

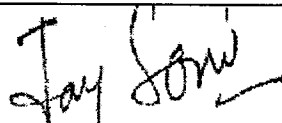
Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy – N/A



This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE



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Name : Ms. Sudha Mahabeer Singh		Reg. Date : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female	Pass. No. :	Tele No. : 8708853983
Ref. By :		Dispatch At :
Sample Type : EDTA		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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HEMATOLOGY

BLOOD GROUP & RH

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

ABO	"O"
Rh (D)	Positive
Note	-

ERYTHROCYTE SEDIMENTATION RATE [ESR]


ESR 1 hour <i>Westergreen method</i>	10	mm/hr	ESR AT 1 hour : 3-12
--	----	-------	----------------------

ERYTHRO SEDIMENTATION 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 pregnancy 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.

This is an electronically authenticated report.

* This test has been out sourced.

Approved By : 
Dr. Keyur Patel
M.B.DCP

Approved On : 28-Oct-2023 03:26 PM

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TEST REPORT


Reg. No : 310101307 **Ref Id** :
Name : Ms. Sudha Mahabeer Singh **Collected On** : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female **Pass. No.** : **Reg. Date** : 28-Oct-2023 11:21 AM
Ref. By : **Tele No.** : 8708853983
Sample Type : Flouride F, Flouride PP **Dispatch At** :
Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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BIO - CHEMISTRY

Fasting Blood Sugar (FBS) <i>GOD-POD Method</i>	105.10	mg/dL	70 - 110
Post Prandial Blood Sugar (PPBS) <i>GOD-POD Method</i>	104.7	mg/dL	70 - 140

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TEST REPORT

Reg. No : 310101307	Ref Id :	Collected On : 28-Oct-2023 11:21 AM
Name : Ms. Sudha Mahabeer Singh		Reg. Date : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female	Pass. No. :	Tele No. : 8708853983
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
Lipid Profile			
Cholesterol	226.00	mg/dL	Desirable: <200.0 Borderline High: 200-239 High: >240.0
<i>Enzymatic, colorimetric method</i>			
Triglyceride	130.40	mg/dL	Normal: <150.0 Borderline: 150-199 High: 200-499 Very High : > 500.0
<i>Enzymatic, colorimetric method</i>			
HDL Cholesterol	66.90	mg/dL	Low: <40 High: >60
<i>Accelerator selective detergent method</i>			
LDL	133.02	mg/dL	Optimal: <100.0 Near Optimal: 100-129 Borderline High: 130-159 High : 160-189 Very High : >190.0
<i>Calculated</i>			
VLDL	26.08	mg/dL	15 - 35
<i>Calculated</i>			
LDL / HDL RATIO	1.99		0 - 3.5
<i>Calculated</i>			
Cholesterol /HDL Ratio	3.38		0 - 5.0
<i>Calculated</i>			

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TEST REPORT

Reg. No : 310101307	Ref Id :	Collected On : 28-Oct-2023 11:21 AM
Name : Ms. Sudha Mahabeer Singh		Reg. Date : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female	Pass. No. :	Tele No. : 8708853983
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
LFT WITH GGT			
Total Protein	7.69	gm/dL	1Day: 3.4-5.0 1Day to 1Month: 4.6-6.8 2 to 12Months: 4.8-7.6 >=1Year : 6.0-8.0 Adults : 6.6-8.7
<i>Biuret Reaction</i>			
Albumin	5.03	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
<i>By Bromocresol Green</i>			
Globulin (Calculated)	2.66	g/dL	2.3 - 3.5
A/G Ratio (Calculated)	1.89		0.8 - 2.0
SGOT	26.30	U/L	0 - 40
<i>UV without P5P</i>			
SGPT	24.00	U/L	0 - 40
<i>UV without P5P</i>			
Alkaline Phosphatase	131.9	IU/l	42 - 98
<i>P-nitrophenyl phosphatase-AMP Buffer, Multiple-point rate</i>			
Total Bilirubin	0.54	mg/dL	0.3 - 1.2
<i>Vanadate Oxidation</i>			
Direct Bilirubin	0.14	mg/dL	0.0 - 0.4
<i>Vanadate Oxidation</i>			
Indirect Bilirubin	0.40	mg/dL	0.0 - 1.1
<i>Calculated</i>			
GGT	19.70	U/L	< 32
<i>SZASZ Method</i>			

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TEST REPORT


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Name : Ms. Sudha Mahabeer Singh		Reg. Date : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female	Pass. No. :	Tele No. : 8708853983
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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BIO - CHEMISTRY

Uric Acid <i>Enzymatic, colorimetric method</i>	3.22	mg/dL	2.6 - 6.0
Creatinine <i>Enzymatic Method</i>	0.64	mg/dL	0.6 - 1.1
BUN <i>UV Method</i>	9.20	mg/dL	6.0 - 20.0

