



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. KUMAR MANISH 40/M
EC NO.	73944
DESIGNATION	BRANCH HEAD
PLACE OF WORK	CANSA
BIRTHDATE	01-03-1983
PROPOSED DATE OF HEALTH CHECKUP	24-03-2023
BOOKING REFERENCE NO.	22M73944100051414E

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 **21-03-2023** 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))



बैंक ऑफ़ बड़ौदा
Bank of Baroda



नाम
Name : **Manish Kumar**
ए.सी.नं.
E.C.No. : **73944**



जारीकर्ता/आधिकारिता
Issuing Authority
C M (Coord/Security)
Pune Zone

हस्ताक्षर
Signature of Holder

मिलने पर, किम्बलिष्ठ हो नीचे
सहायक महाप्रबंधक (सुरक्षा)
बैंक ऑफ़ बड़ौदा, बड़ौदा कॉर्पोरेट सेन्टर
सी-26, सी ब्लॉक, बांद्रा-कुर्ला कॉम्प्लेक्स, मुंबई - 400 051 ए भारत
फोन 91 22 5698 5196 फैक्स 91 22 2652 5747

If found, please return to
Asst. General Manager (Security)
Bank of Baroda, Baroda Corporate Centre
C-26, G-Block, Bandra-Kurla Complex, Mumbai 400 051/ India
Phone 91 22 5698 5196 Fax 91 22 2652 5747

रक्त समूह / Blood Group : **A+ve**
चिह्नक निशान / Identification Marks : **Cut mark on forehead**



SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE

Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com

email : drsavaikar@gmail.com



॥ अस्मिन्मार्गं अस्मिन्मार्गं ॥

Patient : MR. MANISH KUMAR
UHID No : SHLC/28727
Ref.by : DR.MEGHA SAVAIKAR
Bill No : 8673

Age/Sex : 40/Male
Date : 24.03.2023

Print Date : 24.03.2023 03:31:36 PM

HAEMATOLOGY REPORT

CBC

Test Done

Observed values

Ref. Range

HAEMOGLOBIN (HB)	13.7 g/dl	M: 13.5 - 19.5 g/dl, F: 11.5 - 16.5 g/dl
TOTAL WBC COUNT	4,500 Cells/cu mm	4,000-10,500 /cu mm
<u>DIFFERENTIAL COUNT</u>		
STAB CELLS (IMMATURAL NEUTROPHILS)	02 %	0 - 5 %
NEUTROPHILS	58 %	40 - 70 %
LYMPHOCYTES	34 %	20 - 45 %
EOSINOPHILS	02 %	1 - 4 %
MONOCYTES	04 %	2 - 8 %
BASOPHILS	00 %	0 - 1 %
PLATELETS	1,45,000 /cu mm	1,50,000 - 4,00,000 /cu mm
RBC COUNT	4.31 millions/cu mm	4.5 - 6.5 /cu mm
HCT	39.8 %	40 to 54 %
ESR	15 mm/hr	0 - 20 mm/hr

..... End of Report

CHECKED BY

LAB-TECHNICIAN

DR. MRS. USHA V. PRIOLKAR

M.B.B.S., M.D.

Consultant Pathologist



The Hospital for perfect health



SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE

Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com

email : drsavaikar@gmail.com



॥ अस्मिन्मन्त्रे चरन्मम ॥

Patient : MR. MANISH KUMAR
UHID No : SHLC/28727
Ref.by : DR.MEGHA SAVAIKAR
Bill No : 8673

Age/Sex : 40/Male
Date : 24.03.2023

Print Date : 24.03.2023 03:37:54 PM

<u>Test Done</u>	<u>Observed values</u>	<u>Ref. Range</u>
<u>FASTING BLOOD SUGAR</u>		
FASTING BLOOD SUGAR	84.2 mg/dl	60 to 110
<u>BLOOD SUGAR POST PRANDIAL</u>		
BLOOD SUGAR POST PRANDIAL	133.1 mg/dl	70 to 150 mg/dl
<u>HBA1C</u>		
HBA1C	5.20 %	Normal 0.0-6.0% Good Control 6.0-7.0% Fair Control 7.0-8.0% Poor Control 8.0-10.0% Unsatisfactory c

