

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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On : 01/Mar/2022 09:03:15 Age/Gender : 29 Y 0 M 9 D /F Collected : 01/Mar/2022 09:19:33 UHID/MR NO : CDCA.0000081107 Received : 01/Mar/2022 09:50:08 Visit ID : CDCA0300142122 Reported : 01/Mar/2022 13:23:39

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

12.20

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

g/dl

1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl

Blood Group (ABO & Rh typing) *, Blood

Blood Group O
Rh (Anti-D) POSITIVE

Complete Blood Count (CBC) *, Blood

Haemoglobin

			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	
TIC (MDC)	7.600.00	10	Female- 12.0-15.5 g/d	
TLC (WBC) <u>DLC</u>	7,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
Polymorphs (Neutrophils)	78.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	16.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	12.00	Mm for 1st hr.		
Corrected	4.00	Mm for 1st hr.	. < 20	
PCV (HCT)	38.00	cc %	40-54	
Platelet count				
Platelet Count	1.10	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.50	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	NR	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.19	%	0.108-0.282	ELECTRONIC IMPEDANCE

fL

Mill./cu mm 3.7-5.0

6.5-12.0



RBC Count

MPV (Mean Platelet Volume)



ELECTRONIC IMPEDANCE

ELECTRONIC IMPEDANCE

17.20

4.00



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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On : 01/Mar/2022 09:03:15 Age/Gender : 29 Y 0 M 9 D /F Collected : 01/Mar/2022 09:19:33 UHID/MR NO : CDCA.0000081107 : 01/Mar/2022 09:50:08 Received Visit ID : CDCA0300142122 Reported : 01/Mar/2022 13:23:39 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. : Final Report Status

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	95.00	fl	80-100	CALCULATED PARAMETER
MCH	30.50	pg	28-35	CALCULATED PARAMETER
MCHC	32.10	%	30-38	CALCULATED PARAMETER
RDW-CV	13.80	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	48.20	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	5,928.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	228.00	/cu mm	40-440	









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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA : 01/Mar/2022 09:03:15 Registered On Age/Gender : 29 Y 0 M 9 D /F Collected : 01/Mar/2022 13:03:25 UHID/MR NO : CDCA.0000081107 Received : 01/Mar/2022 14:25:35 Visit ID Reported : CDCA0300142122 : 01/Mar/2022 15:29:19

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	Unit	Bio. Ref. Interval	Method	
GLUCOSE FASTING * , Plasma					
Glucose Fasting	117.33	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.

Glucose PP *	122.00	mg/dl	<140 Normal	GOD POD
Sample:Plasma After Meal			140-199 Pre-diabetes	
			>200 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.









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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA : 01/Mar/2022 09:03:15 Registered On Age/Gender : 29 Y 0 M 9 D /F Collected : 01/Mar/2022 09:19:33 UHID/MR NO : CDCA.0000081107 Received : 01/Mar/2022 17:01:09 Visit ID Reported : CDCA0300142122 : 01/Mar/2022 17:25:53 : Dr.Mediwheel - Arcofemi Health Care Ltd. Ref Doctor : Final Report Status

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit B	io. Ref. Interval	Method	
GLYCOSYLATED HAEMOGLOBIN (HBA1C)	** , EDTA BLOOD				
Glycosylated Haemoglobin (HbA1c)	5.40	% NGSP		HPLC (NGSP)	
Glycosylated Haemoglobin (Hb-A1c)	36.00	mmol/mol/IFCC			
Estimated Average Glucose (eAG)	108	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 G8 90 SL TOSOH HPLC Analyser.





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



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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA : 01/Mar/2022 09:03:15 Registered On Age/Gender : 29 Y 0 M 9 D /F Collected : 01/Mar/2022 09:19:33 UHID/MR NO : CDCA.0000081107 Received : 01/Mar/2022 17:01:09 Visit ID : CDCA0300142122 Reported : 01/Mar/2022 17:25:53

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

DEPARTMENT OF BIOCHEMISTRY

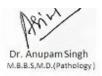
MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

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.