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Generated On : 28-Oct-2023 07:10 PM

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**TEST REPORT**

Reg. No : 310101307	Ref Id :	Collected On : 28-Oct-2023 11:21 AM
Name : Ms. Sudha Mahabeer Singh		Reg. Date : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female	Pass. No. :	Tele No. : 8708853983
Ref. By :		Dispatch At :
Sample Type : Urine Spot		Location : CHPL

Test	Result	Unit	Biological Ref. Interval
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URINE ROUTINE EXAMINATION**PHYSICAL EXAMINATION**

Quantity	15 cc	
Colour	Pale Yellow	
Clarity	Clear	Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)


pH	6.0	4.6 - 8.0
Sp. Gravity	1.025	1.001 - 1.035
Protein	Nil	Nil
Glucose	Nil	Nil
Ketone Bodies	Nil	Nil
Urobilinogen	Nil	Nil
Bilirubin	Nil	
Nitrite	Nil	Nil
Blood	Nil	Nil

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	1 - 2/hpf	Absent
Erythrocytes (Red Cells)	Nil	Absent
Epithelial Cells	1 - 2/hpf	Absent
Crystals	Absent	Absent
Casts	Absent	Absent
Amorphous Material	Absent	Absent
Bacteria	Absent	Absent
Remarks	-	

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Dr. Keyur Patel
M.B.DCP

Generated On : 28-Oct-2023 07:10 PM

Approved On : 28-Oct-2023 05:00 PM

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**TEST REPORT**

Reg. No : 310101307	Ref Id :	Collected On : 28-Oct-2023 11:21 AM
Name : Ms. Sudha Mahabeer Singh		Reg. Date : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female	Pass. No. :	Tele No. : 8708853983
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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IMMUNOLOGY**THYROID FUNCTION TEST**

T3 (Triiodothyronine) <i>CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY</i>	1.30	ng/mL	0.86 - 1.92
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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) <i>CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY</i>	7.80	µg/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 T4 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 altered levels of total T4 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 sites.
- 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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MB,DCP

Generated On : 28-Oct-2023 07:10 PM

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TEST REPORT

Reg. No : 310101307	Ref Id :	Collected On : 28-Oct-2023 11:21 AM
Name : Ms. Sudha Mahabeer Singh		Reg. Date : 28-Oct-2023 11:21 AM
Age/Sex : 30 Years / Female	Pass. No. :	Tele No. : 8708853983
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

TSH 3.760 μ IU/ml 0.35 - 5.50
CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

Thyroid stimulating 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-releasing 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 μ IU/mL

Second Trimester : 0.2 to 3.0 μ IU/mL

Third trimester : 0.3 to 3.0 μ IU/mL

Reference : Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders, 2012: 2170

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Approved By : 
Dr. Keyur V Patel
MB, DCP

Generated On : 28-Oct-2023 07:10 PM

Approved On : 28-Oct-2023 05:29 PM

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LABORATORY REPORT

Name : Ms. Sudha Mahabeer Singh
Sex/Age : Female/30 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 310101307
Reg. Date : 28-Oct-2023 11:21 AM
Collected On :
Report Date : 28-Oct-2023 03:08 PM

Electrocardiogram

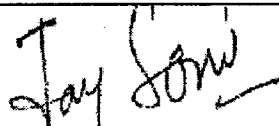
Findings

Normal Sinus Rhythm.

Within Normal Limit.



This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE

SUDHA
LEKHI

42
Female

38 years / 56 kg
156 cm

HR 76/min

P axis: 43°

QRS 24°

T 62°

Intervals:

RR 788 ms

P 96 ms

PR 138 ms

QRS 82 ms

QT 372 ms

QTc 423 ms
(Bazett)

10 mm/mV

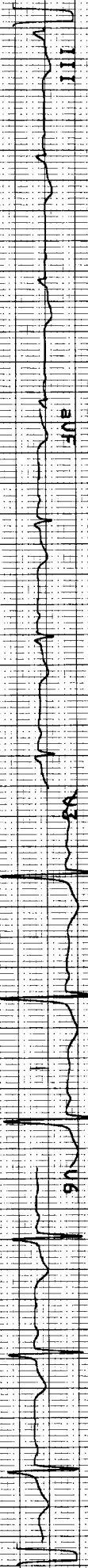
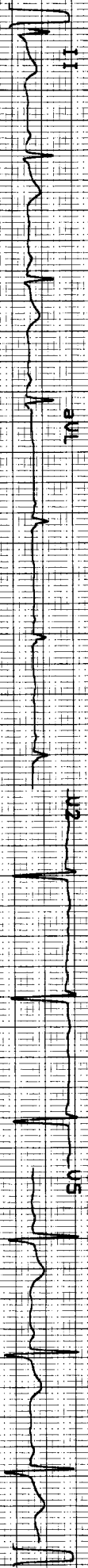
P (T1) 0.08 mV

