## Health Check up Booking Confirmed Request(bobS13588), Package Code-PKG10000269, Beneficiary Code-894

Mediwheel <customercare@policywheel.com>

Thu 7/7/2022 11:48 AM

To: Insurance Ghaziabad <insurance.ghaziabad@manipalhospitals.com>

Cc: Mediwheel CC <customercare@mediwheel.in>;Mediwheel CC <mediwheelwellness@gmail.com>

011-41195959 Email:wellness@mediwheel.in

#### 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

: PKG10000269

Beneficiary

Name

: seema gupta

Member Age

: 56

Member Gender : Female

Member Relation: Spouse

Package Name

Metro Full Body Health Checkup Female Above 40 Mammography Not

Available

Location

: GHAZIABAD, Uttar Pradesh-201001

Contact Details: 9899992545

**Booking Date** 

: 06-07-2022

Appointment

: 09-07-2022

Date

#### Instructions to undergo Health Check:

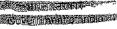
- 1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- 2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- 3. Bring urine sample in a container if possible (containers are available 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.

#### For Women:

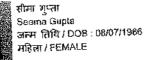
- 1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test,
- 2. It is advisable not to undergo any Health Check during menstrual cycle.

We request you to facilitate the employee on priority.









3788 7764 6813

मेरा आधार, मेरी पहचान

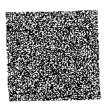


The descent canon Authority of India



पताः W/O राजीव गुप्ता, तीसरा एफ़-7 जी-2, राधा माधव, नहरू नगर, माजियाबाद, गाजियाबाद, उत्तर प्रदेश, 201001

Address: W/O, Rajiv Gupta, 3rd F-7 G-2, Radha Madhav, Nehru Nagar, Ghaziabad, Ghazlabad, Uttar Pradesh, 201001



