

Health Check up Booking Confirmed Request(bobE29391),Package Code-PKG10000242,
Beneficiary Code-11706

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Hi Manipal Hospitals,

Diagnostic/Hospital Location :NH-24 Hapur Road,Oppo. Bahmeta Village, Near Lancroft
Golf Links Apartment,City:Ghaziabad

We have received the confirmation for the following booking .

Beneficiary Name : PKG10000242

Beneficiary Name : MR. SEHGAL RAJEEV

Member Age : 57

Member Gender : Male

Member Relation: Employee

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

Location : GHAZIABAD,Uttar Pradesh-NULL

Contact Details : 7678461612

Booking Date : 14-02-2023

Appointment Date : 24-02-2023

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.

Vent. rate 78 bpm
PR interval 138 ms
QRS duration 112 ms
QT/QTc 376/428 ms
P-R-T axes 79 89 19

*** Poor data quality, interpretation may be adversely affected
Normal sinus rhythm with sinus arrhythmia
Right bundle branch block
Abnormal ECG

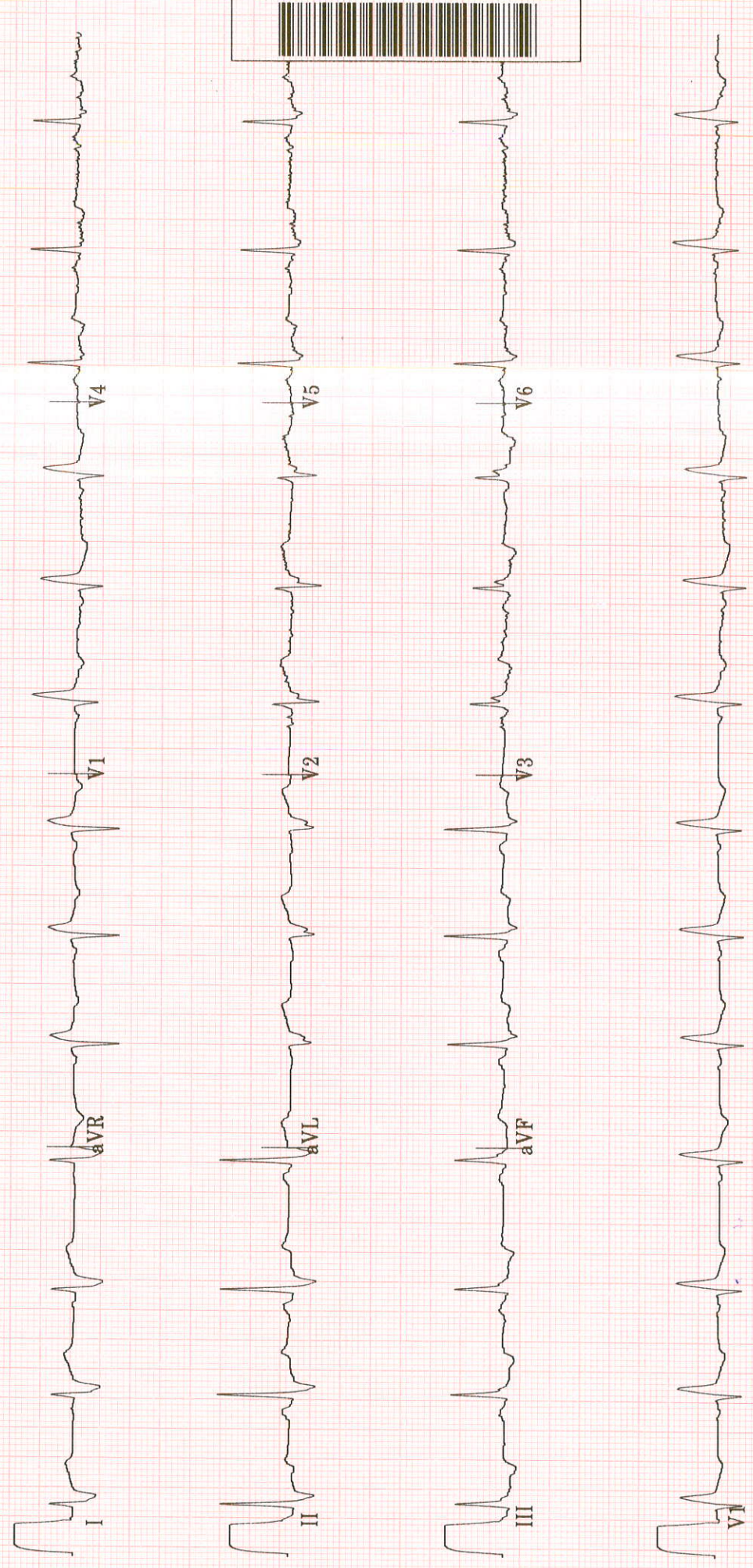
60years
Male
Caucasian



Technician:
Test ind:

Referred by:

Unconfirmed





INVESTIGATION REPORT

Patient Name : Mr Rajeev SEHGAL	Location	Ghaziabad
Age/Sex 59Year(s)/male	Visit No	: V0000000001-GHZB
MRN No : MH010803102	Order Date	:24/02/2023
Ref. Doctor HCP	Report Date	: 24/02/2023

EchocardiographyFinal Interpretation

1. No RWMA, LVEF=60%.
2. Grade II LV diastolic dysfunction.
3. Trace MR, No AR.
4. Trace TR, No PAH.
5. No intracardiac clot/mass/pericardial pathology.

Chambers & valves:

- **Left Ventricle:** It is normal sized.
- **Left Atrium:** It is normal sized.
- **Right Atrium:** It is normal sized.
- **Right Ventricle:** It is normal sized.
- **Aortic Valve:** It appears normal.
- **Mitral Valve:** Opens normally. Subvalvular apparatus appear normal.
- **Tricuspid Valve:** It appears normal.
- **Pulmonic Valve:** It appears normal.
- **Main Pulmonary artery & its branches:** Appear normal.
- **Pericardium:** There is no pericardial effusion.

Description:

- LV is normal size with normal contractility.

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002

P : 0120-616 5666

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

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INVESTIGATION REPORT

Patient Name : Mr Rajeev SEHGAL	Location	Ghaziabad
Age/Sex 59Year(s)/male	Visit No	: V000000001-GHZB
MRN No :MH010803102	Order Date	24/02/2023
Ref. Doctor : HCP	Report Date	:24/02/2023

EchocardiographyMeasurements (mm):

	Observed values	Normal values
Aortic root diameter	30	20-36 (22mm/M ²)
Aortic valve opening	19	15-26
Left atrium size	35	19-40

	End Diastole	End Systole	Normal Values
Left ventricle size	40	25	(ED=37-56:Es=22-40)
Interventricular septum	11	14	(ED=6-12)
Posterior wall thickness	10	13	(ED=5-10)

LV Ejection Fraction (%)	60%	55%-80%
HR		

Color & Doppler evaluation:

Valve	Velocity(cm/s)	Regurgitation
Mitral	E<A DT-	Trace
Aortic	173	Nil
Tricuspid	56	Trace
Pulmonary	139	Nil

Dr. Bhupendra Singh
MD, DM (CARDIOLOGY), FACC
Sr. Consultant Cardiology

Dr. Abhishek Singh
MD, DNB (CARDIOLOGY), MNAMS
Sr. Consultant Cardiology

Dr. Sudhanshu Mishra
Cardiology Registrar

Manipal Hospital, Ghaziabad

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RADIOLOGY REPORT

Name	Rajeev SEHGAL	Modality	DX
Patient ID	MH010803102	Accession No	R5204116
Gender/Age	M / 59Y 7M 18D	Scan Date	24-02-2023 10:24:18
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	24-02-2023 15:10:56

XR- CHEST PA VIEW

FINDINGS:

LUNGS: Normal.
 TRACHEA: Normal.
 CARINA: Normal.
 RIGHT AND LEFT MAIN BRONCHI: Normal.
 PLEURA: Normal.
 HEART: Normal.
 RIGHT HEART BORDER: Normal.
 LEFT HEART BORDER: Normal.
 PULMONARY BAY: Normal.
 PULMONARY HILA: Normal.
 AORTA: Aortic knuckle calcification is seen. Rest normal.
 THORACIC SPINE: Normal.
 OTHER VISUALIZED BONES: Normal.
 VISUALIZED SOFT TISSUES: Normal.
 DIAPHRAGM: Normal.
 VISUALIZED ABDOMEN: Normal.
 VISUALIZED NECK: Normal.

IMPRESSION:

No significant abnormality noted.

Recommend clinical correlation.



