

LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. GANDLURU RAM CHARAN
EC NO.	98049
DESIGNATION	DIGITAL LENDING
PLACE OF WORK	GANDHINAGAR, GIFT CITY, NATIONAL
BIRTHDATE	18-02-1985
PROPOSED DATE OF HEALTH CHECKUP	23-09-2023
BOOKING REFERENCE NO.	23S98049100069506E

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 16-09-2023 till 31-03-2024 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 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))

Between Sargasan and Reliance Cross Roads Sargasan, Gandhinagar - 382421. Gujarat, India Phone: 079-29750750, +91-7575006000 / 9000

Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



DR. PRERAK TRIVEDI M.D., IDCCM CRITICAL CARE MEDICINE REG.NO.G-59493

age /Sex: 3648 MP:	Weig	gnt.	
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< 150 –	200	250		-	
150-200 -		0-350 - 0-400 -	Follow-up:		
200-250 –)-450 -	Sign.		*
250-300 –		50 –	Sign:	5	

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www.aashkahospitals.in CIN: L85110GJ2012PLC072647



DR. SEJAL J AMIN B.D.S , M.D.S (PERIODONTIST) IMPLANTOLOGIST REG NO: A-12942

UHID: 06923210	Date:	23/9/23	Time:
	chenem	Age /Sex Height: Weight:	
Chief Complain: History: Routine	Lenter	cheolo	y
Thistory.			
Allergy History:			
Nutritional Screening: Well-Nou	rished / Malnourished	/ Obese	
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Diagnosis:		and the second s	

Rx								
No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	2	Dose	Route	Frequency	Duration	
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Other	Advice:	Seuling						
Follow	-up:		4) 2 (4)			8 0 1		
Consul	ltant's Sign	1: Leisel		19				

Between Sargasan and Reliance Cross Roads Sargasan, Gandhinagar - 382421. Gujarat, India Phone: 079-29750750, +91-7575006000 / 9000 Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



DR.TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID: 092246/	Date: 23 09 13 Time: 1:-
Patient Name: Ram Aus	Age /Sex: RAM
	Height:
	Weight:
History:	are freethy don
\(\begin{align*} \text{V2.9}\\ \text{V3.} \\ \text{V3.1} \\	
Allergy History:	
Allergy History.	
Nutritional Screening: Well-Nour	shed / Malnourished / Obese
Examination:	
	Vision - No 8mod
70.7	
60	
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C^{0}	
Diagnosis:	N&S mely



LABORATORY REPORT Name : RAMCHRAN GANDLURU Sex/Age : Male / 38 Years Case ID : 30902200786 Ref.By : HOSPITAL Dis. At : Pt. ID : 3000807 Bill. Loc. : Aashka hospital Pt. Loc Reg Date and Time : 23-Sep-2023 08:26 Sample Type Mobile No : 8978753837 Sample Date and Time : 23-Sep-2023 08:26 | Sample Coll. By Ref Id1 : 00923210 Report Date and Time Acc. Remarks Normal

Abnormal Result(s) Summary

		-(o) Gailliai y		
Test Name	Result Value	Unit	Reference Range	
Lipid Profile			Reference Range	
HDL Cholesterol	35.5	mg/dL	48 - 77	
Chol/HDL	4.80	mg/dL	0 - 4.1	
LDL Cholesterol	110.48	mg/dL	0.00 - 100.00	

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Printed On: 23-Sep-2023 11:12

Ref Id2

: 023245189





	L	ABORATO	RY REPORT		
Name : RAMCHRAN GAND	LURU		Sex/Age : Male	/ 38 Years	Case ID : 30902200786
Ref.By : HOSPITAL			Dis. At :		Pt. ID : 3000807
Bill. Loc. : Aashka hospital					Pt. Loc ;
	*A	Sample Type		OTA	Mobile No : 8978753837
Sample Date and Time : 23-Se	p-2023 08:26	Sample Coll.	By :		Ref ld1 : 00923210
Report Date and Time : 23-Se	p-2023 08:39	Acc. Remark	s : Normal		Ref Id2 : 023245189
TEST	RESULTS	UNIT	BIOLOGICAL	. REF. INTER	
		HAEMOG	RAM REPORT		
HB AND INDICES					
Haemoglobin	14.2	G%	13.00 - 17.00	K.	
RBC (Electrical Impedance)	4.74	million	s/cumm 4.50 - 5.50		
PCV(Calc)	42.23	%	40.00 - 50.00		
MCV (RBC histogram)	89.1	fL	83.00 - 101.0	0	
MCH (Calc)	29.9	pg	27.00 - 32.00		
MCHC (Calc)	33.5	gm/dL	31.50 - 34.50		
RDW (RBC histogram)	14.80	%	11.00 - 16.00		
OTAL AND DIFFERENTIAL WBO Total WBC Count		Sir Control			
Total WBC Count	6170	/µL	4000.00 - 100	00.00	
Neutrophil	[%] 58.0	% 40	PECTED VALUES 0.00 - 70.00	[Abs] 3579	/µL 2000.00 - 7000.00
Lymphocyte	36.0	% 20	.00 - 40.00	2221	/µL 1000.00 - 3000.00
Eosinophil	2.0	% 1.0	00 - 6.00	123	/µL 20.00 - 500.00
Monocytes	4.0	% 2.0	00 - 10.00	247	/µL 200.00 - 1000.00
Basophil	0.0	% 0.0	00 - 2.00	0	/µL 0.00 - 100.00
_ATELET COUNT (Optical)					
Platelet Count	228000	/µL	150000.00 - 4	10000 00	
leut/Lympho Ratio (NLR)	1.61	æ	0.78 - 3.53		
MEAR STUDY					
RBC Morphology	Normocytic	Normochrom	ic RBCs.		
VBC Morphology		count within n			
Platelet		adequate in			
Parasite	Malarial Par				

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreva

Dr. Shreya Shah

Dr. Manoj Shah

M.D. (Pathologist)

M.D. (Path. & Bact.)

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LABORATORY REPORT Name : RAMCHRAN GANDLURU Sex/Age: Male / 38 Years Case ID : 30902200786 Ref.By : HOSPITAL Dis. At : Pt. ID : 3000807 Bill. Loc. : Aashka hospital Pt. Loc Reg Date and Time : 23-Sep-2023 08:26 Sample Type : Whole Blood EDTA Mobile No : 8978753837 Sample Date and Time : 23-Sep-2023 08:26 | Sample Coll. By Ref Id1 : 00923210 Report Date and Time : 23-Sep-2023 09:47 Acc. Remarks Normal Ref Id2 : O23245189 **TEST RESULTS** UNIT **BIOLOGICAL REF RANGE** REMARKS

ESR Westergren Method

04

mm after 1hr 3 - 15

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Mong

Dr. Shreya Shah M.D. (Pathologist) Dr. Manoj Shah M.D. (Path. & Bact.)

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RAMCHRAN GANDLURU Name

Sex/Age : Male / 38 Years

Case ID : 30902200786

Ref.By : HOSPITAL

Dis. At :

Pt. ID : 3000807

Bill. Loc. ; Aashka hospital

Pt. Loc

Reg Date and Time

: 23-Sep-2023 08:26 | Sample Type

: Whole Blood EDTA

Mobile No : 8978753837

Sample Date and Time : 23-Sep-2023 08:26

Sample Coll. By :

Ref Id1

: 00923210

Report Date and Time _ : 23-Sep-2023 08:39 Acc. Remarks

· Normal

Ref Id2 : 023245189

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

HAEMATOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)

ABO Type

0

Rh Type

POSITIVE

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

Dr. Manoj Shah

M.D. (Pathologist)

M.D. (Path. & Bact.)

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REMARKS

BIOLOGICAL REF RANGE

Name : RAMCHRAN GANDLURU Sex/Age : Male / 38 Years Case ID : 30902200786

Ref.By : HOSPITAL Dis. At : Pt. ID : 3000807

Bill. Loc. ; Aashka hospital Pt. Loc ;

Reg Date and Time : 23-Sep-2023 08:26 | Sample Type : Spot Urine | Mobile No : 8978753837

Sample Date and Time : 23-Sep-2023 08:26 Sample Coll. By : Ref Id1 : OO923210

Report Date and Time : 23-Sep-2023 08:39 Acc. Remarks : Normal Ref Id2 : 023245189

UNIT

URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

TEST

Colour Pale yellow

Transparency Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity 1.025 1.005 - 1.030 **pH** 6.00 5 - 8

RESULTS

Leucocytes (ESTERASE)NegativeNegativeProteinNegativeNegative

GlucoseNegativeNegativeKetone Bodies UrineNegativeNegativeUrobilinogenNegativeNegativeBilirubinNegativeNegative

Bilirubin Negative Negative
Blood Negative Negative
Nitrite Negative Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte Nil /HPF Nil Red Blood Cell Nil /HPF Nil

Epithelial Cell Present + /HPF Present(+)

Bacteria Nil /ul Nil
Yeast Nil /ul Nil
Cast Nil /LPF Nil

Crystals Nil /HPF Nil

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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: RAMCHRAN GANDLURU Name

Sex/Age ; Male / 38 Years

: 30902200786

Ref.By

Dis. At :

: 3000807 Pt. ID

Bill. Loc. : Aashka hospital

: HOSPITAL

Pt. Loc

Reg Date and Time

: 23-Sep-2023 08:26 | Sample Type

Mobile No : 8978753837

: Spot Urine

Ref Id1 : 00923210

Sample Date and Time : 23-Sep-2023 08:26 Sample Coll. By : Report Date and Time : 23-Sep-2023 08:39 Acc. Remarks

Normal

Ref Id2 : O23245189

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0	Tell some			A	
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
	20.00		Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	=	-	-	-
Red blood cells(Microscopic)	/hpf	<2	24	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist) Page 6 of 13





RAMCHRAN GANDLURU Name

Sex/Age : Male / 38 Years

Case ID : 30902200786

Ref.By

: HOSPITAL

Dis. At :

Pt. ID : 3000807

Bill. Loc. ; Aashka hospital

Reg Date and Time

: 23-Sep-2023 08:26 | Sample Type

: Plasma Fluoride F, Plasma

Mobile No : 8978753837

Fluoride PP

Sample Date and Time : 23-Sep-2023 08:26 | Sample Coll. By :

Ref Id1

Pt. Loc

: 00923210

Report Date and Time 23-Sep-2023 11:02 Acc. Remarks

Normal

Ref Id2

· O23245189

RESULTS

BIOLOGICAL REF RANGE

REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F Photometric, Hexokinase

94.92

mg/dL

70 - 100

Plasma Glucose - PP

132.66

mg/dL

70.0 - 140.0

Referance range has been changed as per recent guidelines of ISPAD 2018.

<100 mg/dL: Normal level

100-<126 mg/dL: Impaired fasting glucoseer guidelines

>=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah

M.D. (Pathologist)

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Name RAMCHRAN GANDLURU Sex/Age: Male / 38 Years

BIOLOGICAL REF RANGE

30902200786 Case ID

Ref.By : HOSPITAL

TEST

Dis. At :

Pt. ID : 3000807

Bill. Loc. : Aashka hospital

Pt. Loc

Reg Date and Time

: 23-Sep-2023 08:26 | Sample Type

: Serum

Mobile No : 8978753837

Sample Date and Time : 23-Sep-2023 08:26 | Sample Coll. By :

Ref Id1

Ref Id2

: 00923210 : O23245189

Report Date and Time : 23-Sep-2023 09:47

Acc. Remarks

· Normal

REMARKS

RESULTS

BIOCHEMICAL INVESTIGATIONS Lipid Profile

UNIT

Cholesterol Colorimetric, CHOD-POD		170.4	mg/dL	110 - 200
HDL Cholesterol	L	35.5	mg/dL	48 - 77
Triglyceride Glycerol Phosphate Oxidase		122.1	mg/dL	<150
VLDL Calculated		24.42	mg/dL	10 - 40
Chol/HDL Calculated	Н	4.80		0 - 4.1

LDL Cholesterol

110.48

mg/dL

0.00 - 100.00

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal<100	Desirable<200	Low<40	Normal<150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	79 -	High 200-499
High 160-189	1	<u> </u>	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.

Detail test interpreation available from the lab

- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah M.D. (Pathologist)

Dr. Manoj Shah M.D. (Path. & Bact.)

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Mobile No : 8978753837

Name : RAMCHRAN GANDLURU Sex/Age : Male / 38 Years Case ID : 3090220078

Ref.By : HOSPITAL Dis. At : Pt. ID : 3000807

Bill. Loc. ; Aashka hospital

: 23-Sep-2023 08:26 | Sample Type

Sample Date and Time : 23-Sep-2023 08:26 | Sample Coll. By : | Ref Id1 : OO923210

Report Date and Time : 23-Sep-2023 09:47 Acc. Remarks : Normal Ref Id2 : 023245189

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

; Serum

Liver Function Test

			9.00(0)
S.G.P.T. UV with P5P	23.0	U/L	16 - 63
S.G.O.T. UV with P5P	16.5	U/L	15 - 37
Alkaline Phosphatase Enzymatic, PNPP-AMP	79.39	U/L	46 - 116
Gamma Glutamyl Transferase L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate	10.9	U/L	0 - 55
Proteins (Total) Colorimetric, Biuret	6.40	gm/dL	6.40 - 8.30
Albumin Bromocresol purple	4.10	gm/dL	3.4 - 5
Globulin Calculated	2.30	gm/dL	2 - 4.1
A/G Ratio Calculated	1.8		1.0 - 2.1
Bilirubin Total Photometry	0.30	mg/dL	0.3 - 1.2
Bilirubin Conjugated Diazotization reaction	0.15	mg/dL	0 - 0.50
Bilirubin Unconjugated Calculated	0.15	mg/dL	0 - 0.8

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah M.D. (Pathologist)

Reg Date and Time

Dr. Manoj Shah M.D. (Path. & Bact.)

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CAP



Sex/Age : Male / 38 Years

Case ID

: 30902200786

Dis. At :

Pt. ID

: 3000807 Pt. Loc

Bill. Loc. ; Aashka hospital Reg Date and Time

: HOSPITAL

RAMCHRAN GANDLURU

: 23-Sep-2023 08:26 Sample Type : Serum

Mobile No : 8978753837 Ref Id1 : 00923210

Sample Date and Time : 23-Sep-2023 08:26

Report Date and Time

: 23-Sep-2023 09:47

Sample Coll. By

Acc. Remarks

Normal

BIOLOGICAL REF RANGE

Ref Id2 : O23245189

TEST

RESULTS

mg/dL

UNIT

8.90 - 20.60

REMARKS

BUN (Blood Urea Nitrogen)

9.0 0.90

mg/dL

0.50 - 1.50

Creatinine Uric Acid Uricase

Name

Ref.By

5.35

mg/dL

3.5 - 7.2

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah M.D. (Pathologist)

Dr. Manoj Shah M.D. (Path. & Bact.)

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: RAMCHRAN GANDLURU Name

Sex/Age : Male / 38 Years : 30902200786

Ref.By

: HOSPITAL

Dis. At :

Pt. ID Pt. Loc : 3000807

Bill. Loc. : Aashka hospital

: 23-Sep-2023 08:26

: Whole Blood EDTA

Reg Date and Time

Sample Type

Mobile No : 8978753837

Sample Date and Time : 23-Sep-2023 08:26

Sample Coll. By

Ref Id1 : 00923210

Report Date and Time ; 23-Sep-2023 09:10 Acc. Remarks

Normal

Ref Id2 : 023245189

TEST

UNIT

BIOLOGICAL REF RANGE

REMARKS

Glycated Haemoglobin Estimation

HbA1C

5.69

% of total Hb <5.7: Normal

5.7-6.4: Prediabetes

>=6.5: Diabetes

Estimated Avg Glucose (3 Mths)

116.60

mg/dL

Not available

Please Note change in reference range as per ADA 2021 guidelines.

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.

Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.

Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.

Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.

In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.

The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes. risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

Dr. Manoj Shah

M.D. (Pathologist)

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M.D. (Path. & Bact.)



		450547054						
· ·	LABORATORY REPORT							
Name : RAMCHRAM	GANDLURU		Sex/Age	: Male	/ 38 Years	Case ID	: 30902200786	
Ref.By ; HOSPITAL			Dis. At			Pt. ID	: 3000807	
Bill. Loc. ; Aashka hosp	pital					Pt. Loc		
Reg Date and Time	: 23-Sep-2023 08:26	Sample Type	; Serum			Mobile No	: 8978753837	
Sample Date and Time	: 23-Sep-2023 08:26	Sample Coll. By				Ref Id1	: 00923210	
Report Date and Time	: 23-Sep-2023 09:47	Acc. Remarks	: Normal			Ref Id2	: O23245189	
TEST	RESU	LTS	UNIT	BIOLO	OGICAL REF	RANGE	REMARKS	
Thyroid Function Test								
Triiodothyronine (T3)	71.23		ng/dL	70 - 2	.04			
Thyroxine (T4)	5.80		ng/dL	4.87 -	11.72			
TSH CMIA	2.40		µIU/mL	0.4 - 4	4.2			

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipent hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a supressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy

First trimester Second trimester Third trimester Reference range (microIU/ml)

0.24 - 2.00 0.43-2.2 0.8-2.5

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

Dr. Manoj Shah

M.D. (Pathologist)

M.D. (Path. & Bact.)

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CAP



Case ID : 30902200786 Sex/Age : Male / 38 Years Name : RAMCHRAN GANDLURU

Pt. ID : 3000807 Ref.By : HOSPITAL Dis. At :

Pt. Loc Bill. Loc. : Aashka hospital

: 23-Sep-2023 08:26 Sample Type Mobile No : 8978753837 Reg Date and Time : Serum

Sample Date and Time : 23-Sep-2023 08:26 Sample Coll. By Ref Id1 : 00923210 Acc. Remarks Report Date and Time : 23-Sep-2023 09:47 Normal Ref Id2 023245189

Interpretation Note:
Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in senously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests: T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hypothyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal

FT4 concentrations Normal ranges of TSH & thyroid hormons vary according trimesper in pregnancy.

TSH ref range in Pregnacy Reference range (microlU/ml)

0.24 - 2.00 0.43-2.2 First triemester Second triemester Third triemester 0.8 - 2.5

	тз	T4	TSH	
Normal Thyroid function	N	N	N	
Primary Hyperthyroidism	个	1	4	
Secondary Hyperthyroidism	^	^	^	
Grave's Thyroiditis	^	1	^	
T3 Thyrotoxicosis	1	N	ΝŢ	
Primary Hypothyroidism	V	4	^	
Secondary Hypothyroidism	Ψ.	1	4	
Subclinical Hypothyroidism	Ν	N	^	
Patient on treatment	N	NΛ	1	

End Of Report ----

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreva Shah

Dr. Manoj Shah

M.D. (Pathologist)

M.D. (Path. & Bact.)

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www.aashkahospitals.in CIN: L85110<u>GJ2012PLC072647</u>



PATIENT NAME: RAM CHARAN GANDLURU

GENDER/AGE:Male / 38 Years DOCTOR:DR.HASIT JOSHI

OPDNO:00923210

DATE:23/09/23

2D-ECHO

MITRAL VALVE

: NORMAL

AORTIC VALVE

: NORMAL

TRICUSPID VALVE

: NORMAL

PULMONARY VALVE

: NORMAL

AORTA

: 28mm

LEFT ATRIUM

: 32mm

LV Dd / Ds

: 39/26mm

EF 60%

IVS / LVPW / D

: 10/10mm

IVS

: INTACT

IAS

: INTACT

RA

: NORMAL

RV

: NORMAL

PA

:'NORMAL

PERICARDIUM

: NORMAL

VEL

M/S

PEAK

Gradient mm Hg

Gradient mm Hg

MEAN

MITRAL

: 1/0.7m/s

AORTIC

ing nown view

: 1.2m/s

PULMONARY

: 0.9 m/s

COLOUR DOPPLER

: NO MR/AR/TR

RVSP

:

CONCLUSION

: NORMAL LV SIZE / SYSTOLIC FUNCTION.

CARDIOLOGIST DR.HASIT 10541 (9825012235)

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PATIENT NAME: RAM CHARAN GANDLURU

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DOCTOR:

OPDNO:00923210

DATE:23/09/23

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.

No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.

Both hilar shadows and C.P. angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.

DR. SNEMAL PRAJAPATI CONSULTANT RADIOLOGIST

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DOCTOR:

OPDNO:00923210

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SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.1 x 4.6 cms in size. Left kidney measures about 10.6 x 4.8 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.

No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 140 cc.

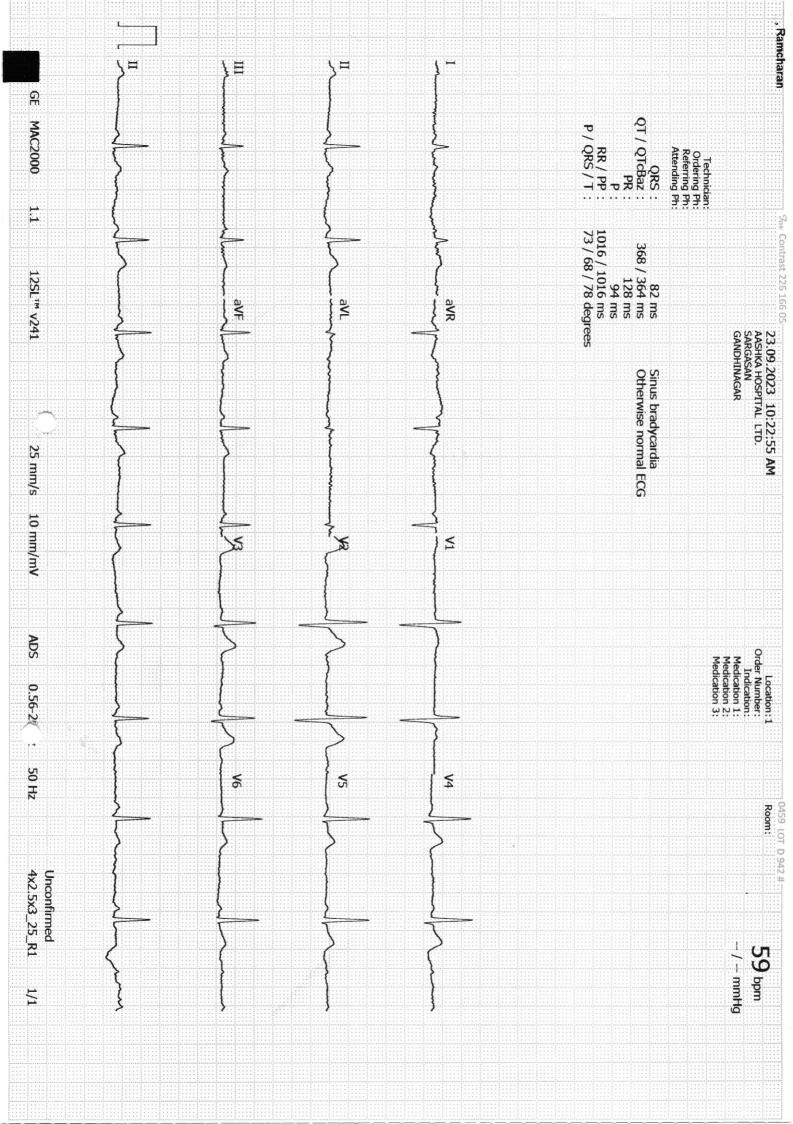
PROSTATE: Prostate appears normal in size and shows normal parenchymal echoes. No evidence of pathological calcification or solid or cystic mass lesion is seen.

Prostate measures about 2.8 x 3.8 x 3.2 cms in size.

Prostate volume measures about 14 cc.

COMMENT: Normal sonographic appearance of liver, GB; Pancreas, spleen, kidneys, bladder and prostate.

DR. SNEHAL PRAJAPATI CONSULTANT RADIOLOGIST





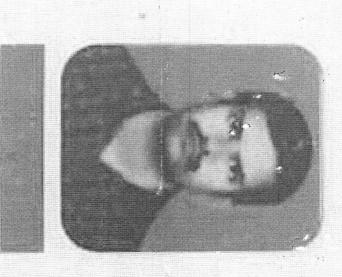


मामा गडिलुरु सम चर्ण

Name: MR. GANDLURU RAM CHARAN

कर्मचारी कुट क्र. Employee Code No

98049



Signature of Holder धारक के हस्ताक्षर

Issuing Authority जारीकता प्राधिकारी