

#### 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                    | MS. NASKAR MOUSMI   |
| EC NO.                  | 112835              |
| DESIGNATION             | CREDIT              |
| PLACE OF WORK           | DHANBAD,JORA PHATAK |
| BIRTHDATE               | 11-03-1990          |
| PROPOSED DATE OF HEALTH | 28-02-2023          |
| CHECKUP                 |                     |
| BOOKING REFERENCE NO.   | 22M112835100044748E |

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 24-02-2023 till 31-03-2023 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.

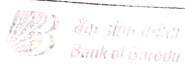
Yours faithfully,

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))





Name

भौरामी नस्कर MOUSMI NASKAR

कर्मनारी कूट क : 112835 E.C. No.



112835





.35

If found, please return to,
Dy General Menager
Benk of Berode Bornd-Surve Rhewan, Main Road Bistupur
Journal adopting 1811 of the Phane
Phane 491 887 2013410

PERMANENT ADDRESS . Hetlibandh , Near Suraksha Clinic P.O- Jharia, Dhanbad , Pin-828111

ENERGENCY COMMECTING 8051212979

Two Moles On Left Ear



#### भारत रारकार GOVERNMENT OF INDIA



गौसमी नस्कर Mousmi Naskar ਗਵਾ ਰਥੇ / Year of Birth :1990 महिला / Female



3442 7366 0393

आधार — आम आदमी का अधिकार





#### भारतीय विशिष्ट पहचान प्राधिकरण UNIQUE IDENTIFICATION AUTHORITY OF INDIA

D/O शम्भू नाथ नस्चर गर/निर्माण मकान न0 49, स्थान चिहन मुरक्षा क्लिनिक के पास, रूथान हैटली बाध, झरिया, गाव/कस्बा/शहर अम्तल, जिला धनबाद, पोस्ट ऑफिस. झरिया, राज्यः झारखण्ड, पिन कोड: 828111

Address D/O: Shambhu Nath Naskar House/Bldg./Apt House No 49, Landmark: Near Suraksha Clinic, Area/Locality/Sector: Hetli Bandh, Jharia, Village/Town/City Amtal, District Dhanbad P O Amtal, State: Jharkhand, PinCode, 828111





WWW

PO Box No. 1947. Bengaluru-560 001



Patient Name

Age/Sex





Date

सबके लिए स्वास्थ्य

1:09 pm

Department of General Medicine

: OPD/40323/31740

: 4-Mar-2023

#### **OUT PATIENT DEPARTMEN**

Regd. No.

: MAR23-42275 Visit

Female

: Miss MOUSMI NASKAR Mobile : 7631184616 : 33 Y 2 M 3 D

Address : HETLI BANDH, AMTAL, JHARIA , DHANBAD - Jharkhand , INDIA

1

Doctor : Dr. Uday Shankar MBBS, MD, D. Cardio., FCCS OPD Timing : MON-SAT (10AM - 2PM)

Referred By Allergies : Height: H Ft 6 In Temp.:

97.8 Fc SP02 : Weight: B.P. :100/60 Pulse : Kg

History and complaints :

Rt. Luce pair

Examination:

Diagnosis:

Investigations:

Medicines Prescribed:

c. Lunia bokora aned soqued

Follow up:

Days

Advice (Diet/ Lifestyle / Rehab)

Date :

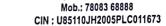
Time :

\*Prescription to be valid for 7 Days only.

\*This document is not valid for Medico-Legal purposes.