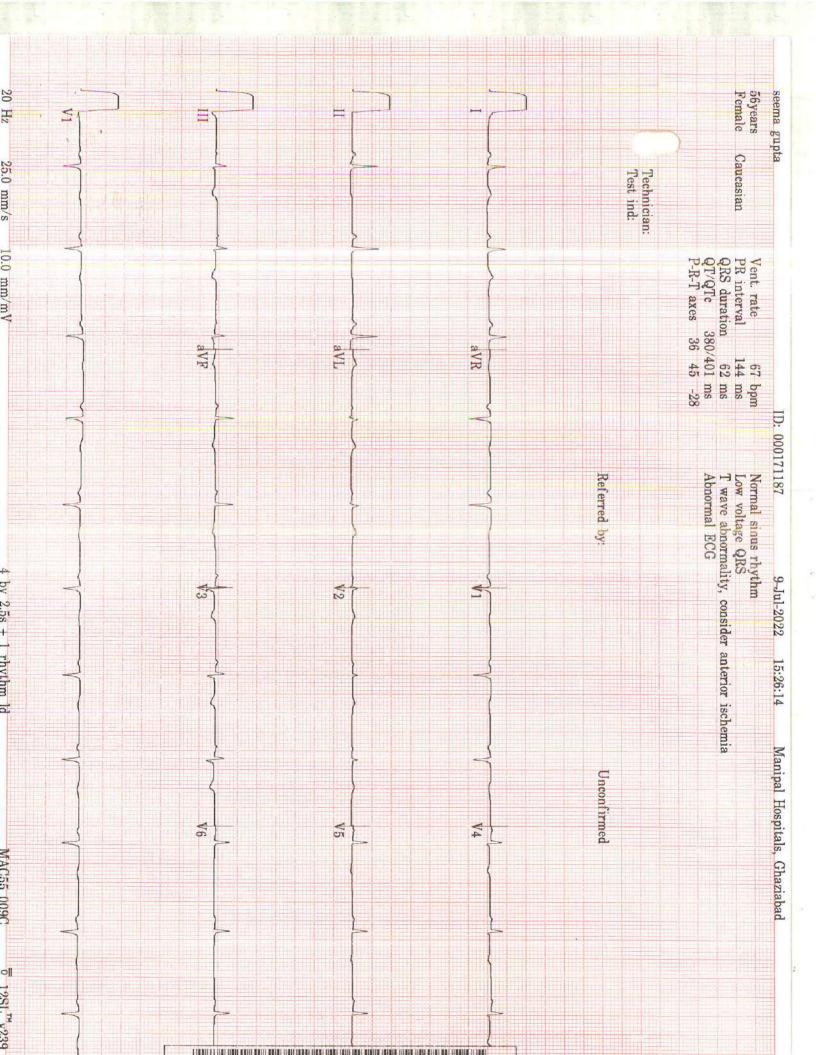
3788 7764 6813





tielp@uldai.gov.in











#### TMT INVESTIGATION REPORT

Patient Name: Mrs. SEEMA GUPTA

Location

: Ghaziabad

Age/Sex

: 56Year(s)/Female

Visit No

: V000000001-GHZB

MRN No

: GHZB-0000171187

Order Date

: 09/7/2022

Ref. Doctor : HCP

Report Date

: 09/7/2022

Protocol

: Bruce

**MPHR** 

: 164BPM

Duration of exercise

: 1min 56sec

85% of MPHR

: 139BPM

Reason for termination : Patient fatigue

Peak HR Achieved : 126BPM

Blood Pressure (mmHg) : Baseline BP : 122/78mmHg

% Target HR

: 76%

Peak BP : 130/78mmHg METS

: 4.4METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	94	122/78	Nil	No ST changes seen	Nil
STAGE 1	1:56	126	130/78	Nil	No ST changes seen	Nil
RECOVERY	3:19	72	126/78	Nil	No ST changes seen	Nil

#### COMMENTS:

- No ST changes in base line ECG.
- No ST changes at peak.
- No ST changes in recovery.
- Normal chronotropic response.
- Normal blood pressure response.

#### **IMPRESSION:**

Treadmill test is **inconclusive** for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh

Dr. Abhishek Singh

Dr. Sudhanshu Mishra

MD, DM (CARDIOLOGY), FACC MD, DNB (CARDIOLOGY), MNAMS MD Sr. Consultant Cardiology

Poor exfort talesance.

Sr.Consultant Cardiology

Cardiology Registrar

Page 1 of 2

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

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017



### RADIOLOGY REPORT

Name	SEEMA GUPTA	Modality	US
Patient ID	GHZB-0000171187	Accession No	1115434
Gender/Age	F / 56Y 1D	Scan Date	09-07-2022 11:20:17
Ref. Phys	Dr. Deepak Verma	Report Date	09-07-2022 11:54:00

## USG ABDOMEN & PELVIS

#### **FINDINGS**

IVER: appears normal in size (measures 130 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 83 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 10.4 mm. COMMON BILE DUCT: Appears normal in size and measures 3 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: Both kidneys are normal in size and shape but show raised renal cortical echotexture. Cortico-medullary

differentiation is however maintained. Rest normal.

Right Kidney: measures  $84 \times 27$  mm with parenchymal thickness 6.8 mm. Left Kidney: measures 85 x 43 mm with parenchymal thickness 8.3 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.

UTERUS: Uterus and bilateral ovaries are not seen probably atrophied/absent.

Bilateral adnexa is clear.

BOWEL: Visualized bowel loops appear normal.

#### IMPRESSION

-Diffuse grade I fatty infiltration in liver.

-Bilateral raised renal cortical echotexture (ADV: RFT correlation).

Recommend clinical correlation.

While,

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

#### **MANIPAL HOSPITALS**

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002 This document is digitally signed and hence no manual signature is required Teleradiology services provided by Manipal Hospitals Radiology Group This report is subject to the terms and conditions mentioned overleaf



### RADIOLOGY REPORT

Name	SEEMA GUPTA	Modality	DX
Patient ID	GHZB-0000171187	Accession No	1115435
Gender/Age	F / 56Y 1D	Scan Date	09-07-2022 10:42:57
Ref. Phys	Dr. Deepak Verma	Report Date	09-07-2022 15:41:19

#### XR- CHEST PA VIEW

#### FINDINGS:

LUNGS: Coarse interstitial and fine reticular opacities are seen in bilateral lung fields along with ground glass haziness seen in bilateral lower zones.

TRACHEA: Normal. PLEURA: Normal. HEART: Normal.

PULMONARY HILA: Normal.

AORTA: Normal.

VISUALIZED BONES: Normal.

VISUALIZED SOFT TISSUES: Normal.

DIAPHRAGM: Normal.

VISUALIZED ABDOMEN: Normal.

