



प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	GURSEWAK SINGH
जन्म की तारीख	05-03-1982
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	29-09-2023
बुकिंग संदर्भ सं.	23S160454100070666S
	पत्नी/पति के विवरण
कर्मचारी का नाम	MS. KAUR SUKHDEEP
कर्मचारी की क.कू.संख्या	160454
कर्मचारी का पद	FOREX BACK OFFICE
कर्मचारी के कार्य का स्थान	GANDHINAGAR, GIFT CITY, NATIONAL
कर्मचारी के जन्म की तारीख	31-07-1982

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 29-09-2023 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



To,

The Coordinator,
Mediwhheel (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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	GURSEWAK SINGH
DATE OF BIRTH	05-03-1982
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	29-09-2023
BOOKING REFERENCE NO.	23S160454100070666S
SPOUSE DETAILS	
EMPLOYEE NAME	MS. KAUR SUKHDEEP
EMPLOYEE EC NO.	160454
EMPLOYEE DESIGNATION	FOREX BACK OFFICE
EMPLOYEE PLACE OF WORK	GANDHINAGAR,GIFT CITY,NATIONAL
EMPLOYEE BIRTHDATE	31-07-1982

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 **29-09-2023** till **31-03-2024**. 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's spouse 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 Mediwhheel (Arcofemi Healthcare Limited))





બંક ઓફ બારોડા
Bank of Baroda

નામ: **Ms. KAUR SUKHDEEP**

नाम:

સંખ્યા અને એ. સં. નં. **160454**

E. C. No



સહકારી બેંક, સુરત, ગુજરાત
Co-operative Bank, Surat, Gujarat



સહકારી બેંક, સુરત, ગુજરાત
Co-operative Bank, Surat, Gujarat
Signature of holder



Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

 **aashka**
H O S P I T A L



DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:	OSP 31375	Date:	27/10/23	Time:	11:45
Patient Name:					
History:	Complly Healthy eye				
Allergy History:					
Nutritional Screening:	Well-Nourished / Mainourished / Obese				
Examination:	V.A 6/6 V.R 6/6 N6 + 0.75 Colours vision - Normal				
Diagnosis:	Normal				

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aashka
H O S P I T A L



DR. SEJAL J AMIN
B.D.S, M.D.S (PERIODONTIST)
IMPLANTOLOGIST
REG NO: A-12942

UHID:	OSP 31375	Date:	7/10/23	Time:	
Patient Name:	Aziz serak Singh	Age / Sex:	41 / M.	Height:	
		Weight:			
Chief Complain:	Routine dental check up.				
History:					
Allergy History:					
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:					
Extra oral :					
Intra oral – Teeth Present :	Stein ++ Carious +				
Teeth Absent :	→ Parity restoration not FF				
Diagnosis:					

Rx						
No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Other Advice:

Adv:- ① Sewing
 ② crfc filling + Fee ~~120~~ / 7

Follow-up:

Consultant's Sign:



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 **aashka**
H O S P I T A L



PATIENT NAME: GURSEWAK SINGH

GENDER/AGE: Male / 41 Years

DOCTOR:

OPDNO: OSP31375

DATE: 07/10/23

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.1 x 4.1 cms in size.
Left kidney measures about 10.2 x 4.4 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.
No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 140 cc.

PROSTATE: Prostate appears normal in size and shows normal parenchymal echoes. No evidence of pathological calcification or solid or cystic mass lesion is seen.
Prostate volume measures about 20 cc.

COMMENT: Normal sonographic appearance of liver, GB; Pancreas, spleen, kidneys, bladder and prostate.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

Aashka Hospitals Ltd.