Signature of Doctor







### **RADIOLOGY REPORT**

| Patient Information |                  |             |             |  |  |
|---------------------|------------------|-------------|-------------|--|--|
| Patient Name        | MR SANDEEP KUMAR | Patient ID  | 41687       |  |  |
| Age   Gender        | 49Y/MALE         | Scan Date   | MAR 04 2023 |  |  |
| Referring Doctor    | DR SELF          | Report Date | MAR 04 2023 |  |  |

#### **CHEST X-RAY**

Heart shadow within top normal limits. Unfolding of aortic arch. Both hilar shadows normal. Rt dome of diaphragm raised. Both lungs fields clear. No active lung lesion seen. Both Cp angles clear. Impression..Normal Study Advised ecg for heart

Kufiron'

Dr. R. K. Airon

MD Radiodiagnosis (HN-008701/77))

Consultant Radiologist







MISS MOUSMI NASKAR Female

33 Years

04-Mar-23 10:53:26 MEDICA DHANBAD

Rate 125 71 PR QRSD QT QTc 390 436 --AXIS-38 77 QRS - BORDERLINE ECG -T 47 12 Lead; Standard Placement Unconfirmed Diagnosis V1 **V4** I aVR ₹2 aVL V6 F 50~ 0.50-100 Hz W PH100B CL P? Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV



#### RADIOLOGY REPORT

|           |                    |                | 14 02/            |
|-----------|--------------------|----------------|-------------------|
| Reg. No.  | 42275              | Ref. Dr.       | SELF              |
| Name      | MISS MOUSMI NASKAR | Study          | USG WHOLE ABDOMEN |
| Age & Sex | 33Y /F             | Reporting Date | 04.03.2023        |

#### USG WHOLE ABDOMEN

LIVER : Liver is normal in size, shape & echotexture. Simple cysts

measuring 11 x 14mm and 24 x 18mm are seen in right and left

lobe of liver respectively. IHBR are not dilated.

GALL BLADDER : GB is well distended. No obvious calculus or mass lesion is seen.

The wall thickness is normal.

CBD : CBD is normal in course & caliber.

PV : PV is normal in course & caliber.

PANCREAS : Pancreas is normal in size, shape & echotexture. Peripancreatic

soft tissues appear normal. MPD is not dilated.

SPLEEN : Spleen is normal in shape, size & echotexture. It measures 8.6 cm

in size.

KIDNEYS: The right kidney measures 9.7 x 3.7cm. The left kidney measures

10.6 x 4.9cm. Both kidneys are normal in shape, size & position. The pelvicalyceal system is normal. Corticomedullary

differentiation is maintained. No focal lesion is seen.

URINARY BLADDER : Urinary bladder is well distended. No obvious calculus or mass

lesion is seen. The wall thickness is normal.

UTERUS : Uterus is normal in size, shape & echotexture. It measures 7.7 x 3

x 3.7cm. Endometrium is central and measures 7.4 mm.

OVARIES: The right ovary measures 2.3 x 3.2 x 2.2cm (volume- 8.7cc). The

left ovary measures 3.2 x 1.4 x 3cm (volume- 7.6cc). Both ovaries

are normal in shape, size & position.

OTHERS: No ascites or retroperitoneal lymphadenopathy is seen.

IMPRESSION : • Simple hepatic cysts.

Dr. VAISHALI PATEL
MBBS, DNB (Radio-diagnosis)
Consultant Radiologist





# MEDICA Heart Institute

caring for Life

A Unit of Asarfi Hospital Limited, Dhanbad



### ECHOCARDIOGRAPHY REPORT

Name: MISS MOUSMI NASKAR

Age: 33

Sex: Female

Date: 04/03/2023

| 2D & M-MODE MEASUREMENTS |        | 2D & M-MODE CALCULATIONS |         |  |
|--------------------------|--------|--------------------------|---------|--|
| LA Diam                  | 3.3 cm | EDV(Teich)               | 71 ml   |  |
| Ao Diam                  | 2.2 cm | ESV(Teich)               | 26 ml   |  |
| IVSd                     | 0.9 cm | EF(Teich)                | 63 %    |  |
| LVIDd                    | 4.0 cm | %FS                      | 34 %    |  |
| LVPWd                    | 0.7 cm | SV(Teich)                | 45 ml   |  |
| IVSs                     | 1.1 cm | LVd Mass                 | 99.85 g |  |
| LVIDs                    | 2.7 cm | RWT                      | 0.35    |  |

MITRAL VALVE

**AORTIC VALVE** 

| MV E Vel     | 0.77 m/s             |
|--------------|----------------------|
| MV DecT      | 130 ms               |
| MV Dec Slope | 5.9 m/s <sup>2</sup> |
| MV A Vel     | 0.54 m/s             |
| MV E/A Ratio | 1.43                 |