<u>Test Done</u>	<u>Observed values</u>	<u>Ref. Range</u>
<u>HBA1C</u>		
Mean Blood Glucose	107.82 mg%	100-140

..... End of Report

CHECKED BY

LAB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR
M.B.B.S., M.D.

Consultant Pathologist



The Hospital for perfect health



SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE

Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com

email : drsavaikar@gmail.com



॥ सावित्रीबाई जयसिंग ॥

Patient : MR. MANISH KUMAR
UHID No : SHLC/28727
Ref. by : DR. MEGHA SAVAIKAR
Bill No : 8673

Age/Sex : 40/Male
Date : 24.03.2023

Print Date : 24.03.2023 03:42:05 PM

<u>Test Done</u>	<u>Observed values</u>	<u>Ref. Range</u>
BLOOD GROUP RH TYPING		
BLOOD GROUP RH TYPING	'A' Rh Positive	

BIOCHEMISTRY REPORT

<u>Test Done</u>	<u>Observed values</u>	<u>Ref. Range</u>
RENAL FUNCTION TEST		
Blood Urea	28.8 mg/dl	15.0 - 40.0
BUN	13.44 mg/dl	5.0 - 21.0
CREATININE	0.86 mg/dl	0.5 - 1.5
URIC ACID	4.42 mg/dl	Male : 3.5 - 7.2, Female : 2.5 - 6.2

<u>Test Done</u>	<u>Observed values</u>	<u>Ref. Range</u>
GAMMA GT (GGT)		
GAMMA GT (GGT)	22.4 U/L	M - <49, F - <32

..... End of Report

CHECKED BY

LAB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR
M.B.B.S., M.D.

Consultant Pathologist





SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE



Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com

email : drsavaikar@gmail.com

॥ अस्मै शान्तिम् ॥

Patient : MR. MANISH KUMAR

Age/Sex : 40/Male

UHID No : SHLC/28727

Date : 24.03.2023

Ref.by : DR.MEGHA SAVAIKAR

Bill No : 8673

Print Date : 24.03.2023 03:46:46 PM

BIOCHEMISTRY REPORT

<u>Test Done</u>	<u>Observed values</u>	<u>Ref. Range</u>
LIPID PROFILE		
SERUM CHOLESTEROL	151.9 mg/dl	130 to 240 mg/dl
HDL CHOLESTEROL	52.1 mg/dl	M:35-80,F:42-88
SERUM TRIGLYCERIDES	176.0 mg/dl	0 to 200
VLDL CHOLESTEROL	35.20 mg/dl	0 - 35
LDL CHOLESTEROL	64.60 mg/dl	0 - 160
LDL/HDL CHOLESTROL (R)	1.23	0.0 - 4.0
TOTAL CHOL / HDL CHO	2.92	0.0 - 4.5

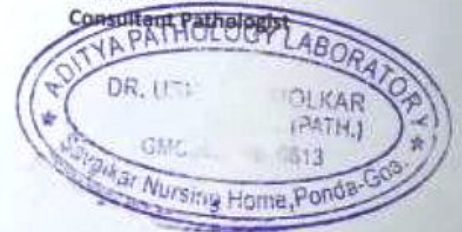
..... End of Report

CHECKED BY

LAB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR
M.B.B.S., M.D.