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CIN: L85110GJ2012PLC07264Z

 **aashka**
H O S P I T A L



PATIENT NAME: GURSEWAK SINGH

GENDER/AGE: Male / 41 Years

DOCTOR:

OPDNO: OSP31375

DATE: 07/10/23

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.
No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.
Both hilar shadows and C.P. angles are normal.
Heart shadow appears normal in size. Aorta appears normal.
Bony thorax and both domes of diaphragm appear normal.
No evidence of cervical rib is seen on either side.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST



LABORATORY REPORT



Name : **GURSEWAK SINGH**

Ref.By : aashka hospital

Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years

Case ID : 31002200218

Dis. At :

Pt. ID : 3041162

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25

Mobile No : 7009789564

Sample Date and Time : 07-Oct-2023 16:25

Ref Id1 :

Report Date and Time :

Ref Id2 :

Acc. Remarks : Normal

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Urea Nitrogen (BUN)			
BUN (Blood Urea Nitrogen)	8.7	mg/dL	8.90 - 20.60
CBCESR			
Platelet Count	119000	/µL	150000.00 - 410000.00
MPV	14.20	fL	6.5 - 12
PDW	34.0		9 - 16
Lipid Profile			
HDL Cholesterol	40.2	mg/dL	48 - 77
Triglyceride	230.79	mg/dL	40 - 200
VLDL	46.16	mg/dL	10 - 40
Chol/HDL	4.42		0 - 4.1
Plasma Glucose - F	119.31	mg/dL	70.0 - 100

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)



LABORATORY REPORT



Name : GURSEWAK SINGH

Sex/Age : Male / 41 Years Case ID : 31002200218

Ref.By : aashka hospital

Dis. At : Pt. ID : 3041162

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25

Sample Type : Whole Blood EDTA

Mobile No : 7009789564

Sample Date and Time : 07-Oct-2023 16:25

Sample Coll. By :

Ref Id1 :

Report Date and Time : 07-Oct-2023 18:42

Acc. Remarks : Normal

Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT AND ESR

HB AND INDICES

Haemoglobin	13.5	G%	13.00 - 17.00	
RBC (Electrical Impedance)	4.67	millions/cumm	4.50 - 5.50	
PCV(Calc)	42.31	%	40.00 - 50.00	
MCV (RBC histogram)	90.6	fL	83.00 - 101.00	
MCH (Calc)	28.9	pg	27.00 - 32.00	
MCHC (Calc)	31.9	gm/dL	31.50 - 34.50	
RDW (RBC histogram)	15.10	%	11.00 - 16.00	

TOTAL AND DIFFERENTIAL WBC COUNT

Total WBC Count	6700	/µL	4000.00 - 10000.00	
Neutrophil	L%] 59.0	%	EXPECTED VALUES 40.00 - 70.00	[Abs] 3953 /µL 2000.00 - 7000.00
Lymphocyte	34.0	%	20.00 - 40.00	2278 /µL 1000.00 - 3000.00
Eosinophil	1.0	%	1.00 - 6.00	67 /µL 20.00 - 500.00
Monocytes	6.0	%	2.00 - 10.00	402 /µL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0 /µL 0.00 - 100.00

PLATELET COUNT

Platelet Count	L 119000	/µL	150000.00 - 410000.00
MPV	H 14.20	fL	6.5 - 12
PDW	H 34.0		9 - 16

SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Total WBC count within normal limits.
Platelet	Thrombocytopenia .
Parasite	Malarial Parasite not seen on smear.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

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CONDITIONS OF REPORTING

1. All laboratory investigations have their limitations which are imposed by the limits of sensitivity and specificity of individual assay procedures as well as the quality of the specimen received by the laboratory. Isolated laboratory investigations never confirm the final diagnosis of the disease, but only help in arriving at a diagnosis in conjunction with clinical presentation and other related investigations.
2. The result(s) relate only to the sample(s) received.
3. The test report shall not be reproduced except in full, without written approval of the Neuberg Supratech Reference Laboratory (NSRL).
4. For any query in the report, it is suggested to contact the concerned laboratory personnel as suggested in the table to help carry out follow-up action (rechecking, repeat sampling, reflex confirmatory testing, etc.). Neuberg Supratech Reference Laboratories (NSRL) follows a procedure of retaining & preserving samples after testing for a stipulated period. After the retention period of the sample, a fresh specimen is requested.
5. Report results are for the information of the referring doctor only.
6. For tests performed on specimens received from non - Neuberg Supratech Reference Laboratory (NSRL) locations (within and outside Ahmedabad) it is presumed that the specimen belongs to the patient named or identified, such verification having been carried out at the point of generation of the said specimen.
7. A test requested might yield 'INCOMPLETE RESULTS' for various technical reasons and this response will appear against the test name followed by detailed comment at the end of the report. It is expected that a fresh specimen will be sent for the purpose of reporting on the same parameter(s).
8. Neuberg Supratech Reference Laboratories (NSRL) Ahmedabad is accredited by ICMR and NABL for COVID-19 testing.

Lab Reports & Advisory Services	Contact Numbers
Biochemistry & Immunology	079-40408120
Microbiology	079-40408145
Histopathology & Cytology	079-40408132
Hematology & Clinical Pathology	079-40408114
Flow Cytometry, Coagulation & Electrophoresis	079-40408117
Genetics	079-40408161
Other Services	Contact Numbers
Marketing, Clinical Trials & Corporate Affairs : Dr. Ameer Shukla	7698009812
Marketing - Laboratories : Mr. Sunil Panchal	9824002011
Billing & Accounts : Mr. Pravin Patel	9824728315
Visits (Home / Hospital for Sample Collection) & General Information : Mrs. Sonal Shah	9824408721
Sample Transport / Pick-up & Report Dispatch : Mr. Suchit Chauhan	7698009903

Any query may also be directed online on contact@supratechlabs.com with attention to the concerned personnel.

Neuberg Supratech Branches in Ahmedabad

Sindhu Bhavan - Ph : 079-61618111, 6357244307, Bapunagar - 635678001/22,
Maninagar - 079-40408282, 25450802, Bopal - 02717-235881/82, Gota - 6357244303
Bhuyangdev - 9879624264

Neuberg Supratech Collection Centers in Ahmedabad

Shahibaug - 079-25630134, Shyamal - 079-26743434, Paldi - 6359900406

Neuberg Supratech Reference Laboratories
"KEDAR" Opposite Krupa Petrol Pump,
Near Parimal Garden, Ahmedabad - 380006
Phone : 079-40408181 / 61618181
Email : contact@supratechlabs.com
Website : www.neubergsupratech.com

Regd. Office :

Neuberg Supratech Reference Laboratories Private Limited
(Previously known as Supratech Micropath Laboratory & Research Institute Pvt Ltd)
Triviron Saphthagiri Bhawan, 15, IV Street
Abhiramapuram, Chennai - 600018, Tamil Nadu
CIN : U85195TN2013PTC151947



LABORATORY REPORT



Name : GURSEWAK SINGH

Sex/Age : Male / 41 Years Case ID : 31002200218

Ref.By : aashka hospital

Dis. At : Pt. ID : 3041162

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25	Sample Type : Whole Blood EDTA	Mobile No : 7009789564
Sample Date and Time : 07-Oct-2023 16:25	Sample Coll. By :	Ref Id1 :
Report Date and Time : 07-Oct-2023 18:42	Acc. Remarks : Normal	Ref Id2 :

ESR

04 mm after 1hr 3 - 15

Method:TLC-SF cube technology(Flow Cytometry+ fluorescence), DC by microscopy, Platelet count by electrical impedance+/-SF cube technology,
ESR by photometrical capillary stopped flow kinetic analysis

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

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LABORATORY REPORT

Name : GURSEWAK SINGH

Ref.By : aashka hospital

Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years

Case ID : 31002200218

Dis. At :

Pt. ID : 3041162

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25

Sample Type : Whole Blood EDTA

Mobile No : 7009789564

Sample Date and Time : 07-Oct-2023 16:25

Ref Id1 :

Report Date and Time : 07-Oct-2023 16:50

Ref Id2 :

Acc. Remarks : Normal

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

HAEMATOTOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology)
(Both Forward and Reverse Group)

ABO Type

AB

Rh Type

POSITIVE

Note:(LL-Very Low,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

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LABORATORY REPORT

Name : GURSEWAK SINGH

Ref.By : aashka hospital

Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years

Dis. At :

Pt. Loc :

Case ID : 31002200218

Pt. ID : 3041162

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25

Sample Type : Spot Urine

Mobile No : 70097895664,

Sample Date and Time : 08-Oct-2023 07:12

Ref Id1 :

Report Date and Time : 08-Oct-2023 07:19

Ref Id2 :

Acc. Remarks : Normal

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour Pale yellow

Transparency Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity >1.025

1.005 - 1.030

pH <5.5

5 - 8

Leucocytes (ESTERASE) Negative

Negative

Protein Negative

Negative

Glucose Negative

Negative

Ketone Bodies Urine Negative

Negative

Urobilinogen Negative

Negative

Bilirubin Negative

Negative

Blood Negative

Negative

Nitrite Negative

Negative

Negative

Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte Nil

/HPF

Nil

Red Blood Cell Nil

/HPF

Nil

Epithelial Cell Present +

/HPF

Present(+)

Bacteria Nil

/ul

Nil

Yeast Nil

/ul

Nil

Cast Nil

/LPF

Nil

Crystals Nil

/HPF

Nil

Note: (L-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)



Dr. Shreya Shah

M.D. (Pathologist)

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LABORATORY REPORT

Name : **GURSEWAK SINGH**
 Ref.By : aashka hospital
 Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years Case ID : 31002200218
 Dis. At : Pt. ID : 3041162
 Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25 Sample Type : Spot Urine Mobile No : 7009789564
 Sample Date and Time : 08-Oct-2023 07:12 Sample Coll. By : Ref Id1 :
 Report Date and Time : 08-Oct-2023 07:19 Acc. Remarks : Normal Ref Id2 :

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)



Dr. Shreya Shah
 M.D. (Pathologist)

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Hematology & Clinical Pathology	079-40408174
Flow Cytometry, Coagulation & Electrophoresis	079-40408117
Genetics	079-40408161
Other Services	Contact Numbers
Marketing, Clinical Trials & Corporate Affairs : Dr. Ameer Shukla	7698009812
Marketing - Laboratories : Mr. Sunil Panchal	9824002011
Billing & Accounts : Mr. Pravin Patel	9824728315
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Neuberg Supratech Collection Centers in Ahmedabad

Shahibaug - 079-25630134, Shyamal - 079-26743434, Paldi - 6359900406

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Regd. Office :

Neuberg Supratech Reference Laboratories Private Limited
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Trivitron Saphthagiri Bhawan, 15, IV Street
Abhiramapuram, Chennai - 600018, Tamil Nadu
CIN : U85195TN2013PTC151947



LABORATORY REPORT



Name : GURSEWAK SINGH

Ref.By : aashka hospital

Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years

Dis. At :

Case ID : 31002200218

Pt. ID : 3041162

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25

Mobile No : 7009789564

Sample Date and Time : 07-Oct-2023 16:25

Sample Type : Plasma Fluoride F, Plasma Fluoride PP, Serum

Sample Coll. By :

Ref Id1 :

Report Date and Time : 07-Oct-2023 18:09

Ref Id2 :

Acc. Remarks : Normal

UNIT BIOLOGICAL REF RANGE REMARKS

Plasma Glucose - F	H	119.31	mg/dL	70.0 - 100	
Plasma Glucose - PP		132.73	mg/dL	70.0 - 140.0	
BUN (Blood Urea Nitrogen) GLDH	L	8.7	mg/dL	8.90 - 20.60	
Creatinine		0.77	mg/dL	0.50 - 1.50	
Uric Acid		6.68	mg/dL	3.5 - 7.2	

Note: (L-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

Page 7 of 13

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LABORATORY REPORT

Name : GURSEWAK SINGH

Ref.By : aashka hospital

Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years Case ID : 31002200218

Dis. At : Pt. ID : 3041162

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25

Sample Type : Serum

Mobile No : 7009789564

Sample Date and Time : 07-Oct-2023 16:25

Sample Coll. By :

Ref Id1 :

Report Date and Time : 08-Oct-2023 07:46

Acc. Remarks : Normal

Ref Id2 :

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol	177.62	mg/dL	110 - 200
HDL Cholesterol	L 40.2	mg/dL	48 - 77
Triglyceride	H 230.79	mg/dL	40 - 200
VLDL Calculated	H 46.16	mg/dL	10 - 40
Chol/HDL Calculated	H 4.42		0 - 4.1
LDL Cholesterol Calculated	91.26	mg/dL	0.00 - 100.00

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal < 100	Desirable < 200	Low < 40	Normal < 150
Near Optimal 100-129	Border Line 200-239	High > 60	Border High 150-199
Borderline 130-159	High > 240		High 200-499

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note: (L-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



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Abhiramapuram, Chennai - 600018, Tamil Nadu
CIN : U85195TN2013PTC151947



LABORATORY REPORT

Name : GURSEWAK SINGH

Ref.By : aashka hospital

Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years

Dis. At :

Pt. Loc :

Case ID : 31002200218

Pt. ID : 3041162

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25 Sample Type : Serum Mobile No : 7009789564

Sample Date and Time : 07-Oct-2023 16:25 Sample Coll. By :

Ref Id1 :

Report Date and Time : 07-Oct-2023 18:09 Acc. Remarks : Normal

Ref Id2 :

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T.	24.14	U/L	0 - 41
S.G.O.T.	20.77	U/L	15 - 37
Alkaline Phosphatase	56.16	U/L	40 - 130
Gamma Glutamyl Transferase	12.99	U/L	8 - 61
Proteins (Total)	7.47	gm/dL	6.4 - 8.2
Albumin	4.78	gm/dL	3.4 - 5
Globulin <i>Calculated</i>	2.69	gm/dL	2 - 4.1
A/G Ratio <i>Calculated</i>	1.8		1.0 - 2.1
Bilirubin Total	0.43	mg/dL	0.2 - 1.0
Bilirubin Conjugated	0.26	mg/dL	
Bilirubin Unconjugated <i>Calculated</i>	0.17	mg/dL	0 - 0.8

Note: (LL-Very Low, L-Low, H-High, HH-Very High ,A-Abnormal)



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LABORATORY REPORT

Name : GURSEWAK SINGH

Ref.By : aashka hospital

Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years

Dis. At :

Pt. Loc :

Case ID : 31002200218

Pt. ID : 3041162

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25 Sample Type : Whole Blood EDTA Mobile No : 7009789564

Sample Date and Time : 07-Oct-2023 16:25 Sample Coll. By :

Ref Id1 :

Ref Id2 :

Report Date and Time : 07-Oct-2023 18:02 Acc. Remarks : Normal

TEST

RESULTS UNIT

BIOLOGICAL REF RANGE REMARKS

Glycated Haemoglobin Estimation

HbA1C	5.37	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	107.42	mg/dL	Not available

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control. Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia. Increased HbA1C values may be found in patients with polycythemia or post-splenectomy patients. Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA. In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine. The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : GURSEWAK SINGH

Ref.By : aashka hospital

Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years

Dis. At :

Pt. Loc :

Case ID : 31002200218

Pt. ID : 3041162

Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25

Mobile No : 7009789564

Sample Type : Serum

Sample Coll. By :

Ref Id1 :

Report Date and Time : 07-Oct-2023 18:09

Acc. Remarks : Normal

Ref Id2 :

TEST

RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Proteins (Total)	7.47	gm/dL	6.4 - 8.2	
Albumin	4.78	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.69	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.8		1.0 - 2.1	

Note: (LL-Very Low, L-Low, H-High, HH-Very High ,A-Abnormal)

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LABORATORY REPORT

Name : GURSEWAK SINGH

Sex/Age : Male / 41 Years Case ID : 31002200218

Ref.By : aashka hospital

Dis. At : Pt. ID : 3041162

Bill. Loc. : Aashka hospital

Pt. Loc. :

Reg Date and Time : 07-Oct-2023 16:25 Sample Type : Serum

Mobile No : 7009789564

Sample Date and Time : 07-Oct-2023 16:25 Sample Coll. By :

Ref Id1 :

Report Date and Time : 07-Oct-2023 17:41 Acc. Remarks : Normal

Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

Thyroid Function Test

Triiodothyronine (T3)	107.13	ng/dL	70 - 204	
Thyroxine (T4) <small>CMIA</small>	7.25	ng/dL	4.87 - 11.72	
TSH <small>CMIA</small>	2.76	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentrations (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy

First trimester