#### IMPRESSION:

-Coarse interstitial and fine reticular opacities seen in bilateral lung fields along with ground glass haziness seen in bilateral lower zones. Findings are concerning for interstitial lung disease.

ADV: HRCT-CHEST for further evaluation, as clinically indicated.

Recommend clinical correlation.

Dr. Prakash Naik, MBBS, DMRD, FRCR [UK],

Consultant Radiologist, Reg No 63755

**MANIPAL HOSPITALS** 



Name	SEEMA GUPTA	Age	56y 1d	Gender	FEMALE
MRN	GHZB-0000171187	Visit No	V0000000005-GHZB		
Lab No	G000322174	Collected On	09/07/2022 10:26AM	Received On	09/07/2022 10:26AM
387(0)	Deepak Verma	Reported On	09/07/2022 12:50PM		

**Test Name** 

Result

Biological Criticality Factor Reference Interval

**Test Method** 

GLUCOSE, FASTING (F) (Serum Fasting)

100 mg/dl

70 - 110 mg/dl

\*\*\*\*\*\* END OF REPORT \*\*\*\*\*\*\*\*

DR CHARU AGARWAL CONSULTANT PATHOLOGIST Pathologist

Processed by :- SHAHRUKH KHAN



Name	SEEMA GUPTA Age 56y 1d		Gender	FEMALE	
MRN	GHZB-0000171187	Visit No	V0000000005-GHZB		
A Processor	G000322198	Collected On	09/07/2022 11:34AM	Received On	09/07/2022 11:34AM
	Deepak Verma	Reported On	09/07/2022 3:24PM		

Criticality Factor

Biological Reference Interval

**Test Name** 

Result

URINE EXAMINATION, ROUTINE (Urine)

PHYSICAL EXAMINATION

Colour P.YELLOW
Appearance CLEAR
5.0

pH Specific gravi

Specific gravity 1.020

CHEMICAL EXAMINATION

Glucose Nil
Protein Absent
Ketone bodies Absent
Absent

Urobilinogen

MICROSCOPIC EXAMINATION

Leukocytes 1-2/HPF
Erythrocytes NIL
Epithelial Cells NIL
Casts NIL
Crystals NIL
Others NIL

\*\*\*\*\*\*\*\* END OF REPORT \*\*\*\*\*\*\*\*\*

Processed by :- robin DHIRANIYA

DR ALKA DIXIT VATS
CONSULANT PATHOLOGIST
PATHOLOGIST

Report Printed On:

9/7/2022

8:20PM



Name	SEEMA GUPTA	Age	Age 56y 1d		FEMALE	
MRN	GHZB-0000171187	Visit No	V0000000005-GHZB			
_ab No	G000322225	Collected On	09/07/2022 2:39PM	Received On	09/07/2022 2:39PM	
Referred By	Deepak Verma	Reported On	09/07/2022 4:36PM			

**Test Name** 

Result

Criticality

Biological Factor Reference Interval

**Test Method** 

GLUCOSE, POST PRANDIAL (PP), 2 HOURS (Serum Post Prandial)

101 mg/dl

8:20PM

80 -140 mg/dl

\*\*\*\*\*\* END OF REPORT \*\*\*\*\*\*\*

Processed by :- SHAHRUKH KHAN

Report Printed On: 9/7/2022

DR ALKA DIXIT VATS CONSULANT PATHOLOGIST **PATHOLOGIST** 

mcT-39093



Name	SEEMA GUPTA	Age	56y 1d	Gender	FEMALE	
	GHZB-0000171187	Visit No V000000005-GHZB				
	G000322175	Collected On	09/07/2022 10:26AM	Received On	09/07/2022 10:26AM	
	Deepak Verma	Reported On	09/07/2022 5:28PM			

**Test Name** 

Result

Criticality **Factor** 

**Biological Reference Interval** 

BLOOD GROUP (A, B, O) AND RH FACTOR WITH REVERSE GROUPING (Whole Blood)

**BLOOD GROUPING** 

"B"

RH TYPING

**POSITIVE** 

\*\*\*\*\*\* END OF REPORT \*\*\*\*\*\*\*

Processed by :- SHAHRUKH KHAN

CONSULANT PATHOLOGIST **PATHOLOGIST** 



Name	SEEMA GUPTA	Age 56y 1d		Gender	FEMALE	
DANGE UNIVERSE	GHZB-0000171187	Visit No	V0000000005-GHZB			
P. R. LANDER	G000322175	Collected On	09/07/2022 10:26AM	Received On	09/07/2022 10:26AM	
	Deepak Verma	Reported On	09/07/2022 11:12AM			