Consultant Pathologist





SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE

Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com

email : drsavaikar@gmail.com



॥ आरोग्यम् अमरमया ॥

Patient : MR. MANISH KUMAR
UHID No : SHLC/28727
Ref.by : DR.MEGHA SAVAIKAR
Bill No : 8673

Age/Sex : 40/Male
Date : 24.03.2023

Print Date : 24.03.2023 03:49:04 PM

BIOCHEMISTRY REPORT

Test Done	Observed values	Ref. Range
<u>LIVER FUNCTION TEST WITH PROTEINS</u>		
SGOT	33.3 U/L	5 - 40
SGPT	28.1 U/L	7 - 50
<u>BILIRUBIN</u>		
TOTAL	1.21 mg/dl	0.1 - 1.2
DIRECT	0.42 mg/dl	0.058 - 0.3
INDIRECT	0.79 mg/dl	0.2 - 0.7
ALKALINE PHOSPHATASE	85.21 U/L	53 - 128
<u>SERUM PROTEIN</u>		
TOTAL PROTEINS	6.21 gms %	6.0 - 8.5
ALBUMIN	3.68 gms %	3.2 - 5.5
GLOBULIN	2.53 gms %	2.1 - 3.3
A:G RATIO	1.45	1.5 - 2.1:1

..... End of Report

CHECKED BY

LAB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR
M.B.B.S., M.D.





SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE



Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com

email : drsavaikar@gmail.com

॥ आरोग्यम् धनसंभवम् ॥

Patient : MR. MANISH KUMAR

Age/Sex : 40/Male

UHID No : SHLC/28727

Date : 24.03.2023

Ref.by : DR.MEGHA SAVAIKAR

Bill No : 8673

Print Date : 24.03.2023 03:32:49 PM

CLINICAL PATHOLOGY REPORT

<u>Test Done</u>	<u>Observed values</u>	<u>Ref. Range</u>
------------------	------------------------	-------------------

URINE ROUTINE

PHYSICAL EXAMINATION

Colour	Pale Yellow	
Odour	Fainty Aromatic	
Appearance	Clear	

CHEMICAL EXAMINATION

Reaction	6.5	5.5 - 7.5
Specific Gravity	1.015	1.010 - 1.025
Deposit	Absent	
Protein	Absent	
Sugar	Absent	
Ketones	Absent	

MICROSCOPIC EXAMINATION

Pus Cells	2-3 /hpf	0 - 5 hpf
Epithelial Cells	0-1 /hpf	
RBC's	Nil /hpf	0 - 2hpf

..... End of Report

CHECKED BY

LAB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR

M.B.B.S., M.D. (PATHOLOGY LABORATORY)

Consultant Pathologist

DR. USHA V. PRIOLKAR
O.(PATH.)

GMC (Reg.No. 0013)

Savaikar Nursing Home, Ponda-Goa.

The Hospital for perfect health



SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE



Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com

email : drsavaikar@gmail.com

॥ अस्मिन्नेषु सुखेभ्यः ॥

Patient : MR. MANISH KUMAR
UHID No : SHLC/28727
Ref.by : DR.MEGHA SAVAIKAR
Bill No : 8673

Age/Sex : 40/Male
Date : 24.03.2023

Print Date : 24.03.2023 03:36:48 PM

CLINICAL PATHOLOGY REPORT

<u>Test Done</u>	<u>Observed values</u>	<u>Ref. Range</u>
<u>STOOL REPORT</u>		
<u>PHYSICAL EXAMINATION</u>		
Colour	Brownish Yellow	
Consistency	Semi-Solid	
Mucus	Absent	
Blood	Absent	
<u>CHEMICAL EXAMINATION</u>		
Reaction	6.5	
Occult Blood	Negative	
Reducing Substances	Absent	
<u>MICROSCOPIC EXAMINATION</u>		
Epithelial Cells	1-2 /hpf	
Pus Cells	2-3 /hpf	
RBCs	0-1 /hpf	
Ova	Absent	
cysts	Absent	
veg. forms	Present	
Bacteria	Absent	

..... End of Report

CHECKED BY

LAB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR

M.B.B.S., M.D.

