



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	RENU DEVI
DATE OF BIRTH	02-11-1992
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	25-03-2023
BOOKING REFERENCE NO.	22M109174100051514S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. PRASAD SHYAMA KANT
EMPLOYEE EC NO.	109174
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	GIRIDIH
EMPLOYEE BIRTHDATE	05-01-1987

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 **21-03-2023** till **31-03-2023**. 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))





બંક ઓફ બરોડા
Bank of Baroda



નામ: SHYAMA KANT PRASAD
Name:

આધારક્રમ નં. 109174
E.C. No.:

અધિકારી પ્રાધિકારી
Issuing Authority

આધારક્રમ નં. 109174
Signature of



नामांकन क्रमांक/Enrolment No.: 1124/00107/06771

Date: 27/11/2013

Renu Devi (रेणु देवी)
W/O Shyamkant Prasad, PATEL NAGAR MORE,
SIRSA, KABIR GYAN MANDIR, PO- SIRSA, PS-
GRDHI, MU., Giridih, Giridih,
Jharkhand - 815301

सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- पहचान का प्रमाण ऑनलाइन ऑथेंटिकेशन द्वारा प्राप्त करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

आपका आधार क्रमांक/ Your Aadhaar No.:

6080 9442 3832



Validity unknown
Digitally signed by Renu Devi
Date: 2013.11.27 14:47:13

आधार-आम आदमी का अधिकार

1800 300 1547 help@uidai.gov.in www.uidai.gov.in

- आधार देश भर में मान्य है।
- आधार के बिना आपको एक ही बार नामांकन दर्ज करवाने की आवश्यकता है।
- कृपया अपना नवीनतम मोबाइल नंबर तथा ई-मेल पता दर्ज कराएं, इससे आपको विभिन्न सुविधाएं प्राप्त करने में सक्षम बनती होंगी।
- Aadhaar is valid throughout the country.
- You need to enrol only once for Aadhaar.
- Please update your mobile number and e-mail address. This will help you to avail various services in future.

भारत सरकार
GOVERNMENT OF INDIA

भारतीय विशिष्ट पहचान प्राधिकरण
INDIAN IDENTIFICATION AUTHORITY OF INDIA



रेणु देवी
Renu Devi
जन्म तिथि/DOB: 02/11/1992
महिला / FEMALE



पता:
W/O श्यामकान्त प्रसाद,
पटेल नगर मोड़, गिरमिया,
कबीर ज्ञान मंदिर, पो-
गिरमिया, थाना- गिरिडीह,
मु. गिरिडीह, जिरिडीह,
झारखण्ड - 815301

Address:
W/O Shyamkant Prasad, PATEL
NAGAR MORE, SIRSA, KABIR
GYAN MANDIR, PO- SIRSA, PS-
GRDHI, MU., Giridih, Giridih,
Jharkhand - 815301

6080 9442 3832

6080 9442 3832

आधार-आम आदमी का अधिकार Aadhaar-Aam Admi ka Adhikar

रेणु देवी





OUT PATIENT DEPARTMENT

Department of General Medicine



Mediwheel

Regd. No. : MAR23-44303
 Patient Name : MRS. RENU DEVI
 Age/Sex : 30 Y 4 M 23 D / Female
 Address : SIRSIA, GIRIDIH - 815301, Jharkhand, INDIA
 Doctor : Dr. Aditya Anurag MD (Medicine)

Visit : OPD/250323/5368
 Mobile : 9631126389
 Date : 25-Mar-2023 3:14 pm
 OPD Timing :
 Referred By :

Allergies :
 Height : Ft In Temp. :
 Weight : 65 Kg Pulse : 102
 C SPO2 : 99 %
 BPM B.P. : 100/60 mm/Hg

History and complaints :

pre-diabetes

No. chronic illn.

Examination:

Diagnosis:

neck-swelling

Investigations:
CXR-P/D - WNL.
SCG - WNL.

Medicines Prescribed:

USG-WIA - hepatogaly
LFT - WNL
HbA1C - b.o.