AV Vmax AV maxPG 1.39 m/s 7.73 mmHg

TRICUSPID VALVE

PULMONARY VALVE

 PV Vmax
 0.92 m/s

 PV maxPG
 3.38 mmHg

#### COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-63%)
- NO MR, AR, TRACE TR, NO PAH
- IAS, IVS INTACT
- NO CLOT, PE
- IVC NORMAL

#### **IMPRESSION:**

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-63%)

DR.S.H CHAVAN (CONSULTANT CARDIOLOGIST)

TECH. SIG

CAHL/D/0086/2325May/22

Asarfi Hospital Baramuri, P.O.: Bishunpur Polytechnic, Dhanbad-828130
Email: Info@asarfihospital.com Web: www.asarfihospital.com 7544042344



(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130 Ph. No.: 7808368888,9297862282,9234681514







Name

Miss MOUSMI NASKAR

Age / Sex

33 Yrs / Female

Doctor

Reg. No. :

MAR23-42275

Pat. Type

Mediwheel

Collection Time: 04-03-2023 10:47 am

Receiving Time: 04-03-2023 10:48 am

Reporting Time: 04-03-2023 2:47 pm

Publish Time : 04-03-2023 2:49 pm

| Test Name   | Result   | Flag | Unit          | Reference Range |
|---|----------|------|---------------|-----------------|
| Haematology   |          |      |               |                 |
| BLOOD GROUP, ABO & RH TYPING Method: Agglutination      |          |      |               |                 |
| ABO GROUP   | Α        |      |               | 0-0             |
| RH TYPING   | POSITIVE |      |               | 0-0             |
| ESR (Erythrocyte Sedimentaion Rate)  Method: Westergren |          |      | Machine Name: | VES-MATIC 20    |
| ESR   | 24       | н    | mm/hr         | 0-10            |

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DR N N SINGH (PATHOLOGIST)

Page 6 of 8

Condition of Laboratory Testing & Reporting

If this presented that the tent of performed are on the speciment of Sampler's bollunging to the patient named or deribled and the verification of the particulars have been carried out by the patient or his her expressing the point of generation of the said speciments.) Sampler's all aboratory in vestigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test requires the medical elegation of the points of the points of the said specimen due to to the performed due to following Reason. (a) Specimen received is insufficient or inappropriate. (haemolysed football points ence (b) (b) Incorrect specimen by the requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May was from late and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries when some patients please call at +91927662292. Email-laboratory (gymal con-



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Name

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Age / Sex

33 Yrs / Female

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Reg. No.

MAR23-42275

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Test Name

Result

Flag

Unit

Reference Range

### **Immunology and Serology**

#### THYROID PROFILE, TOTAL, SERUM

Method: ECUA

T3, Total 1.17

T4, Total 8.80

TSH (Ultrasensitive)

Machine Name:

Vitros ECI

ng/ml

0.8-2.0

ug/dL

5.10-14.10

mIU/mL

0.27-4.2

#### Interpretation:

- 1. TSH levels are subject to circadian variation, reaching peak levels between 2 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%. hence time of the day has influence on the measured serum TSH concentrations.
- 2. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
- 3. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
- Values < 0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.</li>

1.40

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| Test Name | The second secon |      |       |  |
|-----------|--|------|-------|--|
|           | Result   | Flag | TT-14 | The second secon |
|           |  | Lag  | Unit  | Reference Range  |
|           |  |      |       |  |

#### Clinical Pathology

#### Routine Urine Examination; Urine

Method: Microscopic

Appearance

Colour

20

Volume Protiens

CLEAR

STRAW

NEGATIVE

Glucose

PH

NEGATIVE

Specific Gravity

6.0 1.010

Ketone Bodies

XX

Bile Salts

XX

Bile Pigments

XX

Pus Cells

R.B.C.