Consultant Pathologist





Use a QR Code Scanner Application To Scan the Code

CID : 2308318778
 Name : MR. MANISH KUMAR
 Age / Gender : 40 Years / Male
 Consulting Dr. : MEGHA SAVAIKAR
 Reg. Location : Margao, South Goa

Collected : 24-Mar-2023 / 12:45
 Reported : 24-Mar-2023 / 15:20

THYROID FUNCTION TEST

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Total T3, Serum	2.0	1.3-3.1 nmol/l	ECLIA
NOTE: The unbound fraction of total T3 concentrations, free triiodothyronine (FT3) is metabolically active hence, more useful than measuring total T3 as altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG as in case of normal pregnancy and steroid therapy.			
Total T4, Serum	118.6	66-181 nmol/l	ECLIA
NOTE: T4 circulates in the blood as an equilibrium mixture of free and protein bound hormone. FT4 is a better indicator of thyroid hormone action than Total T4 because it is not affected by changes in Thyroxine Binding Globulin (TBG) or other Thyroxine Binding Proteins like in illness, drug intake or pregnancy.			
sensitiveTSH, Serum	2.32	0.35-5.5 microIU/ml	ECLIA



Use a QR Code Scanner Application To Scan the Code

CID : 2308318778
 Name : MR. MANISH KUMAR
 Age / Gender : 40 Years / Male
 Consulting Dr. : MEGHA SAVAIKAR
 Reg. Location : Margao, South Goa

Collected : 24-Mar-2023 / 12:45
 Reported : 24-Mar-2023 / 15:20

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1) TSH Values between high abnormal upto 15 microU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2) TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPC antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation: TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. **Biological variation:** 19.7% (with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid, TSH receptor Antibody, Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

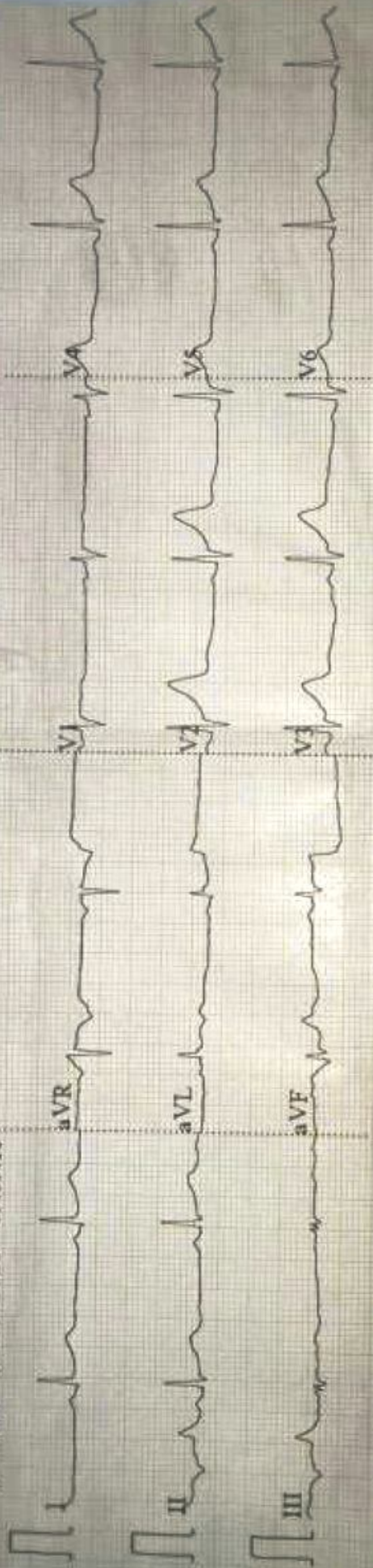
1. O. Koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
2. Interpretation of the thyroid function tests, Dayan et al. THE LANCET, Vol 357
3. Tietz, Text Book of Clinical Chemistry and Molecular Biology -5th Edition
4. Biological Variation: From principles to Practice- Callum G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Goa Lab, Margao
 *** End Of Report ***