USG - Neck swelling

LFT - WNL
RBC - WLL

Advice :
 Days 7 (Diet / Lifestyle / Rehab)

Follow up:

Date :

Time :

*Prescription to be valid for 7 Days only.
 *This document is not valid for Medico-Legal purposes.

chest w/ arm

Adv.

① Maintain healthy lifestyle.

② T. ZSOLEMBIC - 40 1x1 - 10

Signature of Doctor
[Signature]
 25/3/23



25-Mar-23 13:53:34

MRS RENU DEVI

Female

30 Years

MEDICA DEHRAD



Rate 95 . Sinus rhythm.....normal P axis, V-rate 50- 99
 . Borderline repolarization abnormality.....ST dep & abnormal T

PR 133
 QRSD 78
 QT 334
 QTc 420

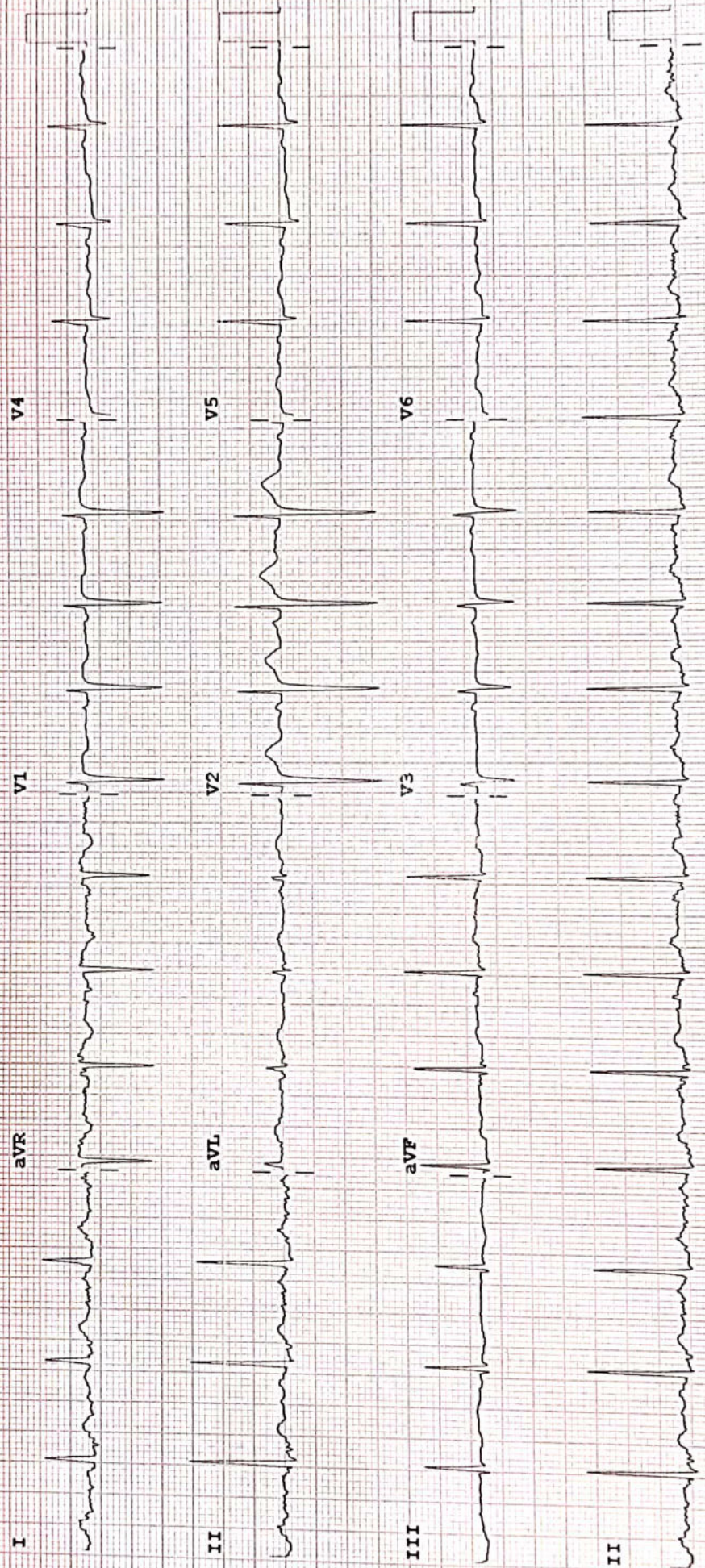
--AXIS--

P 15
 QRS 44
 T -14

12 Lead; Standard Placement

Unconfirmed Diagnosis

- BORDERLINE ECG -



Device:

Speed: 25 mm/sec

Lim: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-100 Hz W

PH100B CL

P?

RADIOLOGY REPORT

Patient Information			
Patient Name	MRS RENU DEVI	Patient ID	44303
Age Gender	30 YRS /FEMALE	Scan Date	MAR 25 2023
Referring Doctor	SELF	Report Date	MAR 25 2023

CHEST X-RAY

Trachea and mediastinum central.
Cadio thotactic ratio within top normal limits.
Hilar shadows normal.
Both diaphragm are of equal height and normal in shape and position.
Both lungs field clear.
Both Cp angles clear.
No active lung lesion seen.
Soft tissue shadow normal.

Impression..NORMAL STUDY

R. K. Airon

Dr. R. K. Airon

MD Radiodiagnosis (HN-008701/77))

Consultant Radiologist

MRS RENU DEVI 30Y DR SELF | 1



24 HOUR EMERGENCY

© AHL/D/0070/4068/February/23

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



An ISO 9001 : 2015
Organisation



असर्फी हॉस्पिटल

सबके लिए स्वास्थ्य

ECHOCARDIOGRAPHY REPORT

Name: **MRS RENU DEVI**

Age: **30**

Sex: **Female**

Date: **25/03/2023**

2D & M-MODE MEASUREMENTS

IVSd	0.9 cm
LVIDd	4.4 cm
LVPWd	0.9 cm
IVSs	1.3 cm
LVIDs	2.8 cm
Ao Diam	2.5 cm
LA Diam	3.5 cm

2D & M-MODE CALCULATIONS

EDV(Teich)	88 ml
ESV(Teich)	29 ml
EF(Teich)	68 %
%FS	37 %
SV(Teich)	60 ml
Lvd Mass	145.66 g
RWT	0.43
LA/Ao	1.42

MITRAL VALVE

MV E Vel	0.87 m/s
MV DecT	173 ms
MV Dec Slope	5.0 m/s ²
MV A Vel	0.68 m/s
MV E/A Ratio	1.28

AORTIC VALVE

AV Vmax	1.04 m/s
AV maxPG	4.36 mmHg

TRICUSPID VALVE

PULMONARY VALVE

COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- NORMAL LV SYSTOLIC FUNCTION (EF-63%)
- TRACE MR, NO AR, NO TR
- IAS, IVS INTACT
- NO CLOT, PE
- IVC NORMAL

IMPRESSION:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- NORMAL LV SYSTOLIC FUNCTION (EF-63%)
- TRACE MR

DR. UDAY SHANKAR
(NON-INVASIVE CARDIOLOGIST)

TECH. SIG

Asarfi Hospital Limited

© AHL/D/0065/4021/Jan/23



Baramuri, P.O. - Bishunpur Polytechnic, Dhanbad - 828130 CIN : U85110JH2005PLC011673

Branch Office : Dhैया Khatal Road, ISM, Dhanbad. Regd. Office : Phularitand, Kharkharae, Dhanbad - 828130

Ph.: 9234302735, 9234651512, 9234681514 Email : info@asarfihospital.com / www.asarfihospital.com

RADIOLOGY REPORT

Reg. No.	44303	Ref. Dr.	SELF
Name	MRS. RENU DEVI	Study	USG WHOLE ABDOMEN
Age & Sex	30Y /F	Reporting Date	25.03.2023