Casts

Crystals

1-2

**Epithelial Cells** 

1-2

NIL

NOT SEEN

**NOT SEEN** 

/hpf.

ml.

/hpf.

/hpf.

/hpf. /hpf.

not valid for Medico-Legal purposes. This Document

DR N N SINGH (PATHOLOGIST)

Page 4 of 8

test is a reported are on the specimen(s)/Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient of the particulars have been carried out by the patient of the particulars have been carried out by the patient of generation of the said specimen(s)/Sample(s)(2)Lativarianty investigations are only tool to fabilitate in arriving at diagnosis and should be clinically correlated. (3)Tosts results are seted test (c)Specimen quality is unsatisfactory. (d) There is a discrepancy between the latter on the specimen container and the Name on the test requisition form. (5)The Results of the same patient. (6)The results of a latteratory test are dependent on the quality of the sample as well as the assay technology. (7)In case of queries is sufficient as well as the assay technology.







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Miss MOUSMI NASKAR Name

33 Yrs / Female

Doctor

Reg. No. MAR23-42275

Collection Time: 04-03-2023 10:47 am Receiving Time: 04-03-2023 10:48 am Reporting Time: 04-03-2023 2:47 pm

Publish Time : 04-03-2023 2:49 pm

| Pat. Type : Mediwheel                                |        |      |               |           |       |
|--|--------|------|---------------|-----------|-------|
| Test Name  | Result | Flag | Unit          | Reference | Range |
| Liver Function Test (LFT)                            |        |      | Machine Name: | XL-640    |       |
| Method: Spectrophotometry  Bilirububin Total (Diazo) | 0.4    |      | mg/dl         | 0.3-1.2   |       |
| Bilirububin Direct (Diazo)                           | 0.2    |      | mg/dl         | 0.00-0.2  |       |
| Bilirububin Indirect (Calculated)                    | 0.2    |      | mg/dl         | 0.00-1.0  |       |
| SGPT (IFCC without PDP)                              | 24.4   |      | U/L           | 7-50      |       |
| SGOT (IFCC without PDP)                              | 19.2   |      | U/L           | 5-45      |       |
| Alkaline Phosphate (PNP AMP Kinetic)                 | 205.0  |      | U/L           | 70-306    |       |
| GGT (Enzymatic)                                      | 20.6   |      | U/L           | 0-55      |       |
| Protein Total (Biuret)                               | 6.5    |      | g/dl          | 6.4-8.3   |       |
| Albumin (BCG)  | 4.1    |      | g/dl          | 3.5-5.2   |       |
| Globulin (Calculated)                                | 2.4    |      | g/dl .        | 2.3-3.5   |       |
| A : G Ratio (Calculated)                             | 1.7    |      |               | 0.8-2.0   |       |
|  |        |      |               |           |       |

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Page 3 of 8



Name

Age / Sex

Reg. No.

Pat. Type

Doctor

## ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbart 828 130 Ph. No.: 7808368888.9297862282.9234681514

MISS MOUSMI NASKAR

33 Yrs / Female

MAR23-42275

Mediwheel









Collection Time: 04-03-2023 10:47 am

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Publish Time : 04-03-2023 2:49 pm