S (V1) -0.79 mV

R (V5) 0.88 mV

Sokol. 1.89 mV

10 mm/mV



10 mm/mV

25 mm/s

0.05-25 Hz F50 55F 585 29.10.2023 13:06:47

CURIOUS HEALTHCARE

PT-102PLUS 1.24 C



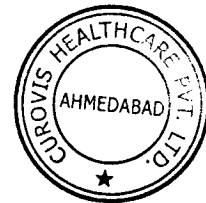
LABORATORY REPORT

Name : Ms. Sudha Mahabeer Singh
Sex/Age : Female/30 Years
Ref. By :
Client Name : Mediwheel

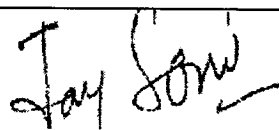
Reg. No : 310101307
Reg. Date : 28-Oct-2023 11:21 AM
Collected On :
Report Date : 28-Oct-2023 03:08 PM

2D Echo Colour Doppler

1. No concentric LVH.
2. Normal sized LA, LV, RA, RV.
3. Normal LV systolic function, LVEF: 60%.
4. No RWMA.
5. Normal LV compliance.
6. All cardiac valves are structurally normal.
7. Trivial MR, Trivial TR, Trivial PR, No AR.
8. No PAH, RVSP: 28 mm Hg.
9. IAS/IVS: Intact.
10. No clot/vegetation/pericardial effusion.
11. No coarctation of aorta.



This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE

Page 2 of 4

Name: Ms. Sudha Mahabeer Singh

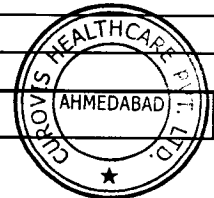
M MODE FINDINGS:

MITRAL VALVE	OBSERVED	NORMAL VALUES	LV FUNCTION
Anterior leaflet	Normal		LVA(d) :
EF Slope		70-150mm/sec	LVL (d) :
Opening Amplitude			LVA(s) :
Posterior leaflet	Normal		LVL(s) :
E.P.S.S.		mm	LVV(d) :
Mitral Valve Prolapse	No		LVV(s) :
Vegetation	No		LVEF : 60%
TRICUSPID VALVE		LV COMPLIANCE	
Normal		Normal	

PULMONARY VALVE	OBSERVED	NORMAL VALUES	MVO AREA
EF Slope		6-115 mm	By Planimetry :
A' Wave -			
Midsystolic notch -			By PHT :
Flutter -			
Other Findings			

DIMENSIONS:			AORTIC VALVE		
1. Lvd. (Diastole)	42 mm		Cuspal Opening	16mm	
2. Lvd. (Systole)	25 mm	24-42 mm	Closure line	Central	
3. RVID (Diastole)	13mm	7-23 mm	Eccentricity index	1	
4. IVS (Diastole)	10mm		Other findings	Absent	
5. IVS (Systole)	12mm				
6. LVPWT (Diastole)	10mm	6-11 mm			
7. LVPM (Systole)	11mm				
8. Aortic root	30 mm	22-37 mm			
9. Left Atrium:	36 mm	19-40 mm			
10. LVEF	60%				

COLOUR DOPPLER FINDINGS:			
STRUCTURE	REGURGRADING	VELOCITY1 m/sec Max/Mean	GRADIENT 5 Mm Hg Peak/Mean
MITRAL VALVE	Trivial	0.80	3.30
TRICUSPID VALVE	Trivial	0.60	1.40
PULMONARY VALVE	Trivial	0.85	2.25
AORTIC	No	1.20	6.0





LABORATORY REPORT

Name : Ms. Sudha Mahabeer Singh	Reg. No : 310101307
Sex/Age : Female/30 Years	Reg. Date : 28-Oct-2023 11:21 AM
Ref. By :	Collected On :
Client Name : Mediwheel	Report Date : 28-Oct-2023 05:14 PM

X RAY CHEST PA

Both lung fields appear clear.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

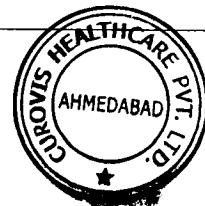
COMMENT: No significant abnormality is detected.

----- End Of Report -----

This is an electronically authenticated report



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





LABORATORY REPORT

Name : Ms. Sudha Mahabeer Singh
Sex/Age : Female/30 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 310101307
Reg. Date : 28-Oct-2023 11:21 AM
Collected On :
Report Date : 28-Oct-2023 05:13 PM

USG ABDOMEN

Liver appears normal in size & in echogenicity. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic biliary 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 Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & 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.

