

idc. ashiyana <idcashiyana@gmail.com>

Fwd: Health Check up Booking Confirmed Request(bobE45357), Package Code-PKG10000236, Beneficiary Code-78677

1 message

anurag sri <anurag.idc@gmail.com>

To: "idc. ashiyana" <idcashiyana@gmail.com>

Tue, Aug 29, 2023 at 6:18 PM

Pack Code: 2639

- Forwarded message

From: Mediwheel <wellness@mediwheel.in>

Date: Tue, Aug 29, 2023 at 12:16 PM

Subject: Health Check up Booking Confirmed Request(bobE45357), Package Code-PKG10000236, Beneficiary

Code-78677

To: <anurag.idc@gmail.com> Cc: <customercare@mediwheel.in>



011-41195959 Email:wellness@mediwheel.in

Hi Chandan Healthcare Limited.

Diagnostic/Hospital Location : M-214/215 Sec G LDA Colony Near Power House Chauraha Kanpur road, City: Lucknow

We have received the confirmation for the following booking .

Beneficiary Name: PKG10000236

Beneficiary Name: MR. SINGH HARDEO

Member Age Member Gender : Male

Member Relation : Employee

Package Name : Medi-Wheel Full Body Health Checkup Male Above 40

Location : LUCKNOW, Uttar Pradesh-226005

Contact Details : 9415791441

Booking Date : 29-08-2023 Appointment Date: 03-09-2023

Instructions to undergo Health Check:

- 1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- 2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- 3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
- 4. Please bring all your medical prescriptions and previous health medical records with you.
- 5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.

