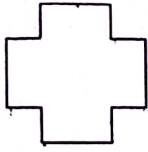


12108123

mediwheel



PANCHMUKHI HOSPITAL

Dr C P Dadhaniya

Dr R C Dadhaniya

MBBS, Dip.G.O, Diabetologist

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT. Mo.9925333639, 8320711901

policy number :
full name : Amid kumar Bairnwal
identity proof : Adhar card
identity proof no : 1706
gender : male
height : 171 cm
weight : 65 kg
B P : 120/82
pulse : 68/min Regular
blood sample : yes
fasting mode : yes
non fasting mode : yes

past history : No

dental : Healthy

~~Gynac~~ :

General : Healthy

DR. C. P. DADHANIYA

M.B. Diabetologist

Physician (CIH)

Regd. No. G19798

Code No. 378943

Panchmukhi Hospital

Mavdi Chowki,

150 Ft. Ring Road, RAJKOT.



Scanned with OKEN Scanner

NAME : Amit Kumar Bishwal
AGE/GENDER: 35 / male

DIAG. DATE: 12/08/23

PATIENT'S REFRACTION DETAILS

| | | SPHE | CYL | AXIS | VN |
|---|---|------|-----|------|-----|
| R | D | N | N | N | 6/6 |
| | N | N | | | 6/6 |
| L | D | N | N | N | 6/6 |
| | N | N | | | 6/6 |

REMARKS :

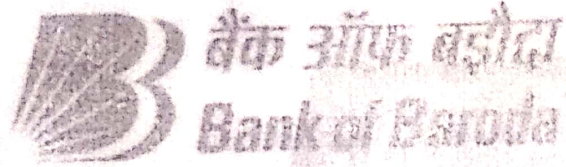
CHECKED BY : DR. C.P. Dadhaniya

DR. C. P. DADHANIYA

M.B. Diabetologist
Ind. Physician (CIH)
Regd. No. G19798
Code No. 370043

Panchmukhi Hospital
Mavdi Chowki,
150 Ft. Ring Road, RAJKOT





बैंक ऑफ बड़ोदा
Bank of Baroda



नाम
Name **अमित कुमार वर्णवाल**
Amit Kumar Barnwal

कर्मचारी कूट क्र.
E.C. No. **97262**

जारीकर्ता प्राधिकारी
Issuing Authority

धारक के हस्ताक्षर
Signature of Holder

रक्त समूह / Blood Group **O+ve** पहचान चिह्न / Identification **Mobile on Neck**

क्षेत्रीय वित्त/वित्तियोग्यता कार्यालय
Regional Office, Krishna Honda Building
Akharagnal Road, Muzaffarpur

Mobile No. - 8002134430

यदि पाया जाए तो इसे तुरंत वापस भेजें।

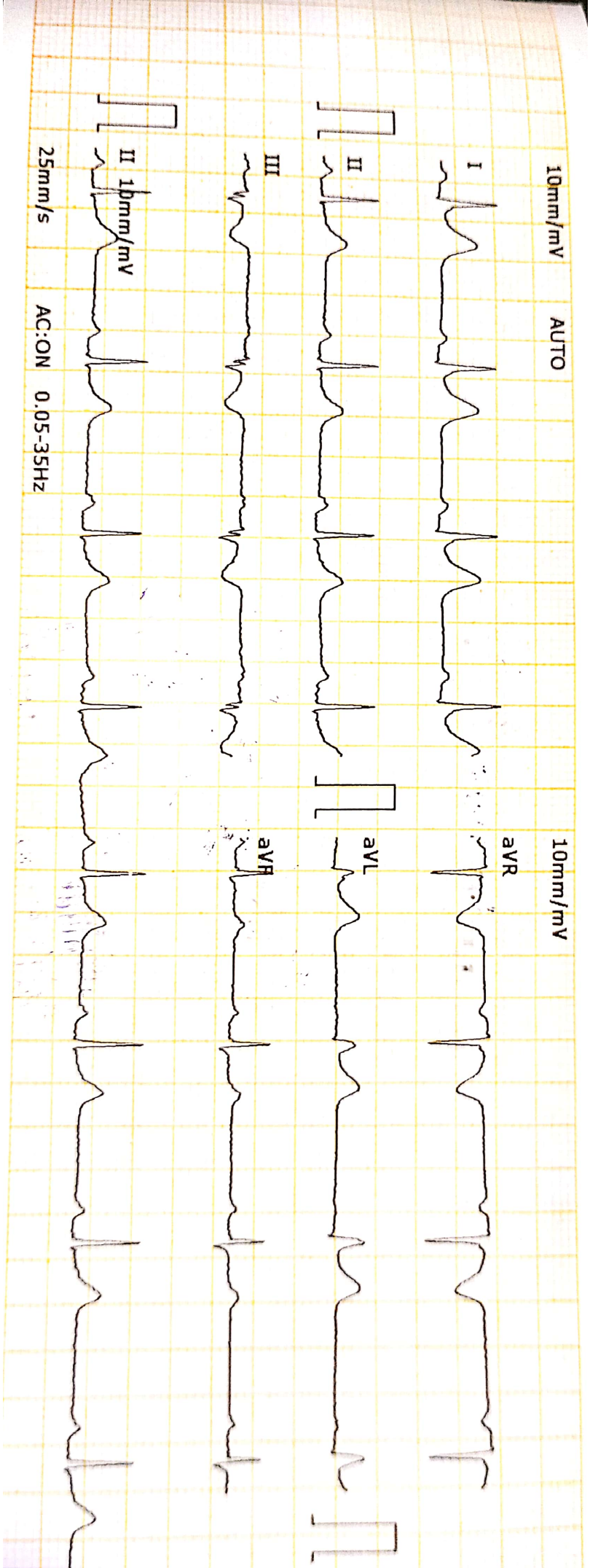
Bank of Baroda, Baroda Corporate Centre
C-26, G-Block, Baroda-Kurda Complex, Mumbai-400 051, India
Phone 91 22 6698 5196 Fax 91 22 2652 5747
By General Manager

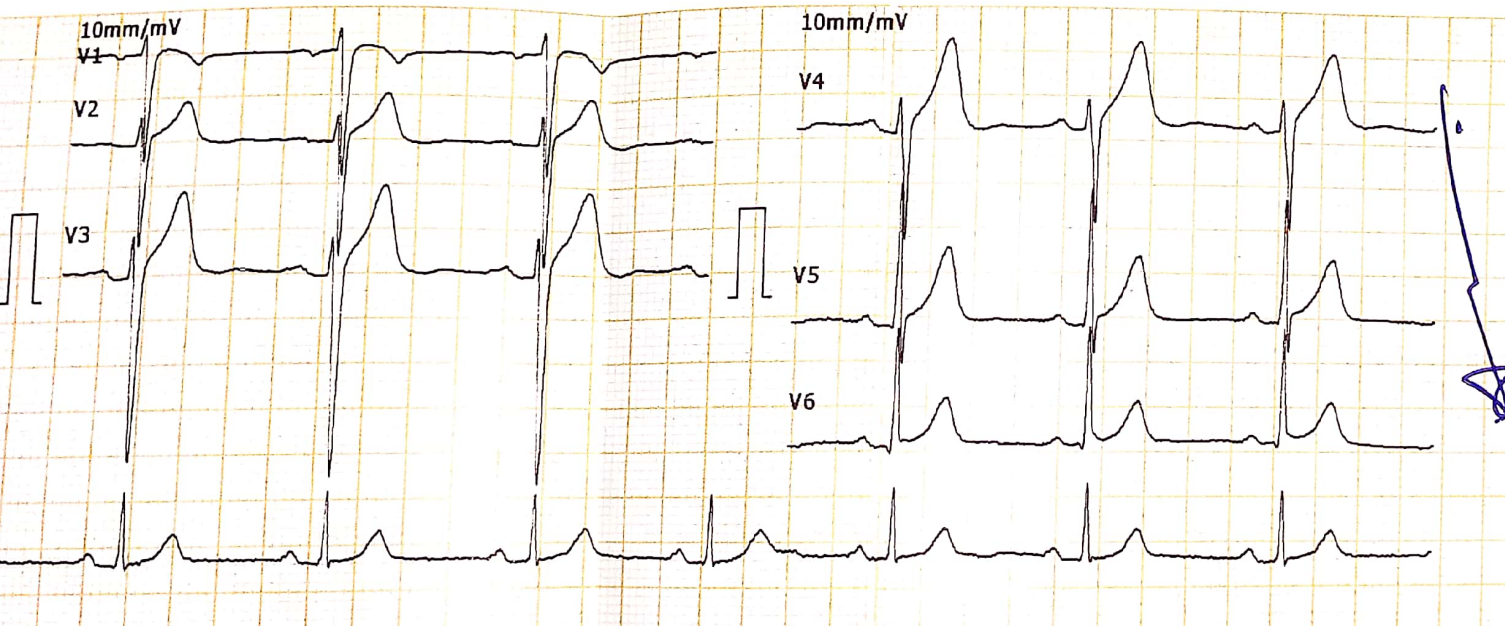
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91 22 6698 5196 फोन 91 22 2652 5747



DR. P. DADHANIYA
M.B. Diabetologist
Ind. Physician (CIH)
Regd. No. 61978
Cont. No. 372543
Panchmukhi Hospital
Mavdi Chowki,
150 Ft. Ring Road, RAJKOT.





2023-8-12 9:25:53

ID:00003374

ID Card: _____
 Name: Amit Kumar BUNWAL
 Age: 35 Gender: male
 Weight(Kg): _____ Height(cm): _____
 BP(mmHg): 1

HR.....bpm 69
 P-R.....43
 Q-R-S.....103
 QT/QTc.....Ind. Physician (C.S.I) 350/383
 P/QRS/T AXES..... Regd. No. G. deg 12/47
 RV5/SV1..... Code No. 3.1mV 1.25
 RV5+SV1..... Panchmukhi Hospital...mV 2.66

*The result must be confirmed by doctor!
 Report Contd. by: 150 Ft. Ring Road, RAJKOT.