Urinary bladder is partially distended. No evidence of calculus or mass lesion.

Uterus appears normal. No adnexal mass is seen.

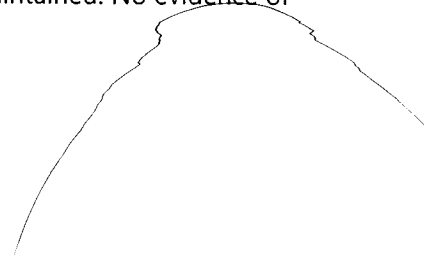
No evidence of ascites.

No evidence of lymph adenopathy.

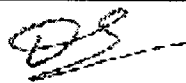
No evidence of dilated small bowel loops.

COMMENTS :

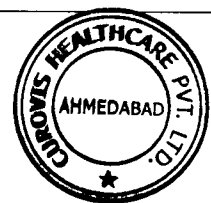
NO SIGNIFICANT ABNORMALITY DETECTED.



This is an electronically authenticated report



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



Page 1 of 2



LABORATORY REPORT

Name :	Ms. Sudha Mahabeer Singh	Reg. No :	310101307
Sex/Age :	Female/30 Years	Reg. Date :	28-Oct-2023 11:21 AM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	28-Oct-2023 02:46 PM

Eye Check - Up

No Eye Complaints

RIGHT EYE

SP: -3.75

CY: -0.75

AX: 22

LEFT EYE

SP : -3.50

CY : -0.50

AX :164

	Without Glasses	With Glasses
Right Eye	6/24	6/5
Left Eye	6/18	6/5

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)

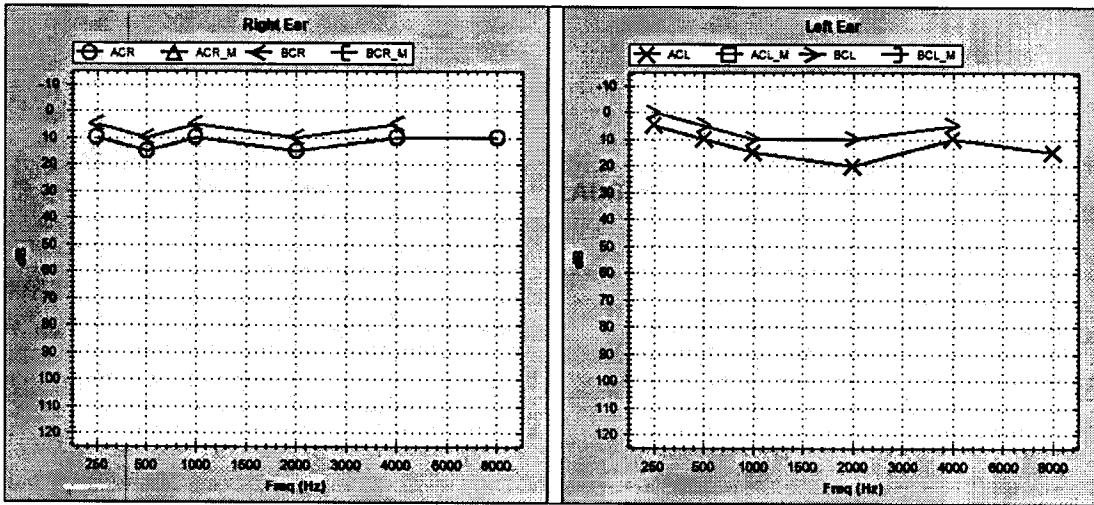


LABORATORY REPORT

Name : Ms. Sudha Mahabeer Singh
 Sex/Age : Female/30 Years
 Ref. By :
 Client Name : Mediwheel

Reg. No : 310101307
 Reg. Date : 28-Oct-2023 11:21 AM
 Collected On :
 Report Date : 28-Oct-2023 01:40 PM

AUDIOGRAM



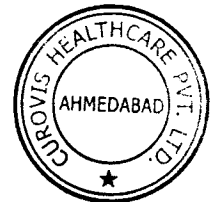
EAR	MODE	Air Conduction		Bone Conduction		Colour Code
		Masked	UnMasked	Masked	UnMasked	
LEFT		□	×	⊔	>	Blue
RIGHT		△	○	⊞	<	Red

NO RESPONSE: Add ↓ below the respective symbols

Threshold In dB	RIGHT	LEFT
AIR CONDUCTION	10	10
BONE CONDUCTION		
SPEECH		

Comments: -Bilateral Hearing Sensitivity Within Normal Limits

----- End Of Report -----



This is an electronically authenticated report

Jay Soni

Dr. Jay Soni
 M.D, GENERAL MEDICINE