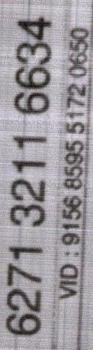


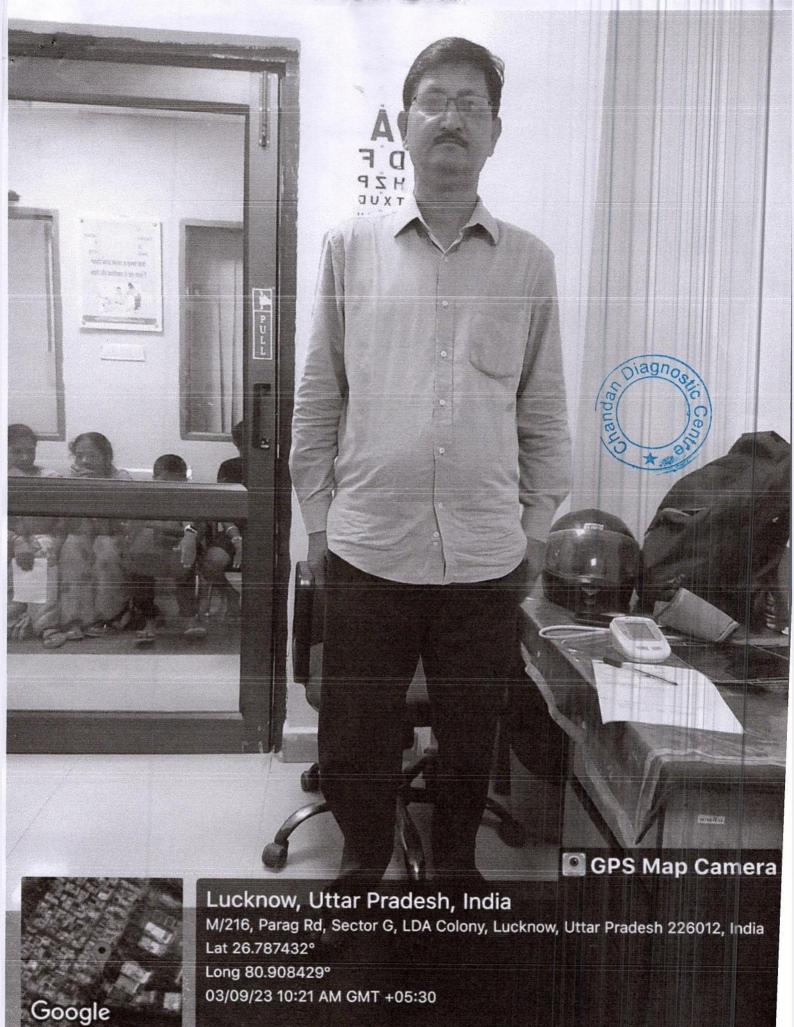
Government of India आरत सरकार

हरदेव सिंह Hardeo Singh जन्म तिथि/DOB: 20/12/1966









trice Ball

54/Male Age / Ger der:

Mr. HARDEO SINGH CDCA0176112324 Patient N me: Patient II:

Date and Time: 3rd Sep 23 10:04 AM

V4 V5 9/ Copyright 25 of 2029 Triding Health 72 73 7 0 20Hz, 50Hz 2 .. 0 mm/s 10.0 mm/mV aVR aVF aVL Ξ

ECG With: Normal Limits: Sinus R 19thm. Please correlate clinically.

. 13.

Dr. Charit MD, DM: Cardfology

63382

REPORTED BY

AUTHORIZED 6Y

P-F-T: 47° 15° 34°

PRI: 142ms

OTCB: 420ms

QT; 382ms

QRSD: 72ms

VR: 73bpm

3: 73bpn

Dr. Prajna Jinachandra Jain



Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mr.HARDEO SINGH Registered On : 03/Sep/2023 09:32:39 Age/Gender : 54 Y 8 M 22 D /M Collected : 03/Sep/2023 09:45:52 UHID/MR NO : CDCA.0000071393 : 03/Sep/2023 11:29:44 Received Visit ID : CDCA0176112324 Reported : 03/Sep/2023 15:28:11

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

DEPARTMENT OF HAEMATOLOGY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) *, Blood				
Blood Group	0			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE
Rh (Anti-D)	POSITIVE			AGGLUTINA ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
				Addedition
Complete Blood Count (CBC) * , Whole Blood	1			
Haemoglobin	13.50	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl	
		The same	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	
			Male- 13.5-17.5 g/dl	
TLC (WBC)	6,400.00	/Cu mm	Female- 12.0-15.5 g/dl 4000-10000	ELECTRONIC IMPEDANCE
DLC	0,400.00	/Cu IIIII	4000-10000	LELCTROINIC IIVIPEDANCE
Polymorphs (Neutrophils)	73.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	18.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	8.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	1.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils ESR	0.00	%	<1	ELECTRONIC IMPEDANCE
Observed	16.00	Mm for 1st hr.		
Corrected	10.00	Mm for 1st hr.	<9	
PCV (HCT)	40.00	%	40-54	
Platelet count				
Platelet Count	1.2	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.70	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	62.10	%	35-60	ELECTRONIC IMPEDANCE







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DEPARTMENT OF HABMATOLOGY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PCT (Platelet Hematocrit)	0.16	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume) RBCCount	15.60	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count	4.50	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	88.88	fl	80-100	CALCULATED PARAMETER
MCH	30.00	pg	28-35	CALCULATED PARAMETER
MCHC	33.75	%	30-38	CALCULATED PARAMETER
RDW-CV	12.30	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	40.80	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,672.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	64.00	/cu mm	40-440	







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

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

GLUCOSE FASTING * , Plasma

Glucose Fasting 159.80 mg/dl < 100 Normal GOD POD

100-125 Pre-diabetes

≥ 126 Diabetes

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.