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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On : 01/Mar/2022 09:03:15 : 01/Mar/2022 09:19:33 Age/Gender : 29 Y 0 M 9 D /F Collected UHID/MR NO : CDCA.0000081107 Received : 01/Mar/2022 11:12:43 Visit ID : CDCA0300142122 Reported : 01/Mar/2022 13:14:08 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	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) * Sample:Serum	10.20	mg/dL	7.0-23.0	CALCULATED
Creatinine * Sample:Serum	1.05	mg/dl	0.5-1.2	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) * Sample:Serum	62.00	ml/min/1.73m2	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid *	4.70	mg/dl	2.5-6.0	URICASE
Sample:Serum				
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	17.20	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	15.90	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	12.89	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.71	gm/dl	6.2-8.0	BIRUET
Albu <mark>min </mark>	4.43	gm/dl	3.8-5.4	B.C.G.
Globulin	2.28	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.94		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	69.54	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.83	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.33	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.50	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	127.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	33.99	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	74	mg/dl	< 100 Optimal 100-129 Nr.	CALCULATED
			Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	
VLDL	18.76	mg/dl	10-33	CALCULATED
Triglycerides	93.80	mg/dl	< 150 Normal 150-199 Borderline High	GPO-PAP







UHID/MR NO

Ref Doctor

Visit ID

INDRA DIAGNOSTIC CENTRE

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

Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On Age/Gender : 29 Y 0 M 9 D /F Collected

: CDCA.0000081107

: CDCA0300142122 Report : Dr.Mediwheel - Arcofemi Health Care Ltd. Status

Collected Received Reported : 01/Mar/2022 09:19:33 : 01/Mar/2022 11:12:43 : 01/Mar/2022 13:14:08

: 01/Mar/2022 09:03:15

: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

200-499 High >500 Very High











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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On : 01/Mar/2022 09:03:15 Age/Gender : 29 Y 0 M 9 D /F Collected : 01/Mar/2022 13:03:25 UHID/MR NO : CDCA.0000081107 Received : 01/Mar/2022 14:09:48 Visit ID : CDCA0300142122 Reported : 01/Mar/2022 15:09:14

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

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE *	, Urine			
Color	PALE 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 (+++)	
			> 2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT	ing/ ai	0.2 2.01	DIOCHEIVIISTICI
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	Few			MICROSCOPIC
Epitheliai celis	1 EW			EXAMINATION
Pus cells ·	OCCASIONAL			MICROSCOPIC
. 45 55.15				EXAMINATION
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
SUGAR, FASTING STAGE *, Urine				
Sugar, Fasting stage	ABSENT	gms%		
T				
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,

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On : 01/Mar/2022 09:03:15 Age/Gender Collected : 01/Mar/2022 13:03:25 : 29 Y 0 M 9 D /F UHID/MR NO : CDCA.0000081107 Received : 01/Mar/2022 14:09:48 Visit ID : CDCA0300142122 Reported : 01/Mar/2022 15:09:14

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

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 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 : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA : 01/Mar/2022 09:03:15 Registered On Age/Gender : 29 Y 0 M 9 D /F Collected : 01/Mar/2022 09:19:33 UHID/MR NO : CDCA.0000081107 Received : 01/Mar/2022 16:26:48 Visit ID : CDCA0300142122 Reported : 01/Mar/2022 17:30:29 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

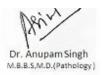
DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

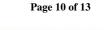
Test Name	Result	Unit	Bio. Ref. Interva	l Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	124.52	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	9.38	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	4.01	μIU/mL	0.27 - 5.5	CLIA
Interpretation:				
		0.3-4.5 μIU/1	nL First Trimes	ster
		0.5-4.6 μIU/1	nL Second Trir	mester
		0.8-5.2 μIU/r	nL Third Trime	ester
		0.5-8.9 μIU/1	nL Adults	55-87 Years
		0.7-27 μIU/ı	mL Premature	28-36 Week
		2.3-13.2 μIU/r		> 37Week
		0.7-64 μIU/r		
			/mL Child	0-4 Days
		1.7-9.1 μIU/ı		2-20 Week
		1 4 4 4		

- 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.









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 : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On : 01/Mar/2022 09:03:16

 Age/Gender
 : 29 Y 0 M 9 D /F
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000081107
 Received
 : N/A

Visit ID : CDCA0300142122 Reported : 01/Mar/2022 16:16:32

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) 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.
- Faint patchy density seen in left upper lobe.

IMPRESSION

• Faint patchy density left upper lobe, (?) infective.

Advised: clinicopathological correlation, follow up.