(Signature)
Dr. VINEETH NAIR
 M.D. (PATH)
 Pathologist

ID: 7858 24-03-2023 09:09:16



0.25-25Hz AC50 25mm/s 10mm/mV ♥54 V1.0 SEMIP V1.7

CHART

ECG within normal limits

Dulced

DR(Mrs.) LALANA BAKHALE

Reg. No GMC/929

Consulting Physician & Cardiologist

Savaiyer Nursing Home,

Warkhandedem, Ponda-Goa

Manish Kumar 40/M
DATE 24/3/23

Eca within normal limits
J. N. S.

DR(MRS.) LALANA BAKHALE
Reg. No. GMC 0900
Consulting Physician & Cardiologist
Savalkar Nursing Home,
Warkhanded, Ponda-Goa



ECHOCARDIOGRAPHY REPORT

Name: Manish Kumar 40Y/M

Date: 24th March - 2023

Referred by:

M Mode Measurements :

IVSd (cms) = 1.03	LVsD (cms) = 2.33
LVdD (cms) = 3.99	Aorta (cms) = 3.8
PWd (cms) = 1.03	LA (cms) = 3.7
EF (%) = 65%	RVD (cms) =

Doppler Data :

Mitral Valve :

E (m/s) = 0.75

A (m/s) = 0.56

Regurgitation : nil

Stenosis : nil

MVA -

Tricuspid Valve :

Regurgitation - nil

PASP = + RAP mmHg

Stenosis : Nil

Aortic Valve :

Peak velocity (m/s+) = 0.92

Gradient (mmHg): PG/MG = nil

Regurgitation : nil

Stenosis : nil

Pulmonary valve :

Peak velocity (m/s) 1.36

Gradient (mmHg): PG/MG = normal

Regurgitation : nil

Stenosis : Nil

Regional Wall Motion Abnormality (RWMA) : nil

FINAL IMPRESSION :

NORMAL SIZE ALL 4 CARDIAC CHAMBERS

VALVES NORMAL

NO RWMA, IAS/IVS INTACT,

NORMAL LV FUNCTION(EF= 65%)

NO CLOT/VEGETATION/PE



Dr. Sabyasachi Mukhopadhyay
Consultant Cardiologist



NAME: MANISH KUMAR
REF BY: HEALTH CHECK UP
DATE: 24/03/2023

RADIOGRAPH OF THE CHEST-PA VIEW

The trachea is central
The lung fields are clear
Both CP angles are clear
Cardiothoracic ratio is within normal limits
The rib cage is normal
Both the diaphragm contours are normal

With warm regards.

Reshma

Dr. RESHMA DALVI
M.D, D.N.B (RADIO-DIAGNOSIS)





Name: MANISH KUMAR 40/M

Date: 24-03-2023

HEALTH CHECKUP

USG ABDOMEN & PELVIS

Liver: normal in size, with normal echotexture. **Few areas of fat infiltration are seen.** Hepatic veins are normal. No focal mass lesion noted. The **Portal Vein** is normal.

There is no dilatation of intra-hepatic biliary radicals. The **CBD** is normal in caliber.

Gall bladder: adequately distended. No calculi. No wall thickening. No peri-cholecystic fluid.

Spleen: normal in size, with normal echotexture. No focal mass lesion.

Pancreas: normal in size and echotexture. No focal mass noted. The pancreatic duct is normal. No calculi / calcification. No peri-pancreatic collection.

Right kidney: measures 10.4 cm. The cortical echogenicity is normal. Cortico-medullary differentiation is maintained. No dilatation of pelvicalyceal system noted. No focal lesion.

There is a calculus in an inter-polar calyx, measuring 5 mm.

