Health Check up Booking Confirmed Request(bobS40831), Package Code-PKG10000241, Beneficiary Code-74609

X DELETE

REPLY

REPLY ALL

-> FORWARD

Mark as unread



Mediwheel <wellness@mediwheel.in>

Thu 6/15/2023 6:17 PM

To: PHC [MH-Ghaziabad];

Cc: customercare@mediwheel.in;

Action Items

* Get more anus



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

: PKG10000241

Beneficiary

Name

: ALKA RANI

Member Age : 38

Member Gender: Female

Member Relation: Spouse

Package Name : Medi-Wheel Metro Full Body Health Checkup Female Below 40

Location

: AMRELI, Gujarat-364421

Contact Details : 7017695625

Booking Date

15-06-2023

Appointment

Date

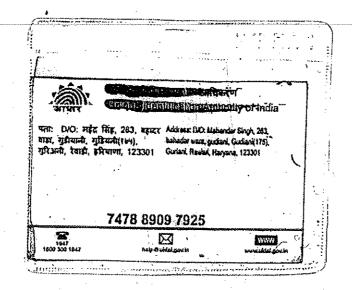
: 16-06-2023

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.

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. dol-Boodilloogogaltan Oltanilli



Dr. (Mrs.) SUNTTA STIRI

Official Gynacocologist)

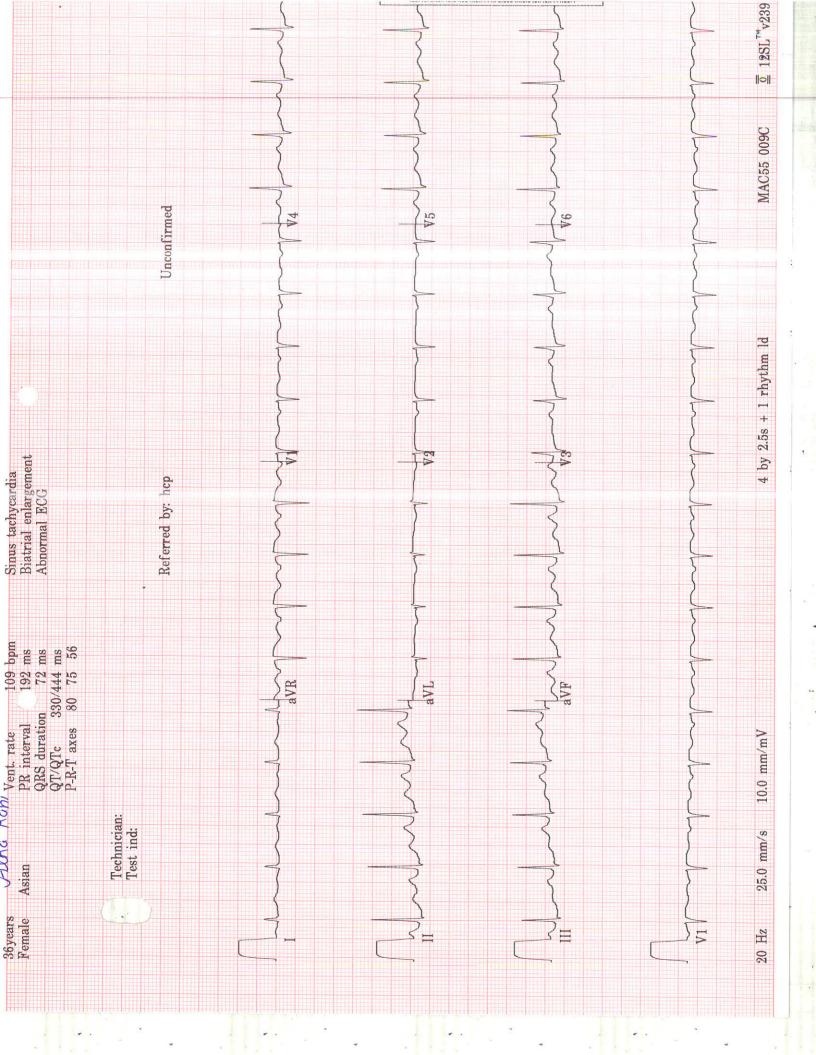
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Rosed No. 19882 (U.P.)





manipal hospitals





TMT INVESTIGATION REPORT

Patient Name: Alka RANI

Location

: Ghaziabad

Age/Sex

: 36Year(s)/Female

Visit No.