USG WHOLE ABDOMEN

- LIVER** : Liver is enlarged in size and measures 15.8cm. It appears normal in echotexture. No obvious focal lesion is seen. IHBR are not dilated.
- GALL BLADDER** : GB is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- CBD** : CBD is normal in course & caliber.
- PV** : PV is normal in course & caliber.
- PANCREAS** : Pancreas is normal in size, shape & echotexture. Peripancreatic soft tissues appear normal. MPD is not dilated.
- SPLEEN** : Spleen is normal in shape, size & echotexture. It measures 8.4cm in size.
- KIDNEYS** : The right kidney measures 9.9 x 3.8cm. The left kidney measures 9.7 x 5cm. Both kidneys are normal in shape, size & position. The pelvicalyceal system is normal. Corticomedullary differentiation is maintained. No focal lesion is seen.
- URINARY BLADDER** : Urinary bladder is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- UTERUS** : Uterus is normal in size, shape & echotexture. It measures 9 x 3.6 x 5.7cm. Endometrium is central and measures 7.1mm.
- OVARIES** : The right ovary measures 2.5 x 1.7cm. The left ovary measures 2.9 x 1.6cm. Both ovaries are normal in shape, size & position.
- OTHERS** : No ascites or retroperitoneal lymphadenopathy is seen.

IMPRESSION :

- Hepatomegaly.



Dr. VAISHALI PATEL
MBBS, DNB (Radio-diagnosis)
Consultant Radiologist



24 HOUR EMERGENCY

© AHL/D/0070/4115/Mar

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"

Name : MRS. RENU DEVI
Age / Sex : 30 Yrs / Female
Doctor :
Reg. No. : MAR23-44303
Pat. Type : Mediwheel



Collection Time: 25-03-2023 12:14 pm
Receiving Time: 25-03-2023 12:20 pm
Reporting Time: 25-03-2023 1:57 pm
Publish Time: 25-03-2023 2:28 pm

Test Name	Result	Flag	Unit	Reference Range
Biochemistry				
Creatinine, Serum				
Method: Enzymatic			Machine Name: XL640	
Creatinine, Serum	0.6		mg/dl	0.6-1.4
Uric Acid, Serum				
Method: Enzymatic			Machine Name: XL640	
Uric Acid, Serum	4.9		mg/dl	3.4-7.0
Blood Urea Nitrogen (BUN)				
Method: Calculated			Machine Name: XL640	
Blood Urea Nitrogen (BUN)	6.3		mg/dl	07-21
Fasting Blood Glucose, Plasma				
Method: GOD-POD			Machine Name: XL640	
Fasting Blood Glucose, Plasma	108.3		mg/dl	70-110
LIPID PROFILE, SERUM				
Method: Spectrophotometry			Machine Name: XL640	
Cholesterol, Total (CHOD/PAP)	180.0		mg/dl	0-200
Triglycerides (Enzymatic)	130.0		mg/dl	0-150
HDL Cholesterol (Enzymatic)	68.0	H	mg/dl	0-50
LDL Cholesterol (Calculated)	86.0		mg/dl	0-100
VLDL Cholesterol (Calculated)	26.0		mg/dl	0-30
GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD				
Method: HPLC / Nephelometry			Machine Name: BIO-RAD, D-10 / MISPA	
HbA1C	6.0		%	4.4-6.2
Estimated average glucose (eAG)	125		mg/dl	


DR N N SINGH
(PATHOLOGIST)

*This Document is not valid for Medico-Legal purposes.

Page 1 of 6

Condition of Laboratory Testing & Reporting
(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) / Sample(s). (2) Laboratory / Investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/lipemic etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email- labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4068/February/22

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



Name : MRS. RENU DEVI
Age / Sex : 30 Yrs / Female
Doctor :
Reg. No. : MAR23-44303
Pat. Type : Mediwheel



Collection Time: 25-03-2023 12:14 pm
Receiving Time: 25-03-2023 12:20 pm
Reporting Time: 25-03-2023 1:57 pm
Publish Time : 25-03-2023 2:28 pm

Test Name	Result	Flag	Unit	Reference Range
-----------	--------	------	------	-----------------

Interpretation:

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic.

Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

FACTORS THAT INTERFERE WITH HbA1C | FACTORS THAT AFFECT INTERPRETATION | MEASUREMENT | OF HbA1C RESULTS |

-----|-----|
| Hemoglobin variants,elevated fetal | Any condition that shortens erythrocyte |
| hemoglobin (HbF) and chemically | survival or decreases mean erythrocyte |
| modified derivatives of hemoglobin | age (e.g.,recovery from acute blood loss, |
| (e.g. carbamylated Hb in patients | hemolytic anemia, HbSS, HbCC, and HbSC) |
| with renal failure) can affect the | will falsely lower HbA1c test results |
| accuracy of HbA1c measurements | regardless of the assay method used.Iron |
| | deficiency anemia is associated with |
| | higher HbA1c |

*This Document is not valid for Medico-Legal purposes.


DR N N SINGH
(PATHOLOGIST)

Page 2 of 6

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) /Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) /Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/leptic etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email- labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4068/February/22

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



Name : MRS. RENU DEVI
Age / Sex : 30 Yrs / Female
Doctor :
Reg. No. : MAR23-44303
Pat. Type : Mediwheel

Collection Time: 25-03-2023 12:14 pm
Receiving Time: 25-03-2023 12:20 pm
Reporting Time: 25-03-2023 1:57 pm
Publish Time : 25-03-2023 2:28 pm

Test Name	Result	Flag	Unit	Reference Range
Liver Function Test (LFT)				
<i>Method: Spectrophotometry</i>			<i>Machine Name: XL-640</i>	
Bilirubin Total (Diazo)	1.0		mg/dl	0.3-1.2
Bilirubin Direct (Diazo)	0.4	H	mg/dl	0.00-0.2
Bilirubin Indirect (Calculated)	0.6		mg/dl	0.00-1.0
SGPT (IFCC without PDP)	14.4		U/L	7-50
SGOT (IFCC without PDP)	19.1		U/L	5-45
Alkaline Phosphate (PNP AMP Kinetic)	270.0		U/L	70-306
GGT (Enzymatic)	15.9		U/L	0-55
Protein Total (Biuret)	8.0		g/dl	6.4-8.3
Albumin (BCG)	4.7		g/dl	3.5-5.2
Globulin (Calculated)	3.3		g/dl	2.3-3.5
A : G Ratio (Calculated)	1.40			0.8-2.0

*This Document is not valid for Medico-Legal purposes.


DR N N SINGH
(PATHOLOGIST)

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s)/Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample(s). (2) Laboratory Investigations are only to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico-legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/serum etc.) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282. Email- labasarfi@gmail.com



Name : MRS. RENU DEVI
Age / Sex : 30 Yrs / Female
Doctor :
Reg. No. : MAR23-44303
Pat. Type : Mediwheel



Collection Time: 25-03-2023 12:14 pm
Receiving Time: 25-03-2023 12:20 pm
Reporting Time: 25-03-2023 1:57 pm
Publish Time : 25-03-2023 2:28 pm

Test Name	Result	Flag	Unit	Reference Range
-----------	--------	------	------	-----------------

Haematology

BLOOD GROUP, ABO & RH TYPING

Method: Agglutination

ABO GROUP	O	.		0-0
RH TYPING	POSITIVE	.		0-0


ESR (Erythrocyte Sedimentaion Rate)

Method: Westergren

Machine Name: VES-MATIC 20

ESR	27	H	mm/hr	0-10
-----	----	---	-------	------

*This Document is not valid for Medico-Legal purposes.