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Patient Name : Mr.HARDEO SINGH : 03/Sep/2023 09:32:40 Registered On : 54 Y 8 M 22 D /M Collected Age/Gender : 03/Sep/2023 09:45:52 UHID/MR NO : CDCA.0000071393 Received : 03/Sep/2023 14:52:34 Visit ID : CDCA0176112324 Reported : 03/Sep/2023 17:24:46

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

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit E	Bio. Ref. Interval	Method	
GLYCOSYLATED HAEM OGLOBIN (HBA1C)	* * , EDTA BLOOD				
Glycosylated Haemoglobin (HbA1c)	7.00	% NGSP		HPLC (NGSP)	
Glycosylated Haemoglobin (HbA1c)	53.00	mmol/mol/IFCC			
Estimated Average Glucose (eAG)	154	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)	Degree of Glucose Control Unit
> 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

^{*}High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

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





^{**}Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.



Since 1991

Ref Doctor

CHANDAN DIAGNOSTIC CENTRE

Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



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Age/Gender : 54 Y 8 M 22 D /M
UHID/MR NO : CDCA.0000071393
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: Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

Registered On

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: 03/Sep/2023 09:32:40

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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

c. Alcohol toxicity d. Lead toxicity



Dr. Anupam Singh (MBBS MD Pathology)





^{*}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.



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Patient Name : Mr.HARDEO SINGH Registered On : 03/Sep/2023 09:32:40 Age/Gender Collected : 03/Sep/2023 09:45:51 : 54 Y 8 M 22 D /M UHID/MR NO : CDCA.0000071393 Received : 03/Sep/2023 11:47:10 Visit ID : CDCA0176112324 Reported : 03/Sep/2023 17:09:42

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

DEPARTM ENT OF BIOCHEMISTRY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) * Sample:Serum	12.51	mg/dL	7.0-23.0	CALCULATED
Creatinine * Sample:Serum	1.00	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid * Sample:Serum	8.74	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT)	29.20 30.10	U/L U/L	< 35 < 40	IFCC WITHOUT P5P IFCC WITHOUT P5P
Gamma GT (GGT) Protein	39.90 7.65	IU/L gm/dl	11-50 6.2-8.0	OPTIMIZED SZAZING BIURET
Albumin	4.94	gm/dl	3.4-5.4	B.C.G.
Globulin	2.71	gm/dl	1.8-3.6	CALCULATED
A:G Ratio Alkaline Phosphatase (Total)	1.82 170.77	U/L	1.1-2.0 42.0-165.0	CALCULATED IFCC METHOD
Bilirubin (Total)	0.63	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.10	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.53	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) *, Serum				
Cholesterol (Total)	123.30	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	41.30	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	41	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima 130-159 Borderline High 160-189 High > 190 Very High	
VLDL	40.99	mg/dl	10-33	CALCULATED
Triglycerides	204.94	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP







Since 1991

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Patient Name Age/Gender

: Mr.HARDEO SINGH : 54 Y 8 M 22 D /M

Registered On Collected

: 03/Sep/2023 09:32:40 : 03/Sep/2023 09:45:51

UHID/MR NO Visit ID

: CDCA.0000071393 : CDCA0176112324

Received Reported

: 03/Sep/2023 11:47:10 : 03/Sep/2023 17:09:42

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: Dr.Mediwheel - Arcofemi Health Care Ltd. Status

: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method









Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mr.HARDEO SINGH Registered On : 03/Sep/2023 09:32:40 Age/Gender Collected : 03/Sep/2023 16:06:33 : 54 Y 8 M 22 D /M UHID/MR NO : CDCA.0000071393 : 03/Sep/2023 17:01:54 Received Visit ID : CDCA0176112324 Reported : 03/Sep/2023 18:45:30

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

DEPARTMENT OF CLINICAL PATHOLOGY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
URINE EXAMINATION, ROUTINE * ,	Urine				
Color	LIGHT YELLOW				
Specific Gravity	1.010				
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	
			0.5-1.0 (++)		
			1-2 (+++)		
	STATES		>2 (++++)		
Ketone	ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY	
Bile Salts	ABSENT				
Bile Pigments	ABSENT				
Urobilinogen(1:20 dilution) Microscopic Examination:	ABSENT		1		
	ADCENT			MODOSCODIO	
Epithelial cells	ABSENT			MICROSCOPIC EXAMINATION	
Pus cells	ABSENT			LAAMINATION	
RBCs	ABSENT			MICROSCOPIC	
11003	7,552111			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







Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

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DEPARTMENT OF CLINICAL PATHOLOGY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

SUGAR, PP STAGE*, Urine

Sugar, PP Stage

ABSENT

Interpretation:

(+) < 0.5 gms%

(++) 0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%









Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mr.HARDEO SINGH : 03/Sep/2023 09:32:40 Registered On Age/Gender : 54 Y 8 M 22 D /M Collected : 03/Sep/2023 09:45:51 UHID/MR NO : CDCA.0000071393 Received : 03/Sep/2023 14:23:47 Visit ID : CDCA0176112324 Reported : 03/Sep/2023 17:51:55

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

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
DOL (D		, .			
PSA (Prostate Specific Antigen), Total ** Sample: Serum	1.920	ng/mL	< 3.0	CLIA	

Interpretation:

- 1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
- 2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone.
- 3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
- 4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
- 5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

THYROID PROFILE - TOTAL **, Serum

T3, Total (tri-iodothyronine)	124.52	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.960	uIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimest	er
0.5-4.6	$\mu IU/mL$	Second Trim	ester
0.8 - 5.2	$\mu IU/mL$	Third Trimes	ter
0.5 - 8.9	μIU/mL	Adults	55-87 Years
0.7 - 27	μIU/mL	Premature	28-36 Week
2.3-13.2	$\mu IU/mL$	Cord Blood	> 37Week
0.7-64	μIU/mL	Child(21 wk	- 20 Yrs.)
1-39	$\mu IU/mL$	Child	0-4 Days
1.7-9.1	$\mu IU/mL$	Child	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.







Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

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DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

- 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)







Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mr.HARDEO SINGH Registered On : 03/Sep/2023 09:32:41

 Age/Gender
 : 54 Y 8 M 22 D /M
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000071393
 Received
 : N/A

Visit ID : CDCA0176112324 Reported : 03/Sep/2023 14:38:32

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

DEPARTMENT OF X-RAY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

(300 mA COMPUTERISED UNIT SPOT FILM DEVICE)

CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- 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 RADIOLOGICAL ABNORMALITY SEEN ON PRESENT STUDY.











Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mr.HARDEO SINGH Registered On : 03/Sep/2023 09:32:41

 Age/Gender
 : 54 Y 8 M 22 D /M
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000071393
 Received
 : N/A

Visit ID : CDCA0176112324 Reported : 03/Sep/2023 14:24:21

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

DEPARTMENT OF ULTRASOUND MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOM EN (UPPER & LOWER) *

<u>LIVER</u>

• The liver is mildly enlarged in size, measuring 15.4 cm and has a normal homogenous echotexture. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is normal at the porta.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct is normal at the porta. (7.3 mm)
- The gall bladder is normal in size and has regular walls. Wall thickness is normal. Lumen of the gall bladder is anechoic.

PANCREAS

The pancreas is normal in size and shape and has a normal homogenous echotexture.

RIGHT KIDNEY (11.2 x 4.1 cm)

- Right kidney is normal in size and shape and cortical echotexture.
- The collecting system is not dilated.
- The upper part of right ureter is normal.
- The vesicoureteric junction is normal.
- Corticomedullary demarcation is clear.
- Renal respiratory excursions are normal.

<u>LEFT KIDNEY (12.2 x 4.7 cm)</u>

- Left kidney is normal in size and shape and cortical echotexture.
- The collecting system is not dilated.
- The upper part of left ureter is normal.
- The vesicoureteric junction is normal.
- Corticomedullary demarcation is clear.
- Renal respiratory excursions are normal.

