

Health Check up Booking Confirmed Request(bobE29179),Package Code-PKG10000240,
Beneficiary Code-21060

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Hi Manipal Hospitals,

Diagnostic/Hospital Location : **NH-24 Hapur Road,Oppo. Bahmeta Village, Near Lancroft
Golf Links Apartment, City:Ghaziabad**

We have received the confirmation for the following booking .

Beneficiary Name : PKG10000240

Beneficiary Name : MR. VERMA SACHIDANAND

Member Age : 35

Member Gender : Male

Member Relation: Employee

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

Location : GHAZIABAD,Uttar Pradesh-201001

Contact Details : 7007303301

Booking Date : 13-02-2023

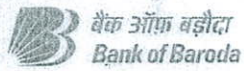
Appointment Date : 15-02-2023

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.



बैंक ऑफ़ बड़ोदा
Bank of Baroda

नाम: **SACHIDANAND VERMA**
Name:

कर्मचारी कूट क्र. **105706**
E. C. No.

Sachidanand Verma

जारीकर्ता प्राधिकारी, मु. प्र. (सु.) अका. न.दि.
Issuing Authority CM (S), ZO, ND.



Sachidanand Verma

धारक के हस्ताक्षर
Signature of Holder



RADIOLOGY REPORT

Name	Sachidanand VERMA	Modality	DX
Patient ID	MH010781608	Accession No	R5165853
Gender/Age	M / 37Y 7M 13D	Scan Date	15-02-2023 09:59:53
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	15-02-2023 10:20:50

XR- CHEST PA VIEW

FINDINGS:

LUNGS: Normal.
TRACHEA: Normal.
CARINA: Normal.
RIGHT AND LEFT MAIN BRONCHI: Normal.
PLEURA: Normal.
HEART: Normal.
RIGHT HEART BORDER: Normal.
LEFT HEART BORDER: Normal.
PULMONARY BAY: Normal.
PULMONARY HILA: Normal.
AORTA: Normal.
THORACIC SPINE: Normal.
OTHER VISUALIZED BONES: Normal.
VISUALIZED SOFT TISSUES: Normal.
DIAPHRAGM: Normal.
VISUALIZED ABDOMEN: Normal.
VISUALIZED NECK: Normal.

IMPRESSION:

No significant abnormality seen.

Please correlate clinically

RADIOLOGY REPORT

Name	Sachidanand VERMA	Modality	DX
Patient ID	MH010781608	Accession No	R5165853
Gender / Age	M / 37Y 7M 13D	Scan Date	15-02-2023 09:59:53
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	15-02-2023 10:20:50

Pr Gupta

Dr. Prabhat Prakash Gupta,
MBBS, DNB, MNAMS, FRCR(I)
Consultant Radiologist, Reg no DMC/R/14242

RADIOLOGY REPORT

Name	Sachidanand VERMA	Modality	US
Patient ID	MH010781608	Accession No	R5165854
Gender / Age	M / 37Y 7M 13D	Scan Date	15-02-2023 10:03:57
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	15-02-2023 10:30:37

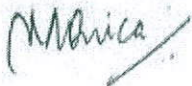
**USG ABDOMEN & PELVIS
FINDINGS**

LIVER: appears enlarged in size (measures 156 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.
 SPLEEN: Spleen is normal in size (measures 103 mm), shape and echotexture. Rest normal.
 PORTAL VEIN: Appears normal in size and measures 9.7 mm.
 COMMON BILE DUCT: Appears normal in size and measures 3.2 mm.
 IVC, HEPATIC VEINS: Normal.
 BILIARY SYSTEM: Normal.
 GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.
 PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.
 KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.
 Right Kidney: measures 106 x 38 mm.
 Left Kidney: measures 101 x 50 mm.
 PELVI-CALYCEAL SYSTEMS: Compact.
 NODES: Not enlarged.
 FLUID: Nil significant.
 URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.
 PROSTATE: Prostate is normal in size, shape and echotexture. It measures 34 x 22 x 21 mm with volume 8 cc. Rest normal.
 SEMINAL VESICLES: Normal.
 BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Hepatomegaly with diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.