Tread Mill Test

| | | | | | |
|--------------|---|--------------------|------------|---|---------|
| Patient Name | : | Amitkumar Baranwal | Age | : | 35yrs/M |
| Ref. By | : | Dr. C.P Dadhaniya | Resting BP | : | 120/80 |
| Report Date | : | 12/08/2023 | Max. BP | : | 150/80 |

Patient Reaches exercise limit at 7.00 METS.

No signs of ischemia at the exercise level.

Adequate increase of HR & BP.

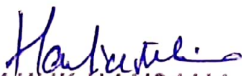
No significant Arrhythmia.

The stress test was terminated after 5:58 minutes as patient complained of Fatigue.
Patient achieved 92% THR without chest pain.

The recovery was uneventful.

Fair effort tolerance.

Conclusion: - The stress test is NEGATIVE for exercise induced myocardial ischaemia.


DR. MAULIK HANSALIA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

DR. NISHANT SIRODARIYA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY



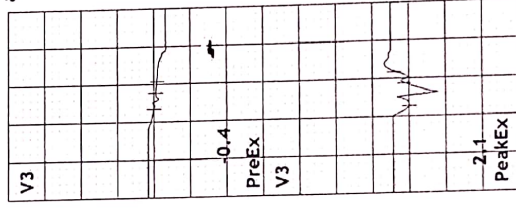
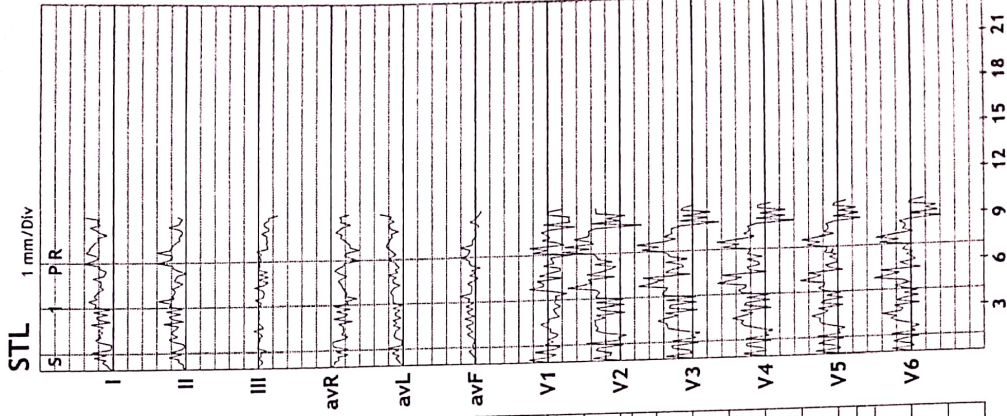
Summary

| Stage | StageTime (Min:Sec) | PhaseTime (Min:Sec) | Speed (kmph) | Grade (%) | METs | H.R. (bpm) | B.P. (mmHg) | R.P.P. x100 | PVC | Comments |
|----------|---------------------|---------------------|--------------|-----------|------|------------|-------------|-------------|-----|----------|
| Supine | 0:01 | 0:55 | 0.0 | 0.0 | 1.0 | 101 | 120/80 | 121 | - | |
| Standing | 0:01 | 0:58 | 0.0 | 0.0 | 1.0 | 101 | 120/80 | 121 | - | |
| HV | 0:01 | 1:01 | 0.0 | 0.0 | 1.0 | 62 | 120/80 | 74 | - | |
| ExStart | 0:01 | 1:04 | 0.0 | 0.0 | 1.0 | 114 | 120/80 | 136 | - | |
| Stage 1 | 3:00 | 3:01 | 2.7 | 10.0 | 4.6 | 142 | 130/80 | 184 | - | |
| PeakEX | 2:57 | 5:58 | 4.0 | 12.0 | 7.0 | 170 | 150/80 | 255 | - | |
| Recovery | 1:00 | 5:59 | 0.0 | 0.0 | 1.0 | 138 | 150/80 | 207 | - | |
| Recovery | 3:00 | 5:59 | 0.0 | 0.0 | 1.0 | 121 | 120/80 | 145 | - | |

Findings :

Exercise Time : 5:58 minutes
 Max HR attained : 170 bpm 92% of Max Predictable HR 185
 Max BP : 150/80(mmHg)
 WorkLoad attained : 7 (Fair Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Maximum Depression: 0:00
 Test Complete, Fatigue

Advice/Comments:



PANCHMUKHI HOSPITAL
 MAVADI CHOWK, 150 RING ROAD, RAJKOT
 248 / AMITKUMAR BARANWAL
 35 Yrs / Male
 0 Kg / 0 Cm
 Date: 12-Aug-2023 12:01:55 PM

3x4+1 Rhythm Lead

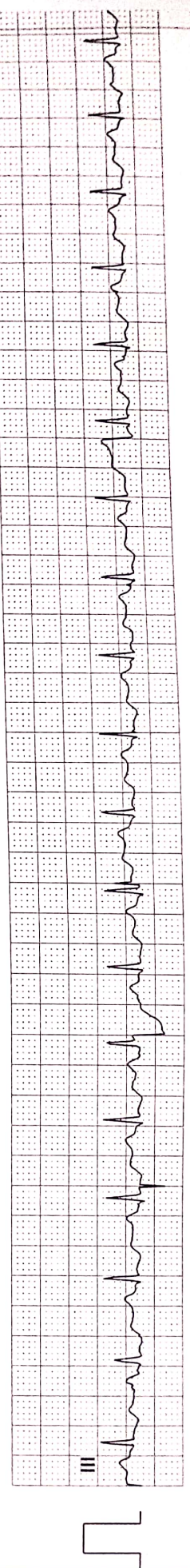
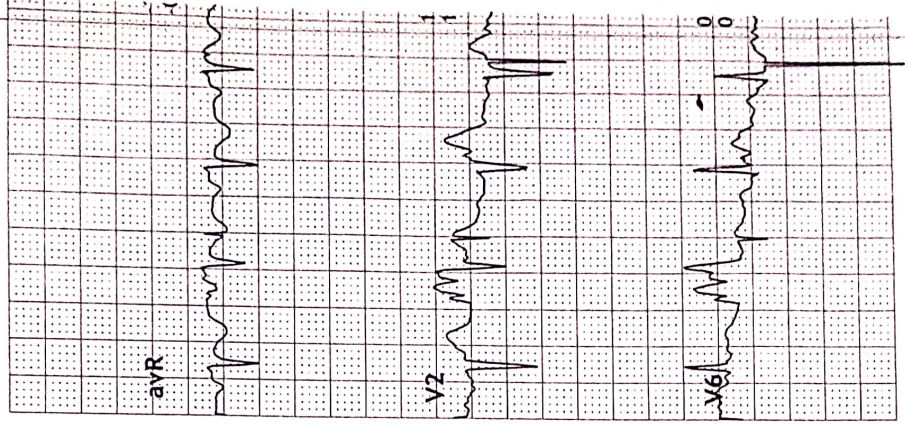
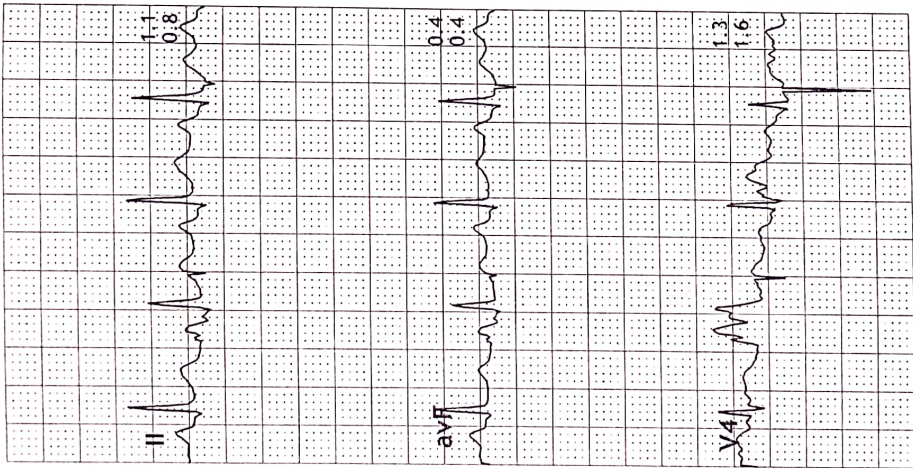
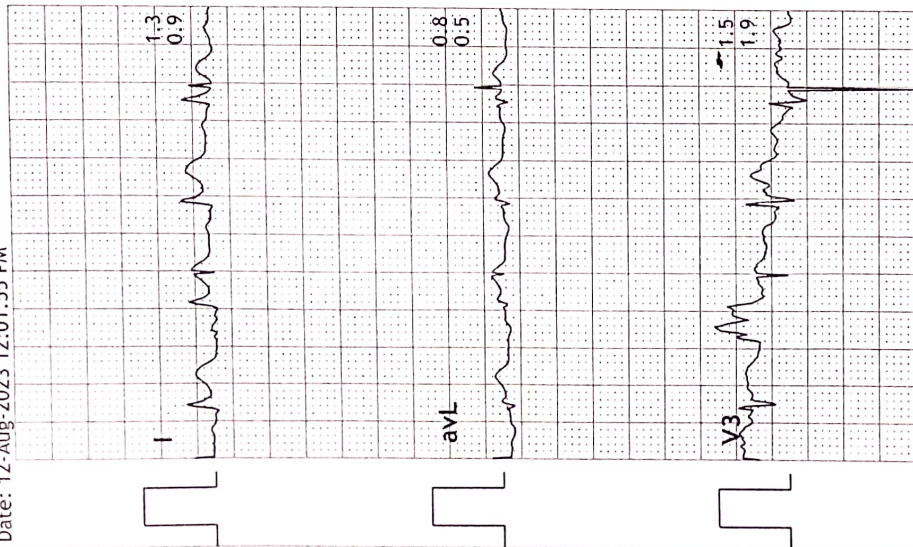
HR: 101 bpm
 METS: 1.0
 BP: 120/80

MPHR: 54% of 185
 Speed: 0.0 kmph
 Grade: 0.0%

Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 00:54
 BLC :On
 Notch :On

Supine
 10.0 mm/mV
 25 mm/Sec.