SPLEEN



Home Sample Collection 1800-419-0002



Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mr.HARDEO SINGH Registered On : 03/Sep/2023 09:32:41

 Age/Gender
 : 54 Y 8 M 22 D /M
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000071393
 Received
 : N/A

Visit ID : CDCA0176112324 Reported : 03/Sep/2023 14:24:21

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

DEPARTMENT OF ULTRASOUND MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

• The spleen is normal in size (11.5 cm) and has a homogenous echotexture.

ILIAC FOSSA

• Scan over the iliac fossae does not reveal any fluid collection or mass.

URINARY BLADDER

- The urinary bladder is normal. Bladder wall is normal in thickness and regular.
- Pre-void urine volume is ~ 291 cc.
- Post-void residual urine volume is ~ 48 cc.

PROSTATE

• The prostate gland is moderately enlarged in size, measuring 5.0 x 4.6 x 4.3 cm (vol-53.54 cc).

IMPRESSION

- Mild hepatomegaly.
- Grade-II prostatomegaly with mildly significant post void residue.

Recommended: clinicopathological correlation.









Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mr.HARDEO SINGH Registered On : 03/Sep/2023 09:32:41

 Age/Gender
 : 54 Y 8 M 22 D /M
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000071393
 Received
 : N/A

Visit ID : CDCA0176112324 Reported : 03/Sep/2023 18:18:00

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

DEPARTM ENT OF TM T M EDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Tread Mill Test (TMT) *

2D ECHO & M-MODE EXAMINATION VALUES MITRAL VALVE STUDY

DE Excursion :	1.78	cm
E F Slope :	7.56	cm/s
EPSS:	1.14	cm
VALVE AREA (MVOA) PERIMETRY	3.66	cm ²
PHT:	3.60	Cm ²

AORTIC VALVES STUDY

Aortic Diam :	3.36	cm
LA Diam.	3.08	cm
AV Cusp.	0.92	cm

LEFT VENTRICLE

IVSD	0.96	Cm
LVIDD	4.37	Cm
LV PWD	0.85	Cm
IVSS	1.00	Cm
LVIDS	3.00	Cm
LV PWS	1.01	Cm
₽DV	86	MI
ESV	34	MI

EJECTION FRACTION :	60 %	(60 ± 7 %)
SV (Teich)	51 ml	

SHÖRTENING FRACTION: 31 % (30 ± 5%)

RIGHT VENTRICLE

RVID: 2.01 cm.







Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mr.HARDEO SINGH Registered On : 03/Sep/2023 09:32:41

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 Received
 : N/A

Visit ID : CDCA0176112324 Reported : 03/Sep/2023 18:18:00

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

DEPARTM ENT OF TMT

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

<u>DIMENSIONAL IMAGING</u>

MITRAL VALVE: Normal **AORTIC VALVE** Normal PULMONARY VALVE: Normal TRICUSPID VALVE Normal INTERVENTRICULAR SEPTA: Normal INTERATRIAL SEPTUM: Normal INTRACARDIAC CLOT / VEGETATION / MYXOMA: Absent LEFT ATRIUM: Normal LEFT VENTRICLE Normal RIGHT VENTRICLE: Normal **RIGHT ATRIUM:** Normal PERICARDIUM: Normal OTHER: Normal

COLOUR FLOW MAPPING

DOPPLER STUDY

VELOCITY cm/s PRESSURE GRADIENT E: 75 cm/s REGURGITATION MITRAL FLOW A: 58 cm/s Normal AORTIC FLOW 86 cm/s Normal TRICUSPID FLOW 44 cm/s Normal PULM ONARY FLOW 69 cm/s Normal

SUMMARY OF FINDINGS AND ECHOCARDIOGRAPHY DIAGNOSIS

- LVEF 60 %
- RWMA not seen.
- No Diastolic dysfunction.
- No MS/TS/AS/PS.
- No MR/TR/PR/AR.
- No pericardial effusion.
- No vegetation.

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

E EXAMINATION, GLUCOSE PP, ECG / EKG

DR_SUDHANSHU_VERMA

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