	Test Name	Result	Criticality Factor	Biological Reference Interval
	HEMOGLOBIN, HB	10.6 g/dl		12 - 16 gm/ dl
)	MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION, MCHC	32.9 g/dl		33 - 36%
	ESR (WESTERGREN), AUTOMATED ERYTHROC SEDIMENTATION RATE	YTE 100 mm/1st hour		0 - 20 mm/Hr
	MEAN CORPUSCULAR HAEMOGLOBIN, MCH	29.6 pg		26 -34 pg
	MEAN CORPUSCULAR VOLUME, MCV	89.9 fl		77 - 97 fl
	PLATELET COUNT	208 x10 <sup>3</sup> cells/ Cumm		150x10^3 - 400x10^3 cells/cumm
	RED BLOOD CELLS, RBC COUNT	3.58 million/cu mm		3.8 - 5.3 millions /cumm
	RED CELL DISTRIBUTION WIDTH, RDW	14.0 %		11.5 - 14.5 %
	LEUCOCYTE COUNT, TOTAL (TLC), AUTOMAT	TED 5.62 x10 <sup>3</sup> cells/ Cumm		4x10^3 - 11x10^3 cells/cumm
	HEMATOCRIT (HCT)	32.2 %		34 -45%
)	BASOPHILS	00 %		
	EOSINOPHILS	04 %		2 -7 %
	LYMPHOCYTES	41 %		17 - 45 %
	MONOCYTES	06 %		4 -13%
	NEUTROPHILS	49 %		40 - 80%
		********* END OF REPORT *********	D	R CHARU AGARWAL

Processed by :- SHAHRUKH KHAN

DR CHARU AGARWAL CONSULTANT PATHOLOGIST Pathologist

Report Printed On: 9/7/2022

8:20PM

Page 2 of 4



Name	SEEMA GUPTA Age		56y 1d	Gender	FEMALE	
MRN	GHZB-0000171187	Visit No	V0000000005-GHZB			
and the second second	G000322175	Collected On	09/07/2022 10:26AM	Received On	09/07/2022 10:26AM	
199	Deepak Verma	Reported On	09/07/2022 12:50PM	N.		

_	Test Name (IDNEY FUNCTION TESTS (Ser	Result um)	Criticality Factor	Biological Reference Interval	Test Method
				15 - 40 mg/dl	
	UREA	31.0 mg/dl		ES CONTES	
	CREATININE, SERUM	1.35 mg/dl		0.7 - 1.2 mg/dl	
	URIC ACID	4.4 mg/dl		4 - 8.5 mg/dl	
	SODIUM, SERUM	136.7 mmol/L		136 - 144 mmol/ L	
	POTASSIUM, SERUM	4.63 mmol/L		3.6 - 5.1 mmol/L	
	CHLORIDE, SERUM	105.6 mmol/L		101 - 111 mmol/L	
	LIPID PROFILE (Serum)				
	CHOLESTEROL, TOTAL	99 mg/dl		Upto 200 mg/dl	
0	TRIGLYCERIDES, SERUM	188 mg/dl		Upto 150 mg/dl	
	CHOLESTEROL, HDL, DIRECT	32 mg/dl		35 - 65 mg/dl	
	CHOLESTEROL, LDL, DIRECT	29 mg/dl		0 -120 mg/dl	
	Cholesterol, VLDL	38 mg/dl		0 - 35 mg/dl	
	LIVER FUNCTION TESTS (Seru	ım)			
	BILIRUBIN, TOTAL	0.74 mg/dl		0.3 -1.2 mg/dl	
	BILIRUBIN, DIRECT	0.15 mg/dl		0 - 0.3 mg/dl	
	Report Printed On: 9/7/2022	8:20PM			Page 3 of 4



Name	SEEMA GUPTA	Age	56y 1d	Gender	FEMALE	
MRN	GHZB-0000171187	Visit No	V0000000005-GHZB			
Lab No	G000322175	Collected On	09/07/2022 10:26AM	Received On	09/07/2022 10:26AM	
	Deepak Verma	Reported On	09/07/2022 12:50PM			