Dr. Monica Shekhawat, MBBS, DNB,
Consultant Radiologist, Reg No MCI 11 10887

MANIPAL HOSPITALS

This report is digitally signed and certified. No physical signature required

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This report is subject to the terms and conditions mentioned overleaf

LABORATORY REPORT

Name	: MR SACHIDANAND VERMA	Age	: 37 Yr(s) Sex :Male
Registration No	: MH1010781608	Lab No	: 32230205970
Patient Episode	: H18000000224	Collection Date	: 15 Feb 2023 15:10
Referred By	: HEALTH CHECK MGD	Reporting Date	: 15 Feb 2023 16:27
Receiving Date	: 15 Feb 2023 15:26		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Specimen Type : Serum			
THYROID PROFILE, Serum			
T3 - Triiodothyronine (ECLIA)	1.13	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	9.02	micg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	1.940	μIU/mL	[0.340-4.250]

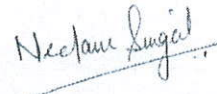
Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations,Ca or Fe supplements,high fibre diet, stress and illness affect TSH results.

* References ranges recommended by the American Thyroid Association

- 1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128
- 2) <http://www.thyroid-info.com/articles/tsh-fluctuating.html>

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

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Dr. Neelam Singal
CONSULTANT BIOCHEMISTRY

LABORATORY REPORT

Name : MR SACHIDANAND VERMA
 Registration No : MH010781608
 Patient Episode : H1800000224
 Referred By : HEALTH CHECK MGD
 Receiving Date : 15 Feb 2023 10:22

Age : 37 Yr(s) Sex : Male
 Lab No : 202302001636
 Collection Date : 15 Feb 2023 09:52
 Reporting Date : 15 Feb 2023 12:25

HAEMATOTOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)			
SPECIMEN-EDTA Whole Blood			
RBC COUNT (IMPEDENCE)	5.41	millions/cu mm	[4.50-5.50]
HEMOGLOBIN	15.3	g/dl	[12.0-16.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	47.3	%	[40.0-50.0]
MCV (DERIVED)	87.4	fL	[83.0-101.0]
MCH (CALCULATED)	28.3	pg	[27.0-32.0]
MCHC (CALCULATED)	32.3	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.3	%	[11.6-14.0]
Platelet count	164	x 10 ³ cells/cumm	[150-400]
MPV (DERIVED)	11.6		
WBC COUNT (TC) (IMPEDENCE)	8.12	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	73.0	%	[40.0-80.0]
Lymphocytes	19.0	%	[17.0-45.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	1.0 #	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	2.0	/1sthour	[0.0-

LABORATORY REPORT

Name	: MR SACHIDANAND VERMA	Age	: 37 Yr(s) Sex :Male
Registration No	: MH010781608	Lab No	: 202302001636
Patient Episode	: H18000000224	Collection Date	: 15 Feb 2023 09:52
Referred By	: HEALTH CHECK MGD	Reporting Date	: 15 Feb 2023 17:56
Receiving Date	: 15 Feb 2023 10:22		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	5.9 #	%	[0.0-5.6]
Method: HPLC			
As per American Diabetes Association (ADA)			
HbA1c in %			
Non diabetic adults >= 18years <5.7			
Prediabetes (At Risk)5.7-6.4			
Diagnosing Diabetes >= 6.5			
Estimated Average Glucose (eAG)	123	mg/dl	
Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.			
Serum LIPID PROFILE			
Serum TOTAL CHOLESTEROL	195	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	215 #	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	43.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	43 #	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	109.0	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189
Above optimal-100-129			

LABORATORY REPORT

Name : MR SACHIDANAND VERMA **Age** : 37 Yr(s) Sex :Male
Registration No : MH010781608 **Lab No** : 202302001636
Patient Episode : H18000000224 **Collection Date** : 15 Feb 2023 09:52
Referred By : HEALTH CHECK MGD **Reporting Date** : 15 Feb 2023 12:24
Receiving Date : 15 Feb 2023 10:22

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	4.5		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.5		<3 Optimal 3-4 Borderline >6 High Risk

Note:

Reference ranges based on ATP III Classifications.