: V0000000001-GHZB

MRN No

11067856

Order Date

: 16/06/2023

Ref. Doctor : HCP

Report Date

: 16/06/2023

Protocol

: Bruce

MPHR

: 184BPM

Duration of exercise Reason for termination : THR achieved

: 4min 15sec

85% of MPHR **Peak HR Achieved**

: 156BPM

Blood Pressure (mmHg) : Baseline BP : 130/72mmHg

% Target HR

: 176BPM : 95%

Peak BP

: 146/72mmHg

STAGE	TIME	1			MEIS	: 6.1METS
_	(min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
RE- EXC.	0:00	110	120/72			
		110	130/72	Nil	No ST changes seen	Nil
STAGE 1	3:00	168	140/72			IVII
	9		140/72	Nil	No ST changes seen	Nil
TAGE 2	1:15	176	146/72			
		1,0	146/72	Nil	No ST changes seen	NICE
ECOVERY	3:32	113	126/76		500 00011	Nil
		113	136/72	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes during test and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Poor effort tolerance.

IMPRESSION:

Treadmill test is negative for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh

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

Dr. Abhishek Singh

Dr. Sudhanshu Mishra

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

Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P · 0120-616 5666

Page 1 of 2



RADIOLOGY REPORT

NAME	MRS Alka RANI	STUDY DATE	16/06/2023 1:12PM
AGE / SEX	38 y / F	HOSPITAL NO.	MH011067856
ACCESSION NO.	R5680818	MODALITY	US
REPORTED ON	16/06/2023 2:57PM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS

FINDINGS

LIVER: Liver is normal in size (measures 137 mm), shape and echotexture. Rest normal. SPLEEN: Spleen is normal in size (measures 79 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 9.3 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: Right Kidney is normal in size (measures 85 x 30 mm with parenchymal thickness 8 mm) and shape but show raised renal cortical echotexture. Cortico-medullary differentiation is partially maintained. Rest normal. Left Kidney normal in size (measures 90 x 41 mm with parenchymal thickness 8.4 mm) and shape but show raised renal cortical echotexture. Cortico-medullary differentiation is however maintained. Rest normal. PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged. FLUID: Nil significant.

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

UTERUS: Uterus is anteverted. Uterus is mildly bulky in size (measures $55 \times 52 \times 36$ mm) but normal in echotexture, post partum status. It is bicornuate with suggestion of two separate endometrial cavities. Endometrial thickness measures 7 mm and 6 mm.

Cervix appears normal.

OVARIES: Both ovaries are obscured due to inadequate urinary bladder.

Trace free fluid is seen cul-de-sac.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

- Bilateral medical renal disease (ADV: RFT correlation).

- Mildly bulky uterus (post partum status) with suggestion of bicornuate uterus.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS (FRCR 2A)

CONSULTANT RADIOLOGIST

Brabbat

*****End Of Report*****

MANIPAL HOSPITALS

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

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RADIOLOGY REPORT

NAME	MRS Alka RANI	STUDY DATE	16/06/2023 12:48PM
AGE / SEX	38 y / F	HOSPITAL NO.	MH011067856
ACCESSION NO.	R5680817	MODALITY	CR
REPORTED ON	16/06/2023 1:11PM	REFERRED BY	HEALTH CHECK MGD

XR- CHEST PA VIEW

FINDINGS:

LUNGS: A small fibronodular opacity is seen in the right apical region.

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: Normal.

THORACIC SPINE: Normal.

OTHER VISUALIZED BONES: Normal. VISUALIZED SOFT TISSUES: Normal.

DIAPHRAGM: Normal.

VISUALIZED ABDOMEN: Normal. VISUALIZED NECK: Normal.

IMPRESSION:

A small fibronodular opacity is seen in the right apical region.