| Test Name                              |        |      |   |                      |        |
|--|--------|------|---|----------------------|--------|
| rest Name                              | Result | Flag | Unit  | Reference            | Range  |
| Biochemistry                           |        |      |   |                      | - ange |
| Creatinine, Serum                      |        |      |   |                      | *      |
| Method: Enzymatic                      |        |      |   |                      |        |
| Creatinine, Serum                      | 0.6    |      | Machine Name:   | : XL640              |        |
| Uric Acid, Serum                       | 0.0    |      | mg/dl   | 0.6-1.4              |        |
| Method: Enzymatic                      |        |      | *********   |                      |        |
| Uric Acid, Serum                       | 4.5    |      | Machine Name:   | XL640                |        |
| Blood Urea Nitrogen (BUN)              | -4.5   |      | mg/dl   | 3.4-7.0              |        |
| Method: Calculated                     |        |      | Mochine Name:   |                      |        |
| Blood Urea Nitrogen (BUN)              | 11.8   |      |   | XL640                |        |
| Fasting Blood Glucose, Plasma          | 44.0   |      | mg/df   | Jun-20               |        |
| Method: GOD-POD                        |        |      | Machine Name:   |                      |        |
| Fasting Blood Glucose, Plasma          | 95.1   |      |   | X1.540               |        |
| LIPID PROFILE, SERUM                   | 22.1   |      | mg/dl   | 70-110               |        |
| Method: Spectrophotometry              |        |      | Machine Name:   | XL640                |        |
| Cholesterol, Total (CHOD/PAP)          | 189.0  |      | 100 - | ALD4U                |        |
| Triglycerides (Enzymatic)              |        |      | mg/dl   | 0-200                |        |
| 55.2                                   | 150.0  |      | mg/dl   | 0-150                |        |
| HDL Cholesterol (Enzymatic)            | 47.0   |      | mg/dl   | 0-50                 |        |
| LDL Cholesterol (Calculated)           | 112.0  | н    | mg/dl   | 0-100                |        |
| VLDL Cholesterol (Calculated)          | 30.0   |      | mg/dl   |                      |        |
| GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD |        |      | mg/ui   | 0-30                 |        |
| Method: HPLC / Nephelometry            |        |      | Machine Name:   | BIO-AND, D-10 / MISE | M.     |
| HbA1C                                  | 4.9    |      | <b>%</b> .  | 4.4-6.2              |        |
|  |        |      |   |                      |        |

Interpretation:

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Page 1 of 8



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| Result | Flag  | Unit  | Reference Range  |
|--------|---|---|--|
|        |   | en for our  | nation hange   |
|        |   | Machine Name:   | Sysmex 6 part  |
| 12.4   | L.  | e/dl  | 13-18  |
| 4,600  |   | 133   |  |
| 36.7   | l:  | 556   | 4000-11000   |
| 27.5   |   |   | 40-50  |
| 33.8   |   |   | 27-31  |
| 14.8   | н   |   | 31.5-35.5  |
| 58     |   |   | 11.6-14  |
| 34     | н   |   | 55-75<br>15-30   |
| 02     |   |   | 1-6  |
| 06     |   |   | 2-10   |
| 00     |   |   | 0-1  |
| 4.51   |   | 100   | 4.5-5.5  |
|        |   |   | 4.5-5.5<br>83-101  |
| 1.16   | _   | 1.560. 40   | 1.5-4.5  |
|        | 12.4<br>4,600<br>36.7<br>27.5<br>33.8<br>14.8<br>58<br>34<br>02<br>06<br>00<br>4.51 | 12.4<br>4,600<br>36.7<br>27.5<br>33.8<br>14.8 H<br>58<br>34 H<br>02<br>06<br>00<br>4.51 | Machine Name:  12.4  4,600  /cu-mm  36.7  1 %  27.5  Pg  33.8  g/dl  14.8  H %  58  34  H %  02  %  06  00  4.51  million/mm3  81.4  L fi. |

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DR N N SINGH (PATHOLOGIST)

Page 7 of 8

If is presumed that the lest(s) performed are on the specimen(s) (Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or high presentative all the point of generation of the said specimen(s) Sample(s) (2)Laboratory investigations are only tool to facilitate in armiving at diagnosis and should be clinically correlated. (3) Tests results are of valid for medico legal Purposes. (4) Fest insulated might not be performed due to following Reason. (a) Specimen received is insulficient or inappropriate. (Naemolysised control specimen quality is unstatiated by the particular of the following Reason (a) Specimen received is insulficient or inappropriate. (Naemolysised control specimen quality is unstatiated by the control specimen patient (a) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7 In case of queen undergreened test results please call at +91 9297862262. Email-laboratory (grant com-