KIDNEY PROFILE

Specimen: Serum

UREA Method: GLDH, Kinatic assay	14.0 #	mg/dl	[15.0-40.0]
BUN, BLOOD UREA NITROGEN Method: Calculated	6.5 #	mg/dl	[8.0-20.0]
CREATININE, SERUM Method: Jaffe rate-IDMS Standardization	0.87	mg/dl	[0.70-1.20]
URIC ACID Method:uricase PAP	5.8	mg/dl	[4.0-8.5]

SODIUM, SERUM 138.4 mmol/L [136.0-144.0]

POTASSIUM, SERUM 4.28 mmol/L [3.60-5.10]

SERUM CHLORIDE 100.4 # mmol/l [101.0-111.0]
Method: ISE Indirect

eGFR (calculated) 110.3 ml/min/1.73sq.m [>60.0]

Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years.

LABORATORY REPORT

Name : MR SACHIDANAND VERMA **Age** : 37 Yr(s) Sex :Male
Registration No : MH010781608 **Lab No** : 202302001636
Patient Episode : H1800000224 **Collection Date** : 15 Feb 2023 09:52
Referred By : HEALTH CHECK MGD **Reporting Date** : 15 Feb 2023 12:24
Receiving Date : 15 Feb 2023 10:22

BIOCHEMISTRY

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

LIVER FUNCTION TEST

BILIRUBIN - TOTAL Method: D P D	0.59	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.11	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.48 #	mg/dl	[0.10-0.30]
TOTAL PROTEINS (SERUM) Method: BIURET	7.30	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.34	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.00	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.47		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	35.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	46.00	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	128.0 #	IU/L	[32.0-91.0]

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LABORATORY REPORT

Name	: MR SACHIDANAND VERMA	Age	: 37 Yr(s) Sex :Male
Registration No	: MH010781608	Lab No	: 202302001637
Patient Episode	: H18000000224	Collection Date	: 15 Feb 2023 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 15 Feb 2023 12:25
Receiving Date	: 15 Feb 2023 09:53		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	110.0	mg/dl	[70.0-110.0]

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



Dr. Charu Agarwal
Consultant Pathologist

LABORATORY REPORT

Name	: MR SACHIDANAND VERMA	Age	: 37 Yr(s) Sex :Male
Registration No	: MH010781608	Lab No	: 202302001638
Patient Episode	: H18000000224	Collection Date	: 15 Feb 2023 13:19
Referred By	: HEALTH CHECK MGD	Reporting Date	: 15 Feb 2023 15:39
Receiving Date	: 15 Feb 2023 13:19		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE			
Specimen: Plasma			
GLUCOSE, POST PRANDIAL (PP), 2 HOURS	128.0	mg/dl	[80.0-140.0]
Method: Hexokinase			

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption, post exercise

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



Dr. Alka Dixit Vats
Consultant Pathologist

Sachidanand Verma

ID:

15-Feb-2023

10:31:19

Manipal Hospitals, Ghaziabad

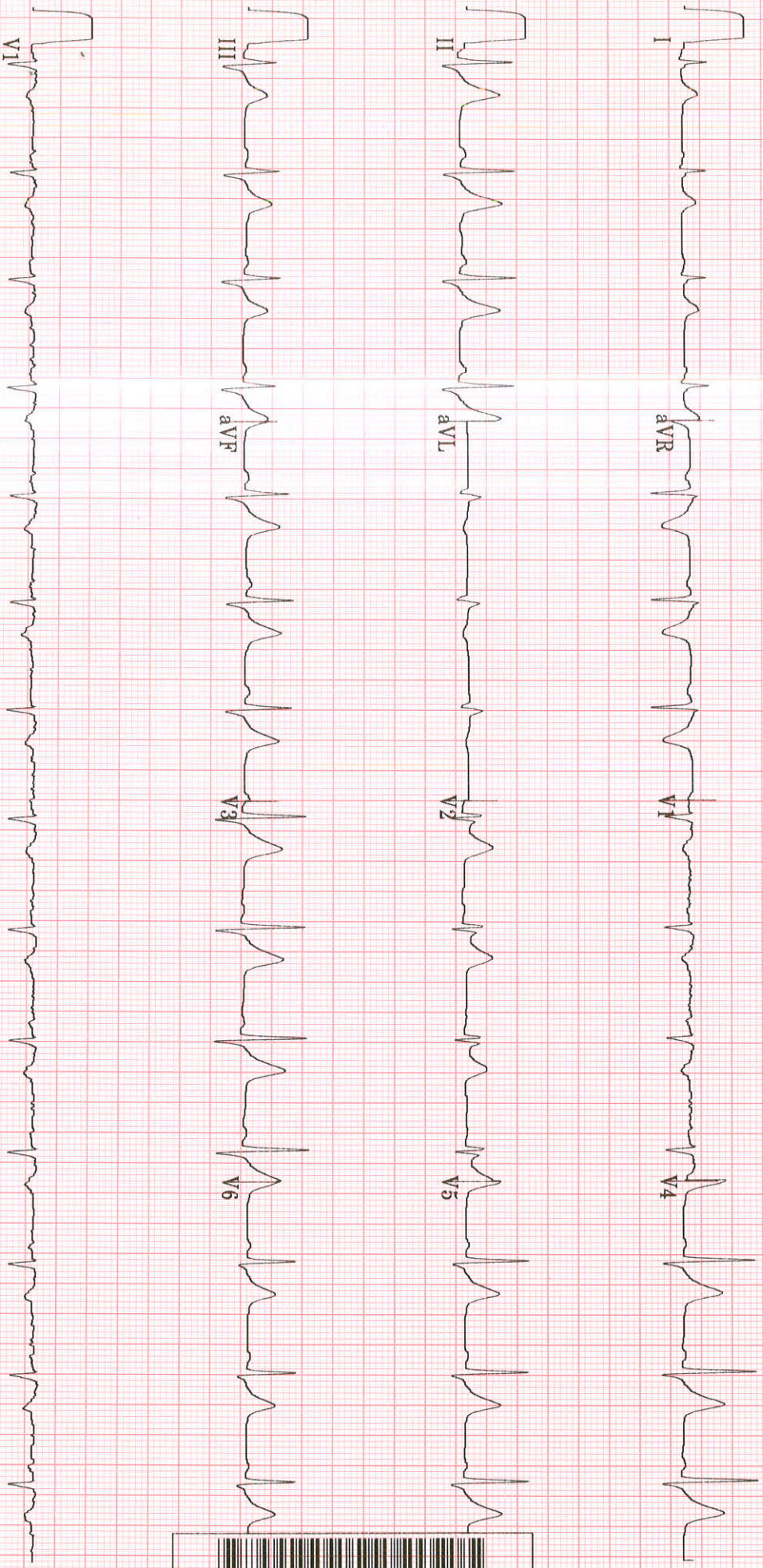
Vent. rate	83 bpm
PR interval	132 ms
QRS duration	78 ms
QT/QTc	336/394 ms
P-R-T axes	66 47 67

Normal sinus rhythm
Normal ECG

Technician:
Test ind:

Referred by:

Unconfirmed





TMT INVESTIGATION REPORT

Patient Name : Mr.Sachidanand VERMA	Location : Ghaziabad
Age/Sex : 37Year(s)/male	Visit No : V000000001-GHZB
MRN No MH010781608	Order Date : 15/02/2023
Ref. Doctor : HCP	Report Date : 15/02/2023

Protocol : Bruce **MPHR** : 183BPM
Duration of exercise : 7min 43sec **85% of MPHR** : 155BPM
Reason for termination : THR achieved **Peak HR Achieved** : 158BPM
Blood Pressure (mmHg) : Baseline BP : 134/70mmHg **% Target HR** : 86%
Peak BP : 154/74mmHg **METS** : 9.6METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	96	134/70	Nil	No ST changes seen	Nil
STAGE 1	3:00	118	140/70	Nil	No ST changes seen	Nil
STAGE 2	3:00	136	146/70	Nil	No ST changes seen	Nil
STAGE 3	1:43	158	154/74	Nil	No ST changes seen	Nil
RECOVERY	3:01	98	140/70	Nil	No ST changes seen	Nil

COMMENTS:

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

IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh
MD, DM (CARDIOLOGY), FACC
Sr. Consultant Cardiology

Dr. Abhishek Singh
MD, DNB (CARDIOLOGY), MNAMS
Sr. Consultant Cardiology

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