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

Ph: 9235432707,

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On : 01/Mar/2022 09:03:16

 Age/Gender
 : 29 Y 0 M 9 D /F
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000081107
 Received
 : N/A

Visit ID : CDCA0300142122 Reported : 01/Mar/2022 11:32:44

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

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER

• The liver is normal in size 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 are normal at the porta.
- 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

- 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.

LEFT KIDNEY

- 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.







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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SHIVANI PATEL W/O ASHENDRA KUMA Registered On : 01/Mar/2022 09:03:16

 Age/Gender
 : 29 Y 0 M 9 D /F
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000081107
 Received
 : N/A

Visit ID : CDCA0300142122 Reported : 01/Mar/2022 11:32:44

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

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

SPLEEN

• The spleen is normal in size 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.

UTERUS

- The uterus is anteverted and anteflexed position and is normal in size.
- It has a homogenous myometrial echotexture.
- The endometrium is seen in midline.
- Cervix is normal.

UTERINE ADNEXA

- Adnexa on both sides are normal.
- Both the ovaries are normal in size.

CUL-DE-SAC

• Pouch of Douglas is clear.

IMPRESSION

No significant sonological abnormality is seen on this study.

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG



Dr. Anoop Agarwal MBBS,MD(Radiology)

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









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	SHIVANI PATEL
DATE OF BIRTH	20-02-1993
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	01-03-2022
BOOKING REFERENCE NO.	21M100792100012854S
	SPOUSE DETAILS
EMPLOYEE NAME	MR. KUMAR ASHENDRA
EMPLOYEE EC NO.	100792
EMPLOYEE DESIGNATION	BRANCH HEAD
EMPLOYEE PLACE OF WORK	BEDAROO
EMPLOYEE BIRTHDATE	07-07-1988

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 26-02-2022 till 31-03-2022. 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/-

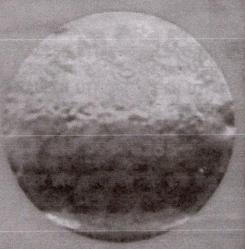
Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

भारत निर्वाचन आयोग पहचान पत्र

ELECTION COMMISSION OF INDIA
IDENTITY CARD

TXQ3402682



निर्वाचक का नाम :

शिवानी पटेल

Elector's Name : SHIVANI PATEL

पिता का नाम : शिव प्रसाद

Father's Name : SHIV PRASAD

निंग / Sex : महिला / Female

JEJITATA DOB: 20/02/1993



Shivani



Indra Diagnostic Centre Alambagh, Lucknow



Age / Gender:

29/Female

Date and Time: 1st Mar 22 9:34 AM

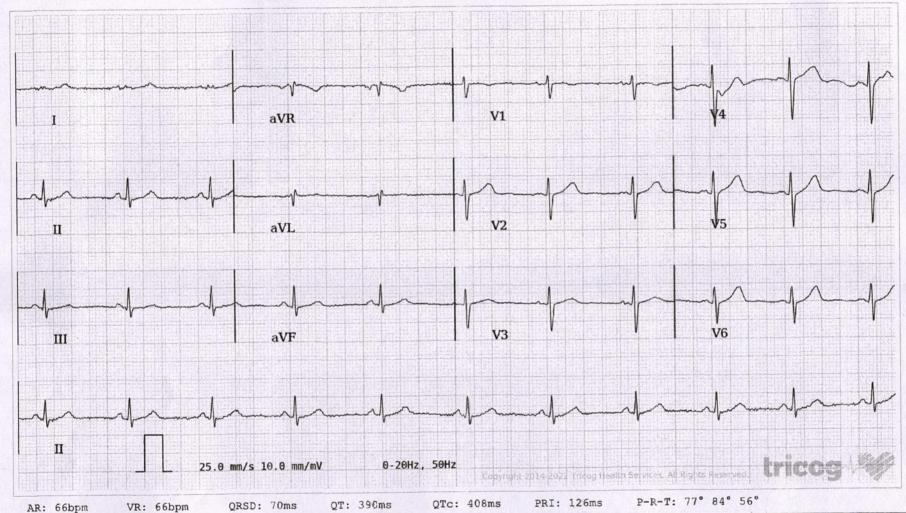
Patient ID:

CDCA0300142122

Patient Name:

Mrs. SHIVANI PATEL W/O ASHENDRA

KUMAR



ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please correlate clinically.

AUTHORIZED BY

REPORTED BY

Dr. Charit MD, DM: Cardiology Dr Ponnambalam

63382

47596

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.