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Name

: Miss MOUSMI NASKAR

Age / Sex

33 Yrs / Female

Doctor

Reg. No. : MAR23-42275

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| Test Name                                     | Result  | Flan |       |                 |  |
|---|---------|------|-------|-----------------|--|
|   | 1,00010 | Flag | Unit  | Reference Range |  |
| Protein:Creatinine Ratio; Urine               |         |      |       |                 |  |
| Method: Immunoturbidimetry, Spectrophotometry |         |      |       | • .             |  |
| Protein                                       | 6.1     |      | mg/L  | •               |  |
| Creatinine                                    | 18.3    |      |       |                 |  |
| PCR   | 272.27  |      | mg/dl |                 |  |
|   | 0.32    |      | mg/g  | 0-0.5           |  |

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Page 5 of 8

out by the patient or his/her elated. (3)Tests results are d/spemic etc.) (b)Incorrect on form. (5) The Results of



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Name

Miss MOUSMI NASKAR

Age / Sex

33 Yrs / Female

Doctor

Reg. No.

MAR23-42275

Pat. Type

Mediwheel

Collection Time: 04-03-2023 10:47 am

Receiving Time: 04-03-2023 10:48 am

Reporting Time: 04-03-2023 2:47 pm

Publish Time : 04-03-2023 2:49 pm

Test Name

Result

Flag

Unit

Reference Range

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic. Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly whenthe HbA1C result does not correlate with the patient's blood glucose levels.

FACTORS THAT INTERFERE WITH Hba1C | FACTORS THAT AFFECT INTERPRETATION | | MEASUREMENT | OF HBA1C RESULTS |

| Hemoglobin variants, elevated fetal | Any condition that shortens erythrocyte | | hemoglobin (HbF) and chemically | survival or decreases mean erythrocyte | | modified derivatives of hemoglobin | age (e.g., recovery from acute blood loss, | [ (e.g. carbamylated Hb in patients | hemolytic anemia, HbSS, HbCC, and HbSC) | | with renal failure) can affect the | will falsely lower HbA1c test results | | accuracy of HbA1c measurements | regardless of the assay method used.iron | | | deficiency anemia is associated with |

| | higher HbA1c |

Glucose, PP

Method: GOD-POD

Glucose, PP

89.5

mg/dl

70-140

Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine

\*This Document is not valid for Medico-Legal purposes.

DR N N SINGH (PATHOLOGIST)

Page 2 of 8



(A Unit of Asarfi Hospital Ltd.) Baramuri, Bishnupur Polytechnic, Dhanbad 828 130 Ph. No.: 7808368888,9297862282,9234681514







Name

: Miss MOUSMI NASKAR

33 Yrs / Female

Age / Sex Doctor

Reg. No. : Pat. Type :

: MAR23-42275

Mediwheel

Collection Time: 04-03-2023 10:47 am

Receiving Time: 04-03-2023 10:48 am Reporting Time: 06-03-2023 12:04 pm

Publish Time : 07-03-2023 11:24 am

Machine Name: vitek 2 compact

Test Name

Result

Flag

Unit

Reference Range

Microbiology

**Culture & Sensitivity (Urine)** 

Method: vitek 2 compact
Organism Isolated

NO GROWTH OF ANY

**ORGANISM** 

Note:

In view of developing antibiotics resistance in inida. It is advisable to use anitbiotics belonging to Group B & C only if the patient is resistant to antibiotics.

\* Insturment used Bact/Alert 3D 60 & vitek 2 compact.

VAN CHARLE

DR N N SINGH (PATHOLOGIST)

Page 9 of 9

Condition of Laboratory Testing & Reporting

\*This Document is not valid for Medico-Legal purposes.

(1)It is presumed that the test(s) performed are on the specimen(s)/Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) Sample(s)(2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3)Tests results are not valid for medico legal Purposes, (4)Test requested might not be performed due to following Reason: (a)Specimen received is insufficient or inappropriate. (haemolysed/clotted/lipemic etc.) (b)Incorrect specimen type for requested lest, (c)Specimen quality is unsatisfactory. (d)There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5)The Results of the Test May vary (rom lab and also from time to time for the same patient. (6) The results of a laboratory lest are dependent on the quality of the sample as well as the assay technology. (7)In case of queries or unexpected test results please call at +91927862282, Email-labasarf@gmail.com