Please correlate clinically

Brabbat

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS (FRCR 2A)

CONSULTANT RADIOLOGIST

*****End Of Report****

MANIPAL HOSPITALS

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

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Name : MRS ALKA RANI LABORATORY REPORT : 38 Yr(s) Sex :Female

Referred By : MANIPAL HOSPITALS GHAZIABAD Reporting Date : 17 Jun 2023 07:47

Receiving Date : 16 Jun 2023 22:05

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

Specimen Type : Serum

THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA) 1.34 ng/ml [0.70-2.04]
T4 - Thyroxine (ECLIA) 8.26 µg/dl [4.60-12.00]
Thyroid Stimulating Hormone (ECLIA) 8.960 # µIU/mL [0.340-4.250]

1st Trimester:0.6 - 3.4 micIU/mL 2nd Trimester:0.37 - 3.6 micIU/mL 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

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

Dr. Neelam Singal

CONSULTANT BIOCHEMISTRY



LABORATORY REPORT Name : MRS ALKA RANI 38 Yr(s) Sex :Female Registration No MH011067856 Lab No 202306001880 Patient Episode H18000000636 **Collection Date:** 16 Jun 2023 12:23 Referred By HEALTH CHECK MGD Reporting Date: 16 Jun 2023 14:01 **Receiving Date** 16 Jun 2023 12:23

HAEMATOLOGY

TEST

TEST	RESULT	UNIT BIOLOGIC	CAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMA	TED)	SPECIMEN-EDTA Whole	Blood
RBC COUNT (IMPEDENCE) HEMOGLOBIN thod:cyanide free SLS-colo HEMATOCRIT (CALCULATED)	4.55 12.7 rimetry 39.8	millions/cumm g/dl %	[3.80-4.80] [12.0-16.0]
MCV (DERIVED) MCH (CALCULATED) MCHC(CALCULATED) RDW CV% (DERIVED)	87.5 27.9 31.9 13.0	fL pg g/dl %	[83.0-46.0] [83.0-101.0] [27.0-32.0] [31.5-34.5] [11.6-14.0]
Platelet count MPV(DERIVED)	287 10.7	x 10³ cells/cumm	[150-400]
WBC COUNT(TC)(IMPEDENCE) DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)	8.29	x 10³ cells/cumm	[4.00-10.00]
Neutrophils Lymphocytes Monocytes Eosinophils Basophils	55.0 32.0 7.0 6.0 0.0	010 010 010 010 010	[40.0-80.0] [17.0-45.0] [2.0-10.0] [2.0-7.0] [0.0-2.0]
○ ³	16.0	mm/1sthour	[0.0-20.0

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Name : MRS ALKA RANI LABORATORY REPORT : 38 Yr(s) Sex : Female

Registration No : MH011067856 Lab N

Lab No : 202306001880

Patient Episode : H18000000636

Collection Date: 16 Jun 2023 12:23

Referred By : HEALTH CHECK MGD Receiving Date : 16 Jun 2023 12:23

Reporting Date: 16 Jun 2023 13:50

BIOCHEMISTRY

TEST RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

HbAlc (Glycosylated Hemoglobin)
thod: HPLC

5.4

양

[0.0-5.6]

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)

108

mg/dl

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	174	mg/dl	[<200]
TRIGLYCERIDES (GPO/POD)	56	mg/dl	Moderate risk:200-239 High risk:>240 [<150] Borderline high:151-199 High: 200 - 499
HDL- CHOLESTEROL Method: Enzymatic Immunoimhibition	59.0	mg/dl	Very high:>500 . [35.0-65.0]
VLDL- CHOLESTEROL (Calculated) CHOLESTEROL, LDL, CALCULATED	11 104.0	mg/dl mg/dl	[0-35] [<120.0]
pove optimal-100-129			Near/

Borderline High:130-159 High Risk:160-189

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Name		MRS ALKA RANI	LABORATORY	REPORT		38 Yr(s) Sex :Female	
Registration No	:	MH011067856		Lab No	:	202306001880	
Patient Episode	:	H18000000636		Collection Da	ite :	16 Jun 2023 12:23	
Referred By	:	HEALTH CHECK MG	GD	Reporting Da	ite :	16 Jun 2023 13:36	18
Receiving Date	:	16 Jun 2023 12:23					

BIOCHEMISTRY

TEST	RESULT		UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol	ratio(Calculated)	2.9		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOI	Ratio(Calculated)	1.8		<3 Optimal 3-4 Borderline >6 High Risk

Note:

Reference ranges based on ATP III Classifications.