Left kidney: measures 10.6 cm. The cortical echogenicity is normal. Cortico-medullary differentiation is maintained. No dilatation of pelvicalyceal system noted. No focal lesion.

There is a calculus in a lower pole calyx, measuring 3.8 mm.

Urinary bladder: adequately distended. No calculi. No focal mass. No wall thickening. No e/o internal echoes.

Prostate: normal in size, with normal echotexture.

The great vessels are normal.

No bowel wall thickening.

No intra-abdominal lymphadenopathy.

No free fluid in the abdominal cavity.

No basal pleural effusion.

No obvious mass lesion.

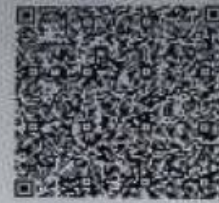
Impression:

- **Bilateral renal calculi.**
- **Mild fatty infiltration of the liver.**


SAVAIKAR HOSPITAL
Reg
Mar
Pon
2023
Dr. Sarvesh L. S. Dubhashi
Consulting Radiologist

Thanks for the reference

The Hospital for perfect health



Use a QR Code Scanner Application To Scan the Code

CID : 2308318778
 Name : MR.MANISH KUMAR
 Age / Gender : 40 Years / Male
 Consulting Dr. : MEGHA SAVAIKAR
 Reg. Location : Margao, South Goa

Collected : 24-Mar-2023 / 12:45
 Reported : 24-Mar-2023 / 15:20

PROSTATE SPECIFIC ANTIGEN (PSA)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
TOTAL PSA, Serum	0.647	0.03-2.5 ng/ml	ECLIA

Clinical Significance:

- PSA is detected in the serum of males with normal, benign hyper-plastic, and malignant prostate tissue.
- Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
- Prostate cancer screening 4. The percentage of Free PSA (FPSA) in serum is described as being significantly higher in patients with BPH than in patients with prostate cancer. 5. Calculation of % free PSA (ie. FPSA/TPSA x 100), has been suggested as way of improving the differentiation of BPH and Prostate cancer.

Interpretation:

Increased In- Prostate diseases, Cancer, Prostatitis, Benign prostatic hyperplasia, Prostatic ischemia, Acute urinary retention, Manipulations: Prostatic massage, Cystoscopy, Needle biopsy, Transurethral resection, Digital rectal examination, Radiation therapy, Indwelling catheter, Vigorous bicycle exercise, Drugs (e.g., testosterone), Physiologic fluctuations. Also found in small amounts in other cancers (sweat and saliva glands, breast, colon, lung, ovary) and in Skene glands of female urethra and in term placenta, Acute renal failure, Acute myocardial infarction,

Decreased In- Ejaculation within 24-48 hours, Castration, Antiandrogen drugs (e.g., finasteride), Radiation therapy, Prostatectomy, PSA falls 17% in 3 days after lying in hospital, Artfactual (e.g., improper specimen collection; very high PSA levels). Finasteride (5- α ;-reductase inhibitor) reduces PSA by 50% after 6 months in men without cancer.

Reflex Tests: % FREE PSA , USG Prostate

Limitations:

- tPSA values determined on patient samples by different testing procedures cannot be directly compared with one another and could be the cause of erroneous medical interpretations. If there is a change in the tPSA assay procedure used while monitoring therapy, then the tPSA values obtained upon changing over to the new procedure must be confirmed by parallel measurements with both methods. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels.
- Patients who have been regularly exposed to animals or have received immunotherapy or diagnostic procedures utilizing immunoglobulins or immunoglobulin fragments may produce antibodies, e.g. HAMA, that interferes with immunoassays.
- PSA results should be interpreted in light of the total clinical presentation of the patient, including: symptoms, clinical history, data from additional tests, and other appropriate information.
- Serum PSA concentrations should not be interpreted as absolute evidence for the presence or absence of prostate cancer.