PANCHMUKHI HOSPITAL
 MAVADI CHOWK, 150 RING ROAD, RAJKOT
 248 / AMITKUMAR BARANWAL
 35 Yrs / Male
 0 Kg / 0 Cm
 Date: 12-Aug-2023 12:01:55 PM

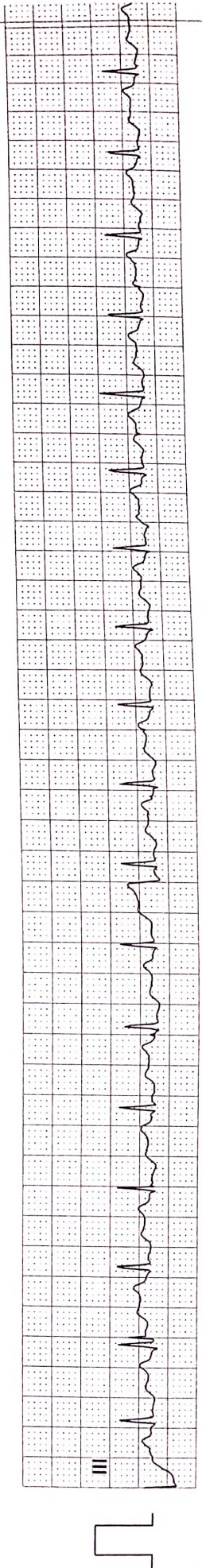
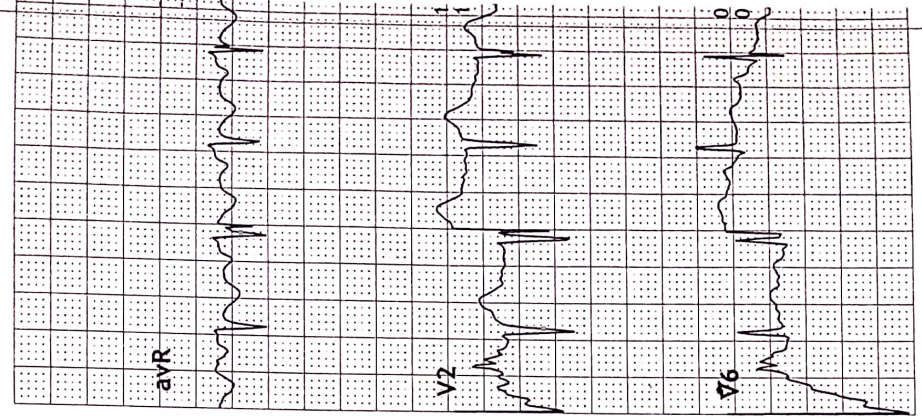
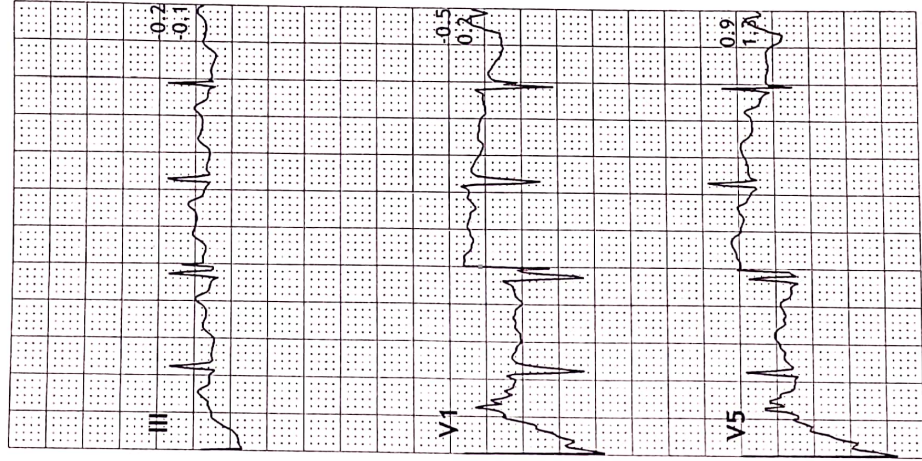
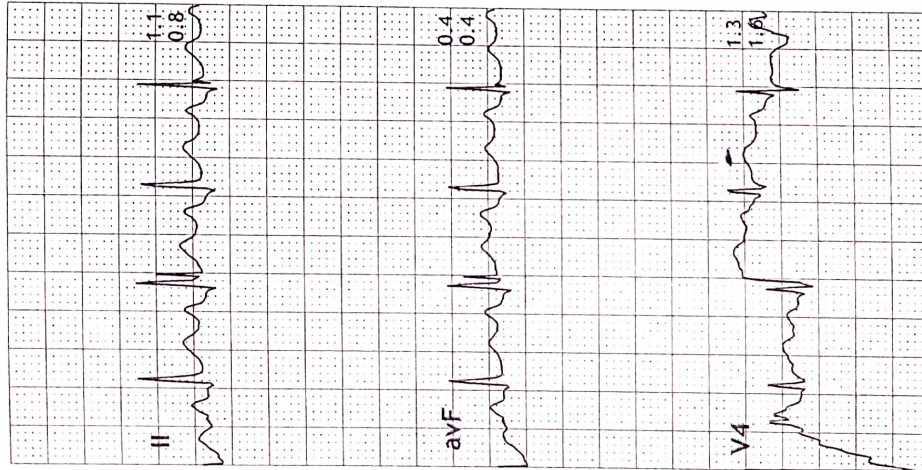
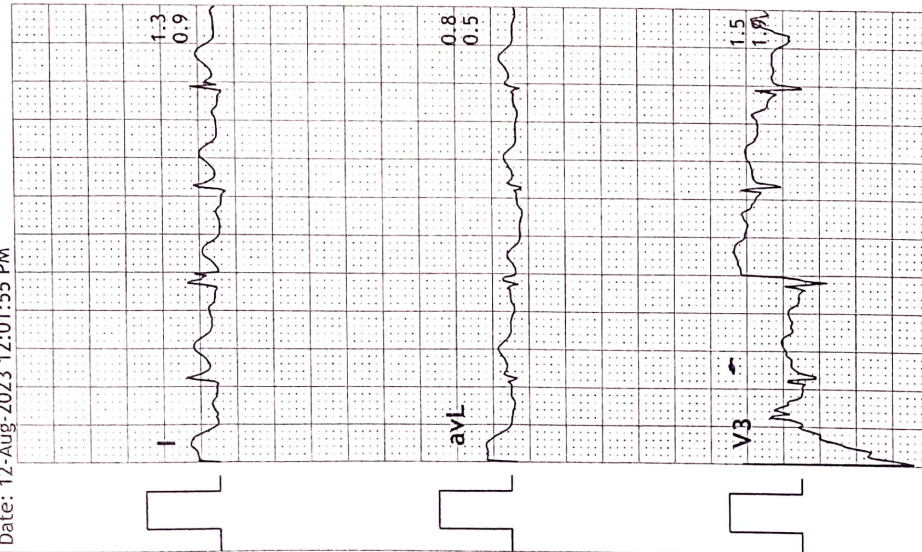
3x4+1 Rhythm Lead

HR: 101 bpm
 METS: 1.0
 BP: 120/80

MPHR: 54% of 185
 Speed: 0.0 kmph
 Grade: 0.0%

Raw ECG
 BRUCE
 (0.05-100)Hz

Standing
 10.0 mm/mV
 25 mm/Sec.