KIDNEY PROFILE

Specimen: Serum UREA	20.8	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay BUN, BLOOD UREA NITROGEN Method: Calculated	9.7	mg/dl	[8.0-20.0]
CREATININE, SERUM Method: Jaffe rate-IDMS Standardization	0.79	mg/dl	[0.70-1.20]
URIC ACID Method:uricase PAP	5.2	mg/dl	[4.0-8.5]
SCDIUM, SERUM	138.10	mmol/L	[136.00-144.00]
POTASSIUM, SERUM SERUM CHLORIDE Method: ISE Indirect	4.21 105.8	mmol/L . mmol/l .	[3.60-5.10] [101.0-111.0]
eGFR (calculated) Technical Note	95.3	ml/min/1.73sq.m	[>60.0]
eGFR which is primarily based on Serum (reatining is	a darination of	CVD DDT 0000

FR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to1.73 sq.m BSA and is not applicable to individuals below 18 years.

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Name : MRS ALKA RANI LABORATORY REPORT : 38 Yr(s) Sex : Female

Referred By : HEALTH CHECK MGD Reporting Date : 16 Jun 2023 13:36

Receiving Date : 16 Jun 2023 12:23

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
eGFR tends to be less accurate	when Serum Creat	inine estima	ation is indeterminate e.g.
patients at extremes of muscle Icterus / Lipemia.	mass, on unusual	diets etc.	and samples with severe Hemolysis ,

T, A	ER	FUNCTION	TEST

(.)			
BILIRUBIN - TOTAL Method: D P D	0.54	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.12	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.42	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.40	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.09	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.30	gm/dl	[1.80-3.40]
F TEIN SERUM (A-G) RATIO Mechod: Calculation	1.24		[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	20.20	U/L	[14.00-54.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	93.0	IU/L	[40.0-98.0]

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Name : MRS ALKA RANI LABORATORY REPORT : 38 Yr(s) Sex :Female

D. d. V. T. L. V.

Referred By : HEALTH CHECK MGD Reporting Date : 16 Jun 2023 13:37

Receiving Date : 16 Jun 2023 12:23

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

GGT 16.0 [7.0-50.0]

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

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Name : MRS ALKA RAN LABORATORY REPORT : 38 Yr(s) Sex : Female

Referred By : HEALTH CHECK MGD Reporting Date: 17 Jun 2023 10:52

Receiving Date : 16 Jun 2023 13:23

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 1.015 (1.003-1.035)

CHEMICAL EXAMINATION

OTHERS

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	1-2 /hpf	W. S. C.
CASTS	NIL	
Crystals	NIL	

NIL

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

Page 1 of 2



Name : MRS ALKA RAN**LABORATORY REPORT,** : 38 Yr(s) Sex :Female

Registration No : MH011067856

Lab No : 202306001882

Patient Episode

: H18000000636

Collection Date:

16 Jun 2023 15:07

Referred By

: HEALTH CHECK MGD

Reporting Date :

17 Jun 2023 09:56

Receiving Date

: 16 Jun 2023 15:07

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Specimen: Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS

125.0

mg/dl

[80.0-140.0]

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

Page 2 of 2

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



LABORATORY REPORT Name : MRS ALKA RANI

Registration No MH011067856 Lab No 202306001881

Patient Episode H18000000636 **Collection Date:** 16 Jun 2023 12:23

Referred By HEALTH CHECK MGD

Reporting Date: 16 Jun 2023 13:37 **Receiving Date** 16 Jun 2023 12:23

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

GLUCOSE-Fasting

M. hod: Hexokinase

Specimen: Plasma GLUCOSE, FASTING (F) 74.0 mg/dl

[70.0-110.0]

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