Test Name	Result	Criticality Biological Factor Reference Interval Test Method
Indirect Bilirubin	0.59	0.1 - 0.3 mg/dl
TOTAL PROTEIN, SERUM	7.1 g/dl	6.6 - 8.7 g/dl
ALBUMIN, SERUM	4.00 g/dl	
A/G RATIO (ALBUMIN / GLOBULIN RATIO)	1.29	1:1 - 2.5:1
GLOBULIN, SERUM	3.1	
SGPT	8 IU/L	14 - 54 IU/L
SGOT	24 IU/L	0 - 40 IU/L
GGTP, GGT, GAMMA GT, GAMMA GLUTAMYL TRANSPEPTIDASE	25 IU/L	7 -50 U/L
ALKALINE PHOSPHATASE, AL	P 74 IU/L	32 -91 IU/L
		Registration No. 42422
		DR CHARLI AGARWAI

Processed by :- SHAHRUKH KHAN

DR CHARU AGARWAL CONSULTANT PATHOLOGIST Pathologist

Report Printed On: 9/7/2022

8:20PM

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# **Human Care Medical Charitable Trust**



Registered Office: Sector-6, Dwarka, New Delhi- 110075

HCMCT

# ManipalHospitals

LIFE'S ON II

Name

: MRS SEEMA GUPTA

Registration No

: RH1438602 RefHosp No.:

ghzb-0000171187

Patient Episode

: R03000040059

Referred By Receiving Date : MANIPAL HOSPITALS GHAZIABAD

: 09 Jul 2022 21:56

BIOCHEMISTRY

Age

56 Yr(s) Sex : Female

Lab No

32220703167

Collection Date:

09 Jul 2022 21:25

Reporting Date:

10 Jul 2022 08:31

THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA)

T4 - Thyroxine (ECLIA) Thyroid Stimulating Hormone (ECLIA)

1.07 8.48 0.504

micg/dl uIU/mL

ng/ml

Non Pregnant Adult [0.70 - 2.04]

[4.60-12.00] [0.340-4.250]

Pregnancy TSH:1st Trimester:0.6 - 3.4 micIU/mL Pregnancy TSH: 2nd Trimester: 0.37 - 3.6 micIU/mL Pregnancy TSH:3rd Trimester:0.38 - 4.04 micIU/mL

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

Page 1 of 1

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

Dr. Neelam Singal

CONSULTANT BIOCHEMISTRY

Human Care Medical Charitable Trust Adipining MTNL Building, Main Sector 6, Dwarka, New Delhi - 110075.

Phone: 191 11 4967 4967 | www.manipalhospitals.com | www.hcmct.in NABL Accredited Hospital NABH Accredited Hospital H-2019-0640/09/06/2019-08/06/2022 MC/3228/04/09/2019-03/09/2021

Awarded Emergency Excellence Services E-2019-0026/27/07/2019-26/07/2021

Awarded Nursing Excellence Services N-2019-0113/27/07/2019-26/07/2021



11 Martinel Heavitale Devento Det 14d

Medical Laborator, mor

## **SEEMA GUPTA G000322175**

PID NO: P1082200012545 Age: 56.0 Year(s) Sex: Female



Sample Collected At: Manipal Hospital NH-24, HAPUR ROAD, OPP. BAHMETA, GHAZIABAD 201002 201002

VID: 220108000008536 Registered On: 09/07/2022 12:23 PM Collected On: 09/07/2022 12:23PM Reported On: 09/07/2022 02:02 PM

# HbA1c Glycated Haemoglobin

(EDTA Whole Blood)

Observed Value

Reference:

Investigation

HbA1C- Glycated Haemoglobin (HPLC)

Unit %

Biological Reference Interval Non-diabetic: <= 5.6

Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5

Estimated Average Glucose (eAG) \$

134.11

6.3

mg/dL

## Interpretation & Remark:

HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).

HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.

Trends in HbA1c are a better indicator of diabetic control than a solitary test.

Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia(especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation

To estimate the eAG from the HbA1C value, the following equation is used: eAG(mg/dl) = 28.7\*A1c-46.7

5. Interference of Haemoglobinopathies in HbA1c estimation.

A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.

B. .Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status

C. Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).

7. In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 %, Fair to Good Control - 7 to 8 %, Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 %.

Note: Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

-- End of Report --

Page 1 of 1

Dr. Mohit Jain MD Pathology