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT

24S / ANITKUMAR BARANWAL
35 Yrs / Male
0 Kg / 0 Cm
Date: 12-Aug-2023 12:01:55 PM

HR: 62 bpm
METS: 1.0
BP: 120/80

MPHR: 33% of 185
Speed: 0.0 kmph
Grade: 0.0%

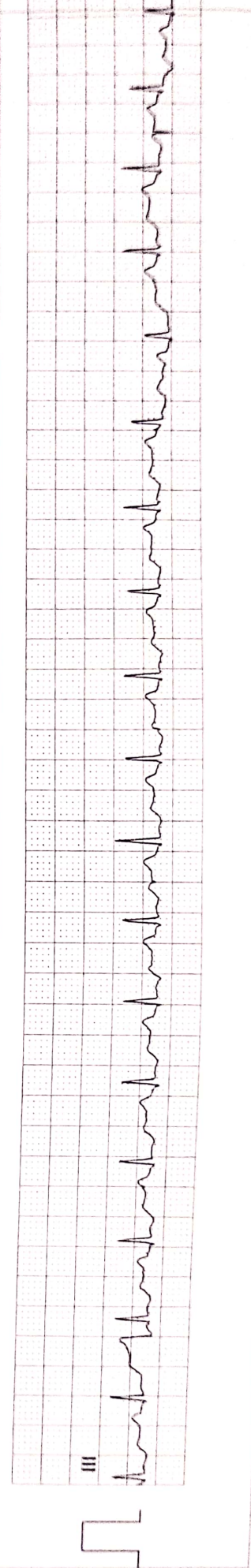
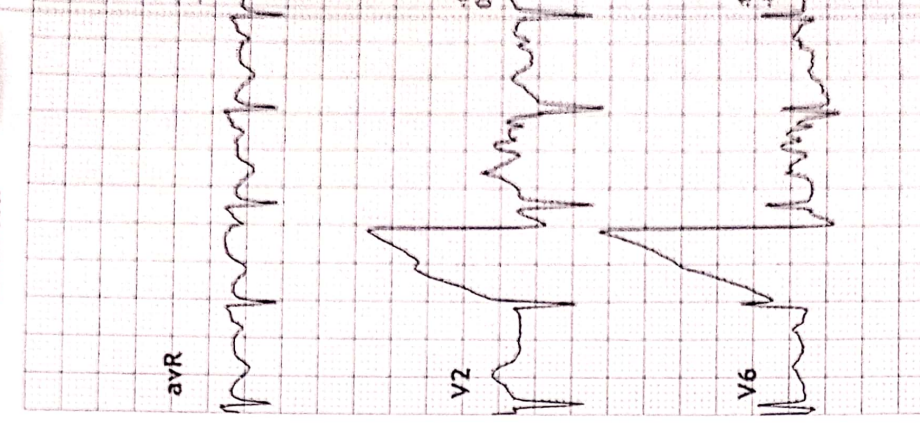
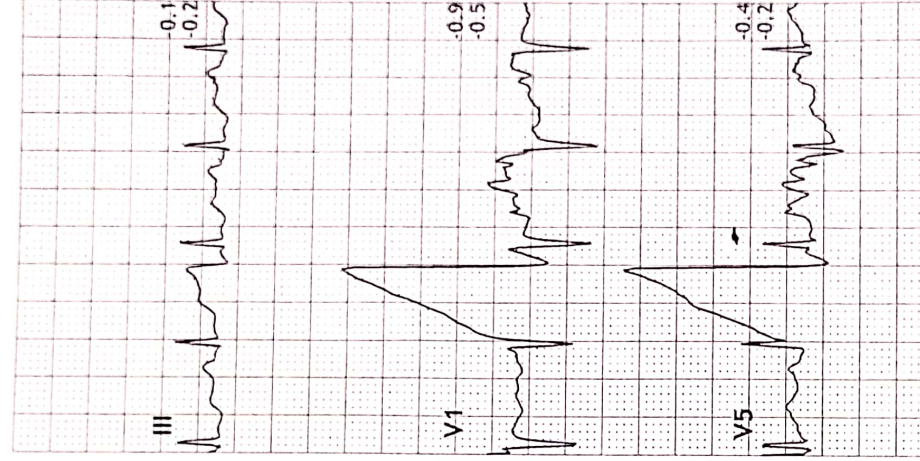
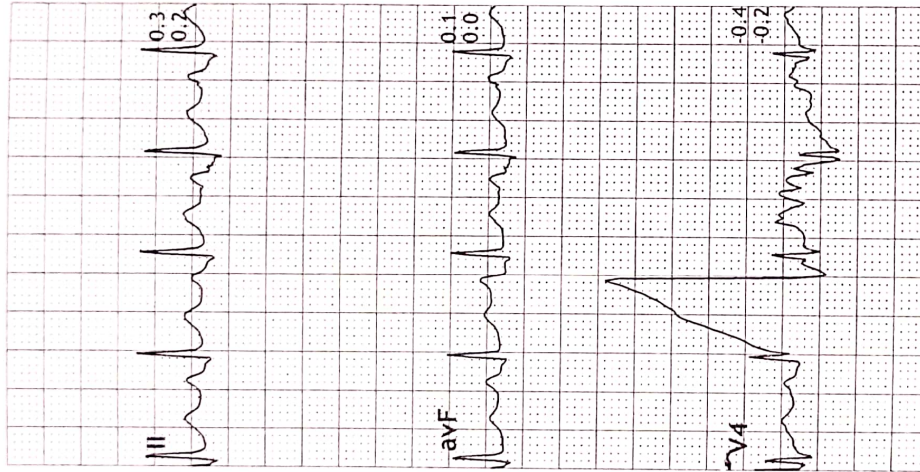
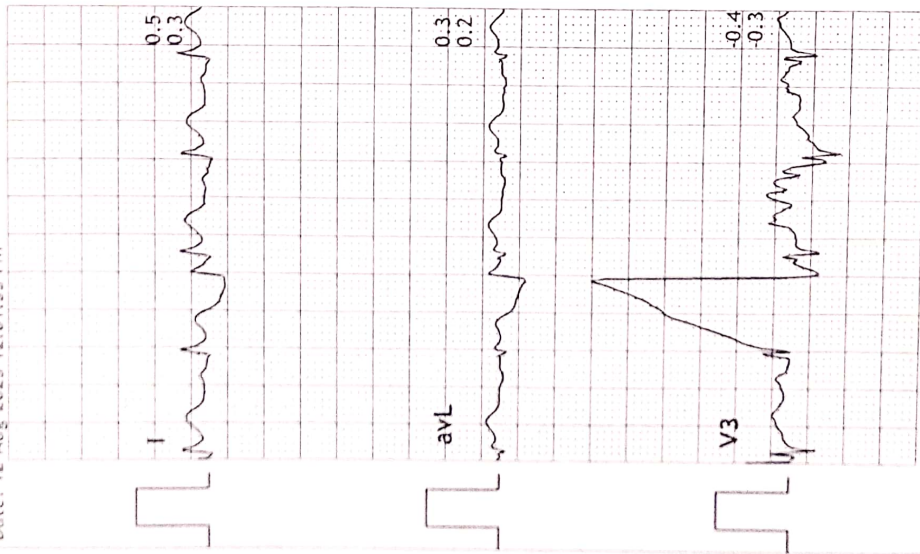
Raw ECG
BRUCE
(0.05-100)HZ

Ex Time 01:00
BLC : On
Notch : On

HV
10.0 mm/mV
25 mm/Sec.



3x4+1 Rhythm Lead



PANCHMUKHI HOSPITAL
 MAVADI CHOWK, 150 RING ROAD, RAJKOT
 248 / AMITKUMAR BARANWAL
 35 Yrs / Male
 0 Kg / 0 Cm
 Date: 12-Aug-2023 12:01:55 PM

HR: 114 bpm
 METS: 1.0
 BP: 120/80

MPHR: 61% of 185
 Speed: 0.0 kmph
 Grade: 0.0%

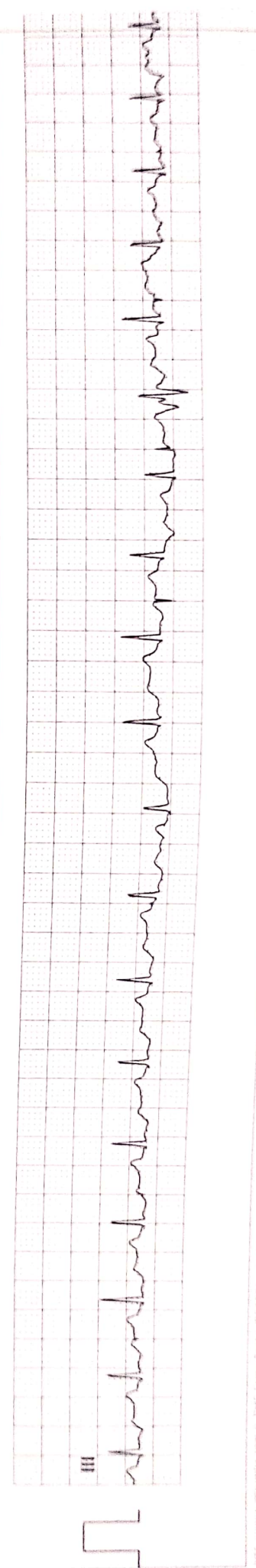
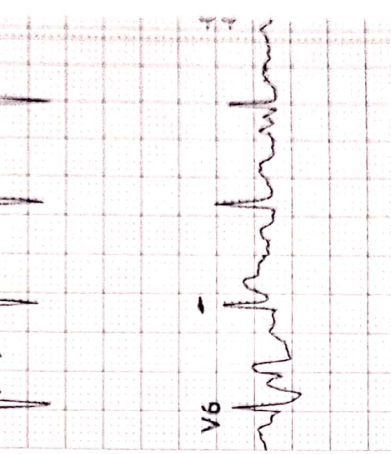
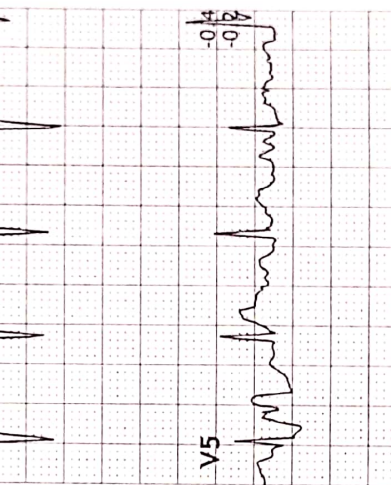
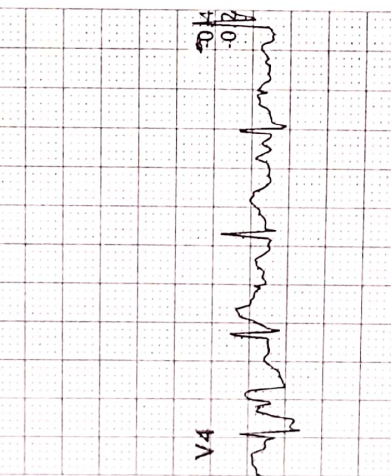
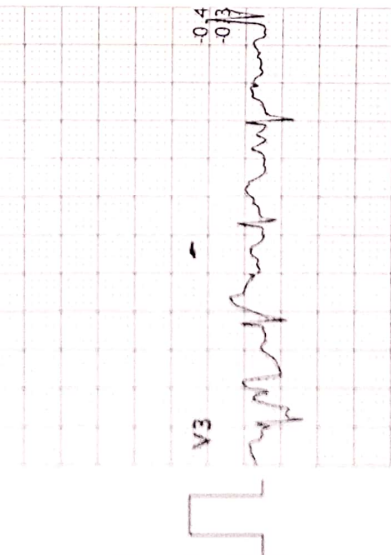
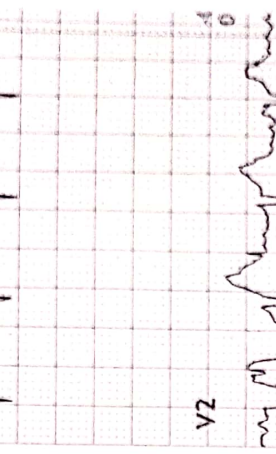
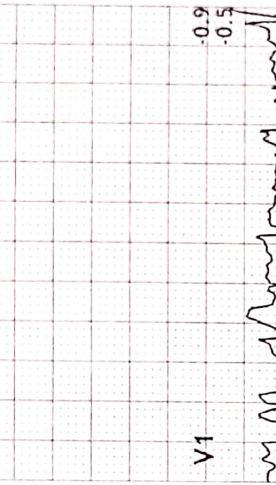
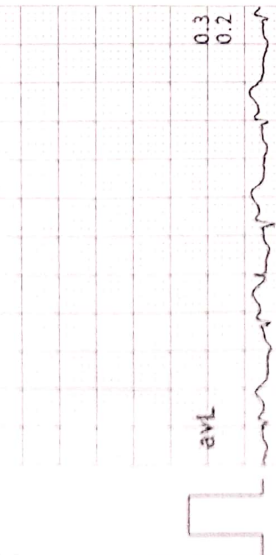
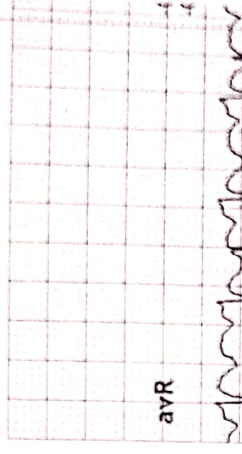
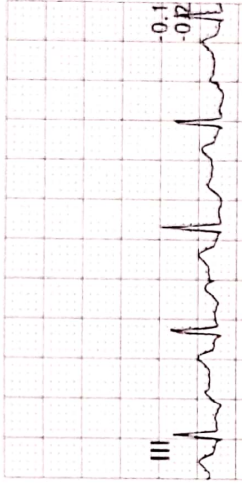
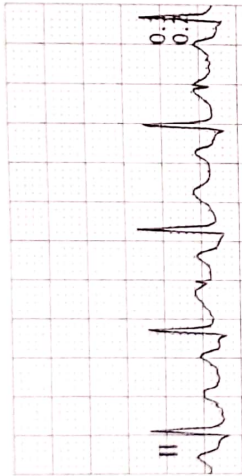
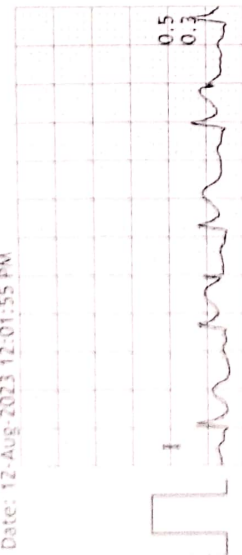
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 01:03
 BLC : On
 Notch : On