Dr. Monica Shekhawat, MBBS, DNB,
Consultant Radiologist, Reg No MCI 11 10887

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RADIOLOGY REPORT

Name	Rajeev SEHGAL	Modality	US
Patient ID	MH010803102	Accession No	R5204117
Gender/Age	M / 59Y 7M 18D	Scan Date	24-02-2023 11:10:14
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	24-02-2023 12:07:43

USG ABDOMEN & PELVIS**FINDINGS**

LIVER: appears normal in size (measures 148 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade II fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 92 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 9.6 mm.

COMMON BILE DUCT: Appears normal in size and measures 4.1 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 94 x 46 mm. It shows a concretion measuring 2 mm at mid calyx.

Left Kidney: measures 96 x 46 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 36 x 33 x 32 mm with volume 20 cc. Rest normal.

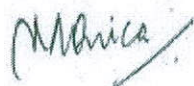
SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

- Diffuse grade II fatty infiltration in liver.
- Right renal concretion.

Recommend clinical correlation.



Dr. Monica Shekhawat, MBBS, DNB,
Consultant Radiologist, Reg No MCI 11 10887

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LABORATORY REPORT

Name	: MR RAJEEV SEHGAL	Age	: 59 Yr(s) Sex :Male
Registration No	: MH010803102	Lab No	: 202302002606
Patient Episode	: H18000000266	Collection Date	: 24 Feb 2023 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 24 Feb 2023 16:38
Receiving Date	: 24 Feb 2023 10:59		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	5.5		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	4.0		<3 Optimal 3-4 Borderline >6 High Risk

Note:

Reference ranges based on ATP III Classifications.

KIDNEY PROFILE

Specimen: Serum

UREA	25.2	mg/dl	[15.0-40.0]
<i>Method: GLDH, Kinatic assay</i>			
BUN, BLOOD UREA NITROGEN	11.8	mg/dl	[8.0-20.0]
<i>Method: Calculated</i>			
CREATININE, SERUM	1.10	mg/dl	[0.70-1.20]
<i>Method: Jaffe rate-IDMS Standardization</i>			
URIC ACID	8.1	mg/dl	[4.0-8.5]
<i>Method:uricase PAP</i>			
SODIUM, SERUM	139.1	mmol/L	[136.0-144.0]
POTASSIUM, SERUM	4.55	mmol/L	[3.60-5.10]
SERUM CHLORIDE	103.1	mmol/l	[101.0-111.0]
<i>Method: ISE Indirect</i>			

eGFR (calculated)	73.1	ml/min/1.73sq.m	[>60.0]
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Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years.

LABORATORY REPORT

Name	: MR RAJEEV SEHGAL	Age	: 59 Yr(s) Sex :Male
Registration No	: MH010803102	Lab No	: 202302002606
Patient Episode	: H18000000266	Collection Date	: 24 Feb 2023 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 24 Feb 2023 16:37
Receiving Date	: 24 Feb 2023 10:59		

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

LIVER FUNCTION TEST

BILIRUBIN - TOTAL Method: D P D	0.93	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.19	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN(SERUM) Method: Calculation	0.74 #	mg/dl	[0.10-0.30]
TOTAL PROTEINS(SERUM) Method: BIURET	6.90	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.26	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.60	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.61		[1.00-2.50]
AST(SGOT) (SERUM) Method: IFCC W/O P5P	21.00	U/L	[0.00-40.00]
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	21.00	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	83.0	IU/L	[32.0-91.0]

LABORATORY REPORT

Name : MR RAJEEV SEHGAL Age : 59 Yr(s) Sex : Male
Registration No : MH010803102 Lab No : 202302002606
Patient Episode : H18000000266 Collection Date : 24 Feb 2023 09:53
Referred By : HEALTH CHECK MGD Reporting Date : 24 Feb 2023 16:38
Receiving Date : 24 Feb 2023 10:59

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GGT	41.0		[7.0-50.0]

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing B Rh(D) Positive

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

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-----END OF REPORT-----



Dr. Alka Dixit Vats
Consultant Pathologist

LABORATORY REPORT

Name : MR RAJEEV SEHGAL **Age** : 59 Yr(s) Sex :Male
Registration No : MH010803102 **Lab No** : 202302002607
Patient Episode : H18000000266 **Collection Date** : 24 Feb 2023 09:53
Referred By : HEALTH CHECK MGD **Reporting Date** : 24 Feb 2023 16:38
Receiving Date : 24 Feb 2023 09:53

