



*Dr. Shrivastha*  
**DR. SHRAVANTHI**  
M.B.B.S.  
Reg. No: 94996

*Datta*



BKL



Customer Service &lt;customerservice@adityalabs.com&gt;

**Health Check up Booking Confirmed Request(bobE10166),Package Code-PKG10000248, Beneficiary Code-70691**

1 message

Mediwheel &lt;customercare@policywheel.com&gt;

23 March 2022 at 12:12

To: "customerservice@adityalabs.com" &lt;customerservice@adityalabs.com&gt;

Cc: Mediwheel CC &lt;customercare@mediwheel.in&gt;, Mediwheel CC &lt;mediwheelwellness@gmail.com&gt;

**Mediwheel**  
...Your wellness partner**011-41195959**

Email:wellness@mediwheel.in

**Hi Aditya Diagnostics And Research Laboratories,**Diagnostic/Hospital Location : **G-1,MIG 256-258,RD NO 4,CANRA BANK, City:Hyderabad**

We have received the confirmation for the following booking .

**Beneficiary Name** : PKG10000248**Beneficiary Name** : MR. BHISE PURUSHOTTAM D**Member Age** : 34**Member Gender** : Male**Member Relation** : Employee**Package Name** : Mediwheel Metro Full Body Health Checkup Male Below 40**Location** : PETHUMRI,Maharashtra-431807**Contact Details** : 9766449087**Booking Date** : 15-03-2022**Appointment Date** : 26-03-2022**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.



Name : MR. BHISE PURUSHOTTAM D  
Age /Sex : 34 Y / M  
Ref. By : BANK OF BARODA (MW)

Reg. No : O22-3116  
Registration Date : 26-03-2022  
Alt ID :

**MEDICAL CHECK UP FORM**

**Physical Examination :**

Height (Cms): 170 Cms. Weight (KG) 95 kgs  
Body Mass Index (BMI) :  
Pulse Rate : 83 /Min Regular / Abnormal  
B P : 135/86 mm Hg.  
Skin : Normal  
Nails : NBD  
Oral Hygienic : Healthy

**Personal History**

Smoking : Yes / No  
Alcoholism : Yes / No  
Diabetes : Yes / No  
Hypertension : Yes / No  
Allergy : Yes / No  
Accidents if any : No  
Surgeries if any : No

Complaints if any : Non  
Family History : HTA of Father : 2 yrs

**Systemic Examination - Abnormality - If Yes Please explain)**

\* CVS - Yes / No  
\* CNS - Yes / No  
\* GI Tract - Yes / No  
\* Abdomen - Yes / No  
Respiratory Tract - Yes / No

**E N T EXAMINATION**

Normal

Investigations : (N = Normal; R - See Report)

Any abnormality : Non.

USG -> Mild Hepatomegaly & Grade I fatty Liver  
LFT -> R.  
Rest - NS.

Diagnosis (if any)

Recommendations / Impression :

Mild Hepatomegaly. need

Healthy.

PHYSICIAN SIGNATURE & STAMP

Used Meat, Spices,

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**ADITYA DIAGNOSTICS & RESEARCH LABORATORIES**  
MIG-256-258, S.R. Towers,  
Road No: 4, K.P.H.B. Colony,  
Hyderabad-500 072



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VISUAL ACUITY

Right Eye

Left Eye

Distant Vision  
 Without Glasses

*Corrected*  
*- 0.25/6*

*- 0.5/6.*

With Glasses

*6/6*

*6/6*

Near Vision  
 Without Glasses

*N/6*

*N/6*

With Glasses

*\_\_\_\_\_*

*\_\_\_\_\_*

Colour Vision  
 Opinion / Advise

*————— Normals —————*

Optician 

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