ExStart
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT

248 / AMITKUMAR BARANWAL
35 Yrs / Male
0 Kg / 0 Cm
Date: 12-Aug-2023 12:01:55 PM

HR: 170 bpm
METS: 7.0
BP: 150/80

MPHR: 91% of 185
Speed: 4.0 kmph
Grade: 12.0%

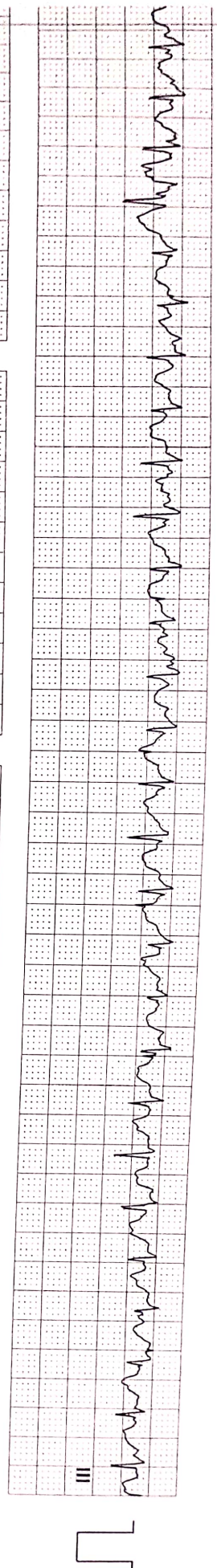
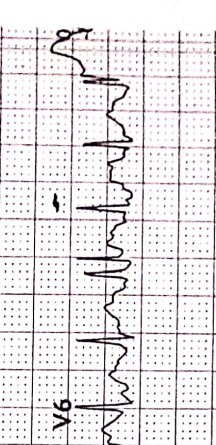
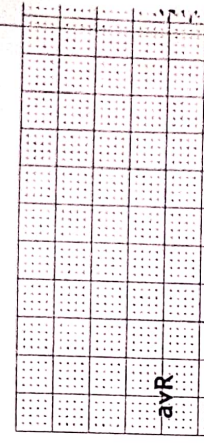
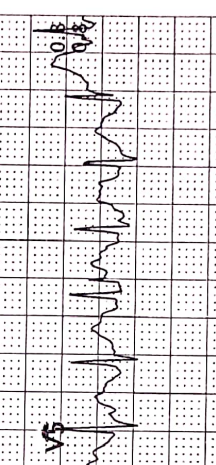
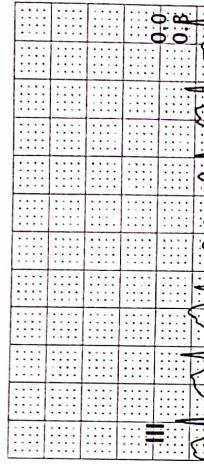
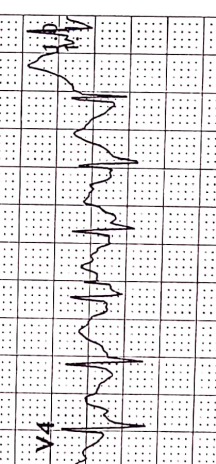
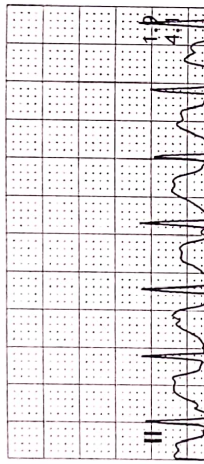
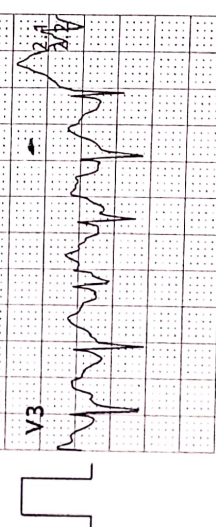
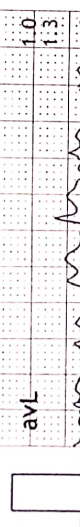
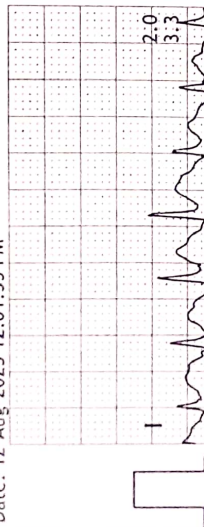
Raw ECG
BRUCE
(0.05-100)Hz

Ex Time 05:57
BLC :On
Notch :On

BRUCE: PeakEx
10.0 mm/mV
25 mm/Sec.



3x4+1 Rhythm Lead



PANCHMUKHI HOSPITAL
 MAYADI CHOWK, 150 RING ROAD, RAJKOT
 248 / AMITKUMAR BARANWAL
 35 Yrs / Male
 0 Kg / 0 Cm

Date: 12-Aug-2023 12:01:55 PM

HR: 138 bpm
 METS: 1.0
 BP: 150/80

MPHR: 74% of 185
 Speed: 0.0 kmph
 Grade: 0.0%

Raw ECG
 BRUCE
 (0.05-100)Hz

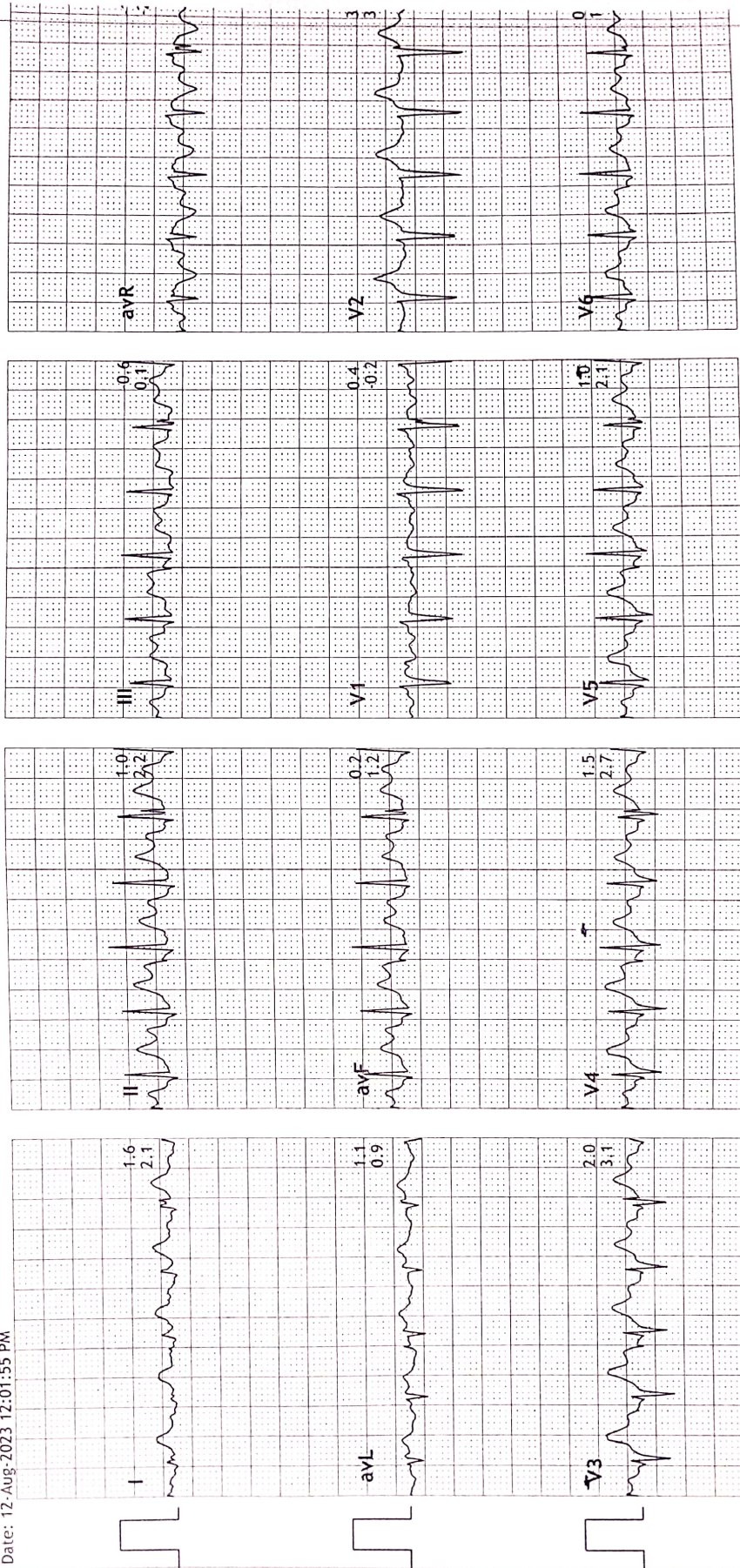
Ex Time 05:58
 BLC : On
 Notch : On

Recovery(1:00)
 10.0 mm/mV
 25 mm/Sec.



P. DADHANIYA
 B. Diabetologia

fasting mode : **Yes**
 non fasting mode : **Yes**
 : **30**
 past history



3x4+1 Rhythm Lead

DR MAULIK HANSALIA

Print Date: 12-Aug-2023

FILE: /www.rmsimg.com - RMS-StressTest (MEGA201 - v10.0.1)

PANCHMUKHI HOSPITAL
 MAVADI CHOWK, 150 RING ROAD, RAJKOT
 248 / AMITKUMAR BARANIWAL
 35 Yrs / Male
 0 Kg / 0 Cm

Date: 12-Aug-2023 12:01:55 PM

HR: 121 bpm
 METS: 1.0
 BP: 120/80

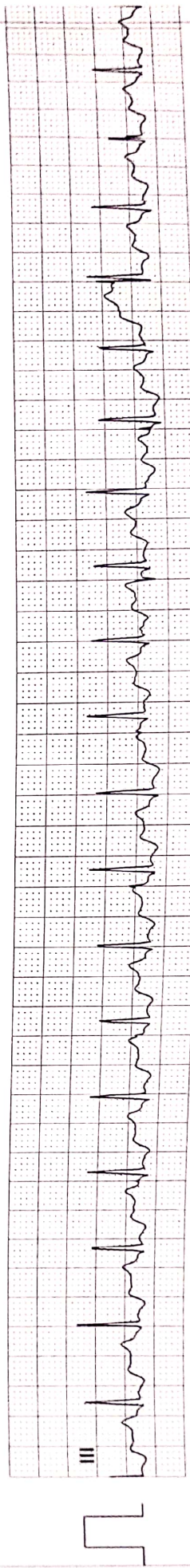
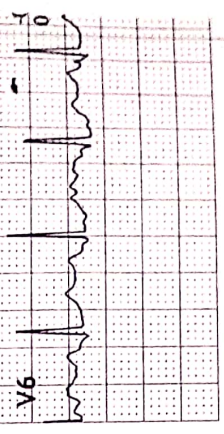
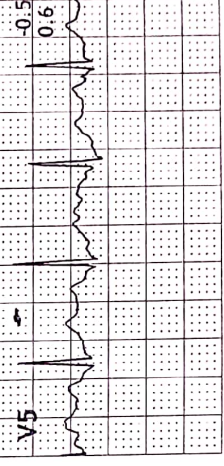
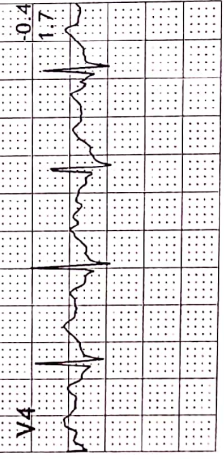
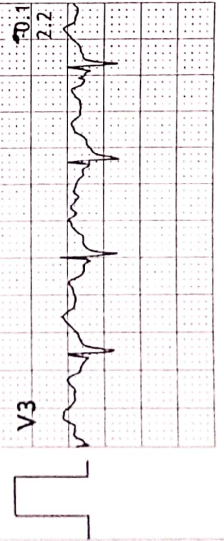
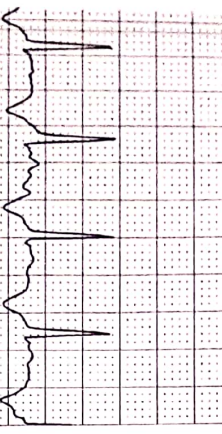
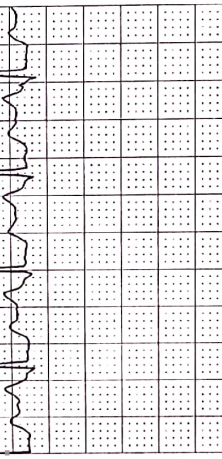
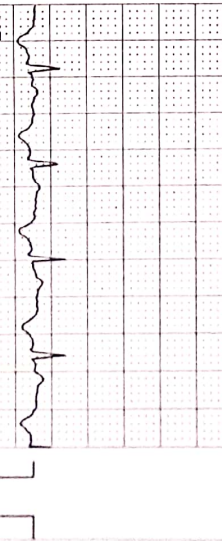
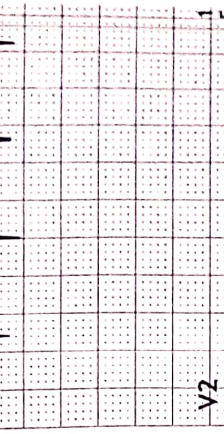
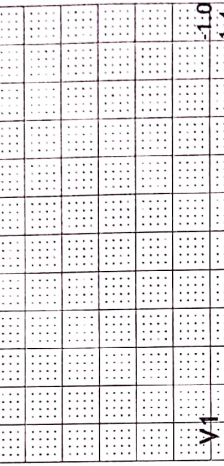
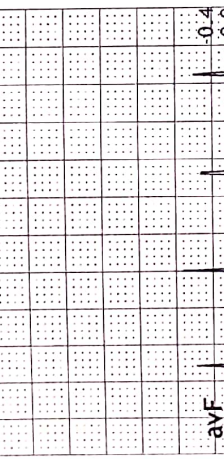
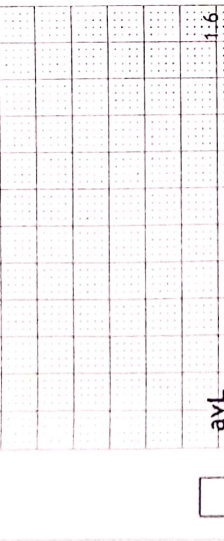
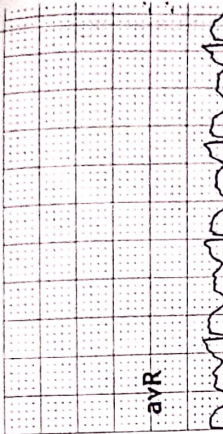
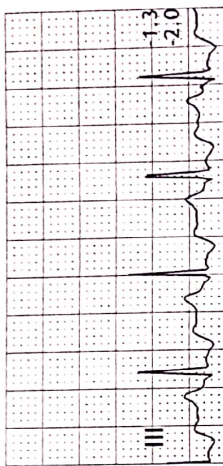
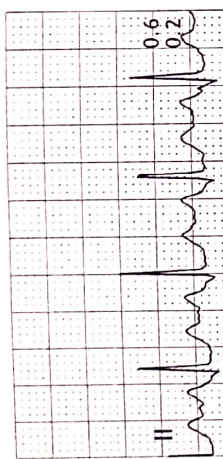
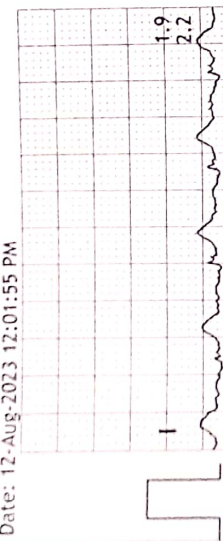
MPHR: 65% of 185
 Speed: 0.0 kmph
 Grade: 0.0%

Raw ECG
 BRUCE
 (0.05-100)HZ

Ex Time 05:58
 BLC :On
 Notch :On

Recovery(3:00)
 10.0 mm/mv
 25 mm/Sec.

3x4+1 Rhythm Lead





*Mediwheel amitkumar
barnwal*



GPS Map
Camera Lite

150-2, Ring Rd, near Mahiraj Hotel, Poonam Society, Om
Nagar, Rajkot, Gujarat 360004, India

Latitude

22.2650642°

Longitude

70.7844861°

Local 09:11:24 AM

GMT 03:41:24 AM

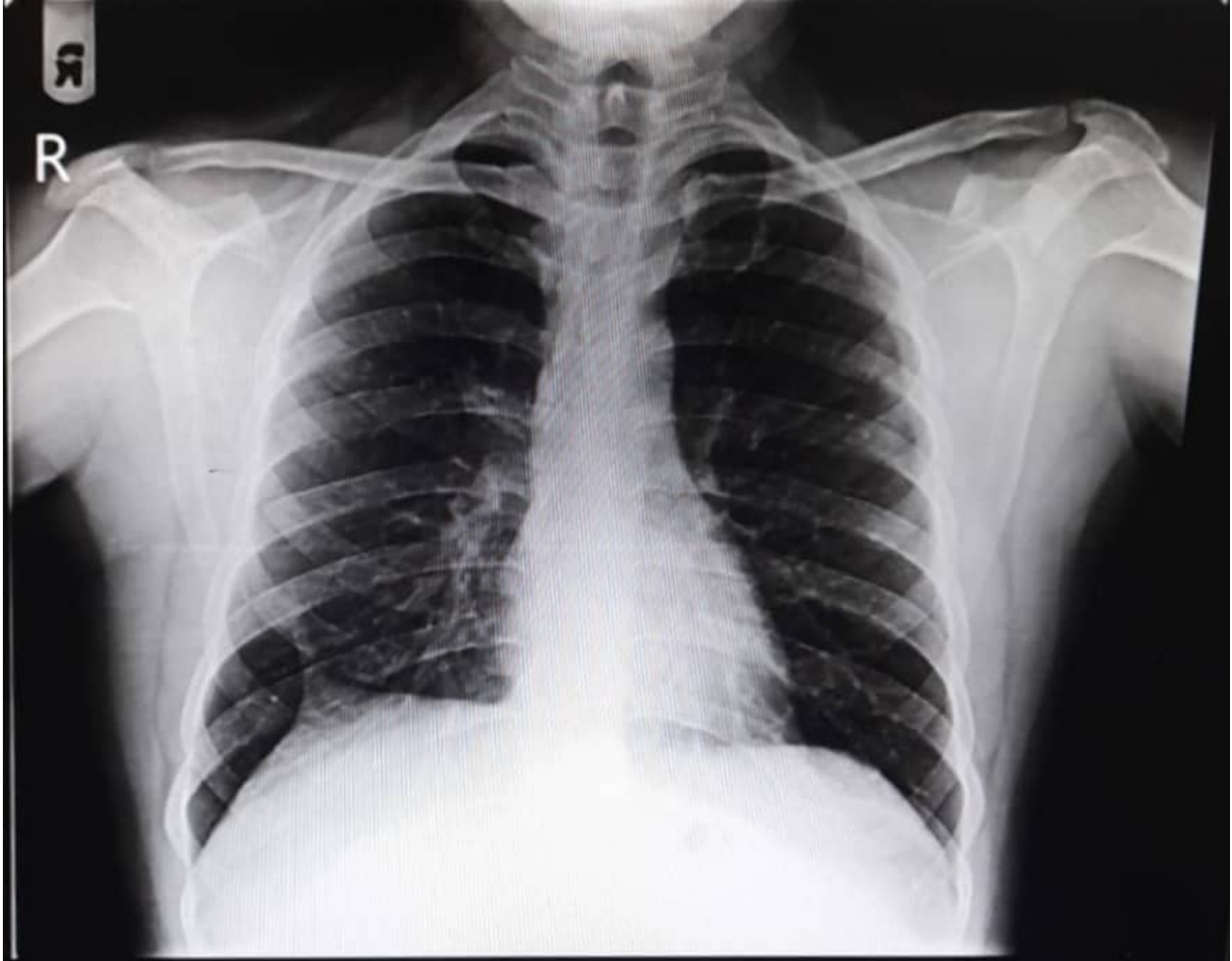
Altitude 145 meters

Saturday, 12.08.2023



Scanned with OKEN Scanner





R

AMITKUMAR BARNWAL 35 Y/M CHEST PA 12-Aug-23
NEELKANTH DIAGNOSTICS - RAJKOT (DR. PRATIK KAGATHARA)



Pat.s' Name: AMITKUMAR BARNWAL

DATE: 12 August 2023

U.S.G. OF ABDOMEN AND PELVIS

- **LIVER:** is normal size and shows bright parenchymal echotexture. No focal lesion noted. Intrahepatic biliary radicals appear normal. C.B.D and portal vein appears normal in calibre.
- **GALL BLADDER:** Well distended and appears normal. No evidence of gallstone or changes of cholecystitis.
- **PANCREAS:** appears normal in size, shape, echogenicity and echotexture. No focal lesion noted. No e/o peripancreatic fluid collection.
- **SPLEEN:** normal in size, shape, echogenicity and echotexture. No focal lesion noted.
- **BOTH KIDNEYS:** are normal in size and echotexture. Cortical echogenicity appears normal. Cortico medullary differentiation is preserved. No e/o calculi or hydronephrosis on either side.
- **URINARY BLADDER:** Well distended. No evidence of calculus, wall thickening, diverticula or mass lesion.
- **PROSTATE:** is normal in size, shape and echogenicity. No focal lesion.
- Visualised bowel-loops show no evident abnormality. No e/o lymphadenopathy. RIF/ LIF CLEAR. Bilateral C-P angels clear.

CONCLUSION:

- **Grade I fatty changes in liver.**

Thanks for reference.

DR PRATIK KAGATHAR
M

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

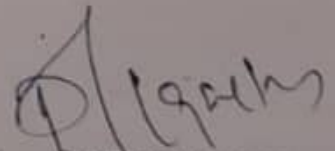
Pt.'s Name: AMITKUMAR BARNWAL

Date: 12 August, 2023

Radiograph of chest (PA view)

- *Fibrotic band seen in right lung lower zone ---- old insult. Tenting of right domes of diaphragm.*
- *Rest of the lung fields are clear.*
- *Both the hila appears normal*
- *Both costophrenic angles appear clear.*
- *Left domes of diaphragm appear normal.*
- *Cardiac size is within normal limit.*
- *Bones underview reveals no evident abnormality.*

Thanks for reference.


DR PRATIK KAGATHARA
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

32 SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVENTIONS


TEST REPORT

| | | | |
|--------------------|---------------------------------------|---------------------|------------------------|
| Name | : Amitkumar Bharanwal | Reg. No | : 308100684 |
| Age/Sex | : 35 Years / Male | Reg. Date | : 12-Aug-2023 01:50 PM |
| Ref. By | : Dr. PANCHMUKHI HOSPITAL / INSURANCE | Collected On | : 12-Aug-2023 01:50 PM |
| Client Name | : PANCHMUKHI HOSPITAL | Report Date | : 12-Aug-2023 04:26 PM |

COMPLETE BLOOD COUNT (CBC)
 Specimen: EDTA blood

| Parameter | Result | Unit | Biological Ref. Interval |
|-----------------------------------|--------------|---------------------|------------------------------------------------|
| RBC Parameters | | | |
| Hemoglobin (SLS method) | 14.7 | g/dL | 13.0 - 18.0 |
| Hematocrit (Electrical Impedance) | 41.40 | % | 47 - 52 |
| RBC Count (Electrical Impedance) | 5.30 | million/cmm | 4.7 - 6.0 |
| MCV (Calculated) | 78.1 | fL | 78 - 110 |
| MCH (Calculated) | 27.7 | Pg | 27 - 31 |
| MCHC (Calculated) | 35.5 | % | 30 - 35 |
| RDW (Calculated) | 14.3 | % | 11.5 - 14.0 |
| WBC Parameters | | | |
| WBC Count (Flowcytometry) | 8310 | /cmm | 4000 - 10500 |
| DIFFERENTIAL WBC COUNT | | | |
| Neutrophils (%) | 56 % | % Range 42.0 - 75.2 | Abs. Value 4654 /cmm Abs. Range 1800 - 7700 |
| Lymphocytes (%) | 35 % | 20 - 45 | 2909 /cmm 1000 - 3900 |
| Eosinophils (%) | 03 % | 1 - 4 | 249 /cmm 0 - 450 |
| Monocytes (%) | 06 % | 2 - 8 | 499 /cmm 200 - 1000 |
| Basophils (%) | 00 % | 0 - 1 | 0 /cmm 20 - 100 |
| Platelete Parameter | | | |
| Platelet Count | 203000 | /cmm | 150000 - 450000 |
| MPV | 13.4 | fL | 7.4 - 10.4 |
| P-LCR | 49.70 | % | 11.9 - 66.9 |
| PDW | 21.3 | % | 8.3 - 56.6 |
| PCT (Platelet Haematocrit) | 0.27 | % | 0.2 - 0.5 |

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Dr. Viral Jethava
 M.D. (Path, PDCC)

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Page 1 of 16

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BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

| Parameter | Result | Unit | Biological Ref. Interval |
|-----------|----------|------|--------------------------|
| ABO | "O" | | |
| Rh (D) | Positive | | |

The Blood Group is done from received sample. Kindly ask for Blood Group Card. In case of any query, please contact Laboratory.

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Page 2 of 16

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| Test | Result | Unit | Biological Ref. Interval |
|---------------------------------------|--------|-------|--------------------------|
| Erythrocyte sedimentation rate | | | |
| Sample, EDTA whole blood | | | |
| ESR (After 1 hour) | 02 | mm/hr | 1 - 7 |

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Page 3 of 16

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FASTING PLASMA GLUCOSE
 Specimen: Flouride plasma

| Parameter | Result | Unit | Biological Ref. Interval |
|-------------------------------------------------------|--------|-------|----------------------------------------------------------------------------------|
| Fasting Blood Sugar (FBS) <i>HEXOKINASE</i> | 88.00 | mg/dL | <100 :Non-Diabetic 100-125 :Impaired Fasting Glucose (IFG) >=126 :Diabetic |
| Urine Glucose -F <i>Glucose Oxidase-Peroxidase</i> | Nil | | |

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
 American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34; S11.