Reference:

- Wallach's Interpretation of diagnostic tests
- Total PSA Pack insert

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Goa Lab, Margao
 *** End Of Report ***



Dr. Vineeth Nair
Dr. VINEETH NAIR
 M.D. (PATH)
 Pathologist



SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE

Warkhandem, Ponda, Goa 403 401
Hosp. Reg. No. T/0/412
Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870
website : www.savaikarhospital.com
email : drsavaikar@gmail.com



॥ अस्मिन्मन्त्रे ॥

Date:- 24.03.2023

NAME:- Manish Kumar

AGE:- 40

SEX:- Male

COMPANY NAME :- _____

OPHTHALMIC EXAMINATION:

VISION	DISTANT		NEAR	
	RIGHT	LEFT	RIGHT	LEFT
VISUAL ACUITY				
WITH SPECTS	spect's not Bright			
WITHOUT SPECTS	6/9	6/6	N/G	N/G
COLOUR VISION	NORMAL			
SIGNS OF NIGHT BLINDNESS:-	Yes/No <input checked="" type="radio"/>		PHORIAS :- Nil	

SIGNATURE OF THE EMPLOYEE



The Hospital for perfect health



SAVAIKAR HOSPITAL & LAPAROSCOPY CENTRE

Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com

email : drsavaikar@gmail.com



॥ अस्मिन्ने चिकित्सा ॥

Manish Kumar

Exercise :- Gym / Walking ✓

Water Intake :- 2-3 litres ✓

oil :- Mustard oil / Coconut water

Age = 40

weight - 71.4 kgs

Ht - 168

● Early morning :- Lemon water → 1 glass.

Breakfast :- Eggs → 2-3 nos + Chapatis → 2 nos

Midmorning :- Papaya / watermelon → 1 cup

Lunch :- Rotis → 2 nos
Methi / palak → 2 cups. (No pickles / papad)
Tambuli / French Beans / dal / Brinjals

● 5:00pm :- ABC or Any fruit juice (fresh)
Jelera water → 1 glass.

8:00pm :- Besan Chulia or Onion uttapam → 1-2 nos.

Snack :- Fruits / Vegetables ↓



The Hospital for perfect health

Savaikar Hospital Health Check Summary

Date :- 24.03.2023

Name :- Manish Kumar

Age :- 40

Sex :- Male

Address :- Chimbhel

Cont. No. :- 8210665013

Height - 168

Weight - 71.4 kg

Past History :-

Allergy - Smeadip - Perinial
Cough frequently -
more at days of season

Obstetric History :-

N.A.

Menstrual History :-

N.A.

Personal History :-

- Appetite - normal
- Sleep - normal
- Urine - normal
- Motion - normal
Addiction - Nil

Family History :-

Mother - asthma, Diabetes
Father - healthy

On Examination :-

CVS :-

R/S :-

CNS :-

P/A :-

H.S. normal No murmur.
B.S. normal No added sound.
No deficit
S.O.B. No tenderness
No lump Liver Spleen N.P.
No hernia Hydrocoele

Lab Investigations:- In file.

Significant Findings:- No abnormality

Resting ECG :- normal.

Ultrasound:- Bil. calculi

X-Ray:- normal

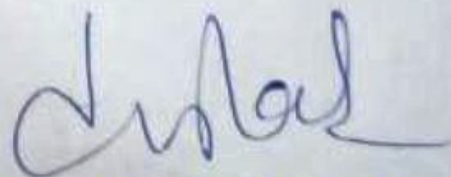
Summary:- Calculi in both kidneys
Diet

Plenty of fluids

walk in daily.

Advice:-

- Tab. 'Solimant' Ex i
- Tab. ~~B. H.C~~ Atoz idas



DR(Mrs.) LALANA BAKHALE
Reg. No. GMC 0920
Dr. (Mrs.) Lalana Bakhale
Consulting Physician & Cardiologist
M.B.B.S., M.D.
Warkhandem, Ponda-Goa