DR N N SINGH
(PATHOLOGIST)

Page 4 of 6

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) / Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/lipemic etc.) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email- labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4068/February/22

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130
Ph. No.: 7808368888,9297862282,9234681514



Name : MRS. RENU DEVI
Age / Sex : 30 Yrs / Female
Doctor :
Reg. No. : MAR23-44303
Pat. Type : Mediwheel



Collection Time: 25-03-2023 12:14 pm
Receiving Time: 25-03-2023 12:20 pm
Reporting Time: 25-03-2023 1:57 pm
Publish Time: 25-03-2023 2:28 pm

Test Name	Result	Flag	Unit	Reference Range
Complete Blood Count (CBC)				<i>Machine Name:</i> Sysmex 6 part
<i>Method:</i> Electronical Impedence				
Hemoglobin	12.9	L	g/dl	13-18
Total Leukocyte Count (TLC)	5,200		/cu-mm	4000-11000
PCV	38.5	L	%	40-50
MCH	30.7		Pg	27-31
MCHC	33.6		g/dl	31.5-35.5
Red Cell Distribution Width (RDW)	16.0	H	%	11.6-14
Neutrophils	65		%	55-75
Lymphocytes	30		%	15-30
Eosinophils	03		%	1-6
Monocytes	02		%	2-10
Basophils	00		%	0-1
RBC Count	4.2	L	million/mm3	4.5-5.5
Mean Corpuscular Volume (MCV)	91.3		fL	83-101
Platelet Count	2.10		lakhs/cumm	1.5-4.5

*This Document is not valid for Medico-Legal purposes.

DR N N SINGH
(PATHOLOGIST)

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) / Sample(s) (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate, (haemolysed/clotted/ lipemic etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282. Email- labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4068/February/22

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"

Name : MRS. RENU DEVI
Age / Sex : 30 Yrs / Female
Doctor :
Reg. No. : MAR23-44303
Pat. Type : Mediwheel



Collection Time : 25-03-2023 12:14 pm
Receiving Time : 25-03-2023 12:20 pm
Reporting Time : 25-03-2023 1:57 pm
Publish Time : 25-03-2023 2:28 pm

Test Name	Result	Flag	Unit	Reference Range
-----------	--------	------	------	-----------------

Immunology and Serology

THYROID PROFILE, TOTAL, SERUM

Method : ECLIA

Machine Name: Vitros ECI

T3, Total	1.23		ng/ml	0.8-2.0
T4, Total	10.0		µg/dL	5.10-14.10
TSH (Ultrasensitive)	3.14		mIU/mL	0.27-4.2

Interpretation:

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations.
2. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
3. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.

*This Document is not valid for Medico-Legal purposes.


DR N N SINGH
(PATHOLOGIST)

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) / Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico-legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed, clotted, lipemic etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282. Email- labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4068/February/22

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



असर्फी हॉस्पिटल
सबके लिए स्वास्थ्य

ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130
Ph. No.: 7808368888,9297862282,9234681514



Name : MRS. RENU DEVI
Age / Sex : 30 Yrs / Female
Doctor :
Reg. No. : MAR23-44303
Pat. Type : Mediwheel

Collection Time: 25-03-2023 12:14 pm
Receiving Time : 25-03-2023 12:20 pm
Reporting Time : 26-03-2023 5:17 pm
Publish Time : 26-03-2023 5:26 pm

Test Name	Result	Flag	Unit	Reference Range
-----------	--------	------	------	-----------------

Interpretation:

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic.
Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

FACTORS THAT INTERFERE WITH HbA1C | FACTORS THAT AFFECT INTERPRETATION | MEASUREMENT | OF HBA1C RESULTS |
|-----|-----|
| Hemoglobin variants,elevated fetal | Any condition that shortens erythrocyte | hemoglobin (HbF) and chemically | survival or decreases mean erythrocyte | modified derivatives of hemoglobin | age (e.g.,recovery from acute blood loss, | (e.g. carbamylated Hb in patients | hemolytic anemia, HbSS, HbCC, and HbSC) | with renal failure) can affect the | will falsely lower HbA1c test results | accuracy of HbA1c measurements | regardless of the assay method used.Iron | deficiency anemia is associated with | higher HbA1c |

Glucose, PP

Method : GOD-POD

Glucose, PP	119.5		mg/dl	70-140
-------------	-------	--	-------	--------

Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine

*This Document is not valid for Medico-Legal purposes.

DR N N SINGH
(PATHOLOGIST)

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) /Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) / Sample(s) (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medical legal Purposes (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/lipemic etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email- labasarfi@gmail.com