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	96.0	mg/dl	[70.0-110.0]

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-----END OF REPORT-----

Allen

Dr. Alka Dixit Vats
Consultant Pathologist

LABORATORY REPORT

Name	: MR RAJEEV SEHGAL	Age	: 59 Yr(s) Sex :Male
Registration No	: MH010803102	Lab No	: 202302002608
Patient Episode	: H18000000266	Collection Date	: 24 Feb 2023 14:33
Referred By	: HEALTH CHECK MGD	Reporting Date	: 24 Feb 2023 16:48
Receiving Date	: 24 Feb 2023 14:33		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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PLASMA GLUCOSE

Specimen: Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS	145.0 #	mg/dl	[80.0-140.0]
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Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption , post exercise

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-----END OF REPORT-----



Dr. Alka Dixit Vats
Consultant Pathologist

LABORATORY REPORT

Name	: MR RAJEEV SEHGAL	Age	: 59 Yr(s) Sex :Male
Registration No	: MH010803102	Lab No	: 32230209371
Patient Episode	: H1800000266	Collection Date	: 24 Feb 2023 19:13
Referred By	: HEALTH CHECK MGD	Reporting Date	: 24 Feb 2023 23:00
Receiving Date	: 24 Feb 2023 19:34		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Specimen Type : Serum

THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA)	1.17	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	6.32	micg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	2.150	μIU/mL	[0.340-4.250]

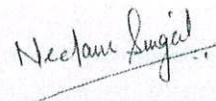
Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations,Ca or Fe supplements,high fibre diet,stress and illness affect TSH results.

* References ranges recommended by the American Thyroid Association

- 1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128
- 2) <http://www.thyroid-info.com/articles/tsh-fluctuating.html>

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-----END OF REPORT-----



Dr. Neelam Singal
CONSULTANT BIOCHEMISTRY

LABORATORY REPORT

Name	: MR RAJEEV SEHGAL	Age	: 59 Yr(s) Sex :Male
Registration No	: MH010803102	Lab No	: 202302002606
Patient Episode	: H18000000266	Collection Date	: 24 Feb 2023 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 24 Feb 2023 16:04
Receiving Date	: 24 Feb 2023 10:59		

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDEANCE)	5.15	millions/cu mm	[4.50-5.50]
HEMOGLOBIN	15.3	g/dl	[12.0-16.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	44.8	%	[40.0-50.0]
MCV (DERIVED)	87.0	fL	[83.0-101.0]
MCH (CALCULATED)	29.7	pg	[27.0-32.0]
MCHC (CALCULATED)	34.2	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.3	%	[11.6-14.0]
Platelet count	258	x 10 ³ cells/cumm	[150-400]
MPV (DERIVED)	9.2		
WBC COUNT (TC) (IMPEDEANCE)	8.45	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	59.0	%	[40.0-80.0]
Lymphocytes	31.0	%	[17.0-45.0]
Monocytes	5.0	%	[2.0-10.0]
Eosinophils	5.0	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	15.0 #	/1sthour	[0.0-

LABORATORY REPORT

Name	: MR RAJEEV SEHGAL	Age	: 59 Yr(s) Sex :Male
Registration No	: MH010803102	Lab No	: 202302002606
Patient Episode	: H18000000266	Collection Date	: 24 Feb 2023 10:59
Referred By	: HEALTH CHECK MGD	Reporting Date	: 24 Feb 2023 16:42
Receiving Date	: 24 Feb 2023 10:59		

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	5.0	(4.6-8.0)
Specific Gravity	1.005	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	1-2 /hpf	(0-2/hpf)
Epithelial Cells	nil /hpf	
CASTS	nil	
Crystals	nil	
OTHERS	nil	

LABORATORY REPORT

Name	: MR RAJEEV SEHGAL	Age	: 59 Yr(s) Sex :Male
Registration No	: MH010803102	Lab No	: 202302002606
Patient Episode	: H18000000266	Collection Date	: 24 Feb 2023 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 24 Feb 2023 17:21
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BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin)	5.7 #	%	[0.0-5.6]
Method: HPLC			

As per American Diabetes Association (ADA)
 HbA1c in %
 Non diabetic adults >= 18years <5.7
 Prediabetes (At Risk) 5.7-6.4
 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)	117	mg/dl
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Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	253 #	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	107	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	46.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	21	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	186.0 #	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189

Above optimal-100-129