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Page 4 of 16

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POST PRANDIAL PLASMA GLUCOSE

Specimen: Flouride plasma

| Parameter | Result | Unit | Biological Ref. Interval |
|--------------------------------------------------------|--------|-------|--------------------------|
| Post Prandial Blood Sugar (PPBS) <i>HEXOKINASE</i> | 107.00 | mg/dL | 70 - 140 |
| Urine Glucose- PP <i>Glucose Oxidase-Peroxidase</i> | Nil | | |

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

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Page 5 of 16

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LIPID PROFILE

Specimen: Serum

| Parameter | Result | Unit | Biological Ref. Interval |
|----------------------------------------------------------------|--------|-------|-----------------------------------------------------------------------------------------------------------------------------|
| Cholesterol <i>Cholesterol Oxidase</i> | 168.00 | mg/dL | Desirable : < 200.0 Borderline High : 200-239 High : > 240.0 |
| Triglyceride <i>Enzymatic Reaction With Glycerol Kinase</i> | 130.00 | mg/dL | Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0 |
| HDL Cholesterol <i>Siemens AHDL</i> | 70.00 | mg/dL | High Risk : < 40 Low Risk : >= 60 |
| LDL Cholesterol <i>Siemens ALDL</i> | 72.00 | mg/dL | Optimal : < 100 Near Optimal/above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >=190 |
| VLDL Cholesterol <i>Calculated</i> | 26.00 | mg/dL | 15 - 35 |
| LDL / HDL RATIO <i>Calculated</i> | 1.03 | | 0 - 3.5 |
| Cholesterol /HDL Ratio <i>Calculated</i> | 2.40 | | 0 - 5.0 |


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Page 6 of 16

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BILIRUBIN

Specimen : Serum

| Parameter | Result | Unit | Biological Ref. Interval |
|--------------------------------------------------------------------------------------------------|--------|-------|--------------------------|
| Total Bilirubin <i>Diazo-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</i> | 0.60 | mg/dL | 0.2 - 1 |
| Conjugated Bilirubin <i>Diazo-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</i> | 0.10 | mg/dL | 0 - 0.20 |
| Unconjugated Bilirubin <i>Sulph acid dpl/caff-benz</i> | 0.50 | mg/dL | 0.0 - 1.1 |

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Page 7 of 16

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| Parameter | Result | Unit | Biological Ref. Interval |
|----------------------------------------------------|--------|-------|--------------------------|
| SGPT (ALT) <i>Siemens/37C</i> | 34.00 | U/L | 16 - 63 |
| SGOT (AST) <i>Siemens/37C</i> | 28.00 | U/L | 15 - 37 |
| Uric Acid <i>Uricase</i> | 5.20 | mg/dL | 3.5 - 7.2 |
| Alakaline Phosphatase <i>Siemens/37C</i> | 65.00 | U/L | 46 - 116 |
| GGT <i>Siemens/37C</i> | 37.00 | U/L | 15 - 85 |

UREA & BLOOD UREA NITROGEN

Specimen : Serum

| | | | |
|--------------------------------------------------------|-------|-------|------------|
| Urea <i>Calculated</i> | 25.00 | mg/dL | 17 - 43 |
| Blood Urea Nitrogen (BUN) <i>UREASE/GLDH</i> | 11.68 | mg/dL | 7.0 - 18.0 |


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Page 8 of 16

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Creatinine With eGFR

Specimen : Serum

| Parameter | Result | Unit | Biological Ref. Interval |
|---------------------------------------------------------------------|--------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Creatinine <small>ALKALINE PICRATE, COLORIMETRIC KINETIC</small> | 0.90 | mg/dL | 0.7 - 1.3 |
| eGFR | 86.70 | ml/min/1.73 sq m | Normal or High: ≥ 90 Mild decrease: 60-89 Mild moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: < 15 |

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Page 9 of 16

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HEMOGLOBIN A1 C (HBA1C)

Specimen: Blood EDTA

| Parameter | Result | Unit | Biological Ref. Interval |
|-----------------------------------------|--------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| HbA1C <i>Siemens Dimension</i> | 5.10 | % | Non-Diabetic : Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : >6.4 % Diabetic : Poor Control : > 7.0 % Good Control : 6.0 % - 7.0 % |
| Mean Blood Glucose <i>Calculated</i> | 99.67 | mg/dL | Please correlate with clinical condition 90-115: Normal 115-133: Pre-Diabetic 134-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value |

Explanation :

- Total hemoglobin A1 c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half-life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures

HbA1c assay Interferences :

- 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.


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Page 10 of 16

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THYROID FUNCTION TEST

| Parameter | Result | Unit | Biological Ref. Interval |
|-----------------------------------------------------------------|--------|--------|--------------------------|
| Thyroid Stimulating Hormone (TSH) <small>CLIA</small> | 1.540 | μIU/ml | 0.35 - 5.50 |

Remarks:

- Thyroid-stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4.
- Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.
- In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 μIU/mL
- Second Trimester : 0.2 to 3.0 μIU/mL
- Third trimester : 0.3 to 3.0 μIU/mL
- Reference: Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders, 2012:2170

| | | | |
|-----------------------------------------------------|------|-------|------------|
| Triiodothyronine (T3) <small>CLIA</small> | 1.24 | ng/mL | 0.6 - 1.81 |
|-----------------------------------------------------|------|-------|------------|

Clinical Significance:

- Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus.
- In the circulation, 99.7% of T3 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.
- In hypothyroidism and hyperthyroidism, FT3 levels parallel changes in total T3 levels. Measuring FT3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.


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Page 11 of 16

Dr. Viral R. Jethava
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Thyroxine (T4) 5.36 µg/dL 4.5 - 12.6
CLIA

Clinical Significance :

- Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus. In the circulation, 99.95% of T4 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to T3.
- In hypothyroidism and hyperthyroidism, FT4 levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

- The anticonvulsant drug phenytoin may interfere with total and FT4 levels due to competition for TBG binding sites.
- FT4 values may be decreased in patients taking carbamazepine.
- Thyroid autoantibodies in human serum may interfere and cause falsely elevated FT4 results.

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Page 12 of 16

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STOOL EXAMINATION

| Parameter | Result | Unit | Biological Ref. Interval |
|---------------------------------------------------------------|------------|------|--------------------------|
| PHYSICAL EXAMINATION | | | |
| Quantity | 12gms | | |
| Colour | Brown | | |
| Consistency | Semi Solid | | |
| CHEMICAL EXAMINATION | | | |
| Occult Blood <i>Peroxidase Reaction with o-Dianisidine</i> | Negative | | |
| Reaction <i>pH Strip Method</i> | Alkaline | | |
| Reducing Substance | Absent | | |
| MICROSCOPIC EXAMINATION | | | |
| Mucus | Absent | | |
| Pus Cells | Absent | | |
| Red Cells | Absent | | |
| Epithelial Cells | Absent | | |
| Vegetable Cells | Absent | | |
| Trophozoites | Absent | | |
| Cysts | Absent | | |
| Ova | Absent | | |
| Neutral Fat | Absent | | |
| Monilia | Absent | | |
| Bacteria | Absent | | |

Note: Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.

False negative: False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occasional unruptured RBCs.

False positive: False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.



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Page 13 of 16

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TEST REPORT

| | | | |
|--------------------|---------------------------------------|---------------------|------------------------|
| Name | : Amitkumar Bharanwal | Reg. No | : 308100684 |
| Age/Sex | : 35 Years / Male | Reg. Date | : 12-Aug-2023 01:50 PM |
| Ref. By | : Dr. PANCHMUKHI HOSPITAL / INSURANCE | Collected On | : 12-Aug-2023 01:50 PM |
| Client Name | : PANCHMUKHI HOSPITAL | Report Date | : 12-Aug-2023 04:26 PM |

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M.D. (Path, PDCC)

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Page 14 of 16


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URINE ROUTINE EXAMINATION

| Parameter | Result | Unit | Biological Ref. Interval |
|-----------|--------|------|--------------------------|
|-----------|--------|------|--------------------------|

PHYSICAL EXAMINATION

| | | | |
|----------|-------------|--|--|
| Quantity | 15 cc | | |
| Colour | Pale Yellow | | |
| Clarity | Clear | | |

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

| | | | |
|----------------|----------------|--|---------------|
| pH | 6.0 | | 4.6 - 8.0 |
| Sp. Gravity | 1.015 | | 1.001 - 1.035 |
| Protein | Nil | | |
| Glucose | Nil | | |
| Ketone Bodies | Nil | | |
| Urobilinogen | Normal Present | | |
| Bile salts: | Absent | | Absent |
| Bile Pigments: | Absent | | Absent |
| Nitrite | Nil | | |

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

| | |
|--------------------------|-----------|
| Leucocytes (Pus Cells) | 1 - 3/hpf |
| Erythrocytes (Red Cells) | Absent |
| Epithelial Cells | 3 - 4/hpf |
| Amorphous Material | Absent |
| Casts | Absent |
| Crystals | Absent |
| Bacteria | Absent |


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Page 15 of 16

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SERUM PROTEIN WITH A/G RATIO

| Parameter | Result | Unit | Biological Ref. Interval |
|----------------------------------------------------------|--------|------|--------------------------|
| Total Protein <i>BIURET</i> | 7.20 | g/dL | 6.4 - 8.2 |
| Albumin <i>Dye Binding - Bromocresol Purple (BCP)</i> | 4.20 | g/dL | 3.40 - 5.00 |
| Globulin <i>Calculated</i> | 3.00 | g/dL | 2.3 - 3.5 |
| A/G Ratio <i>Calculated</i> | 1.40 | | 0.8 - 3.1 |

----- End Of Report -----

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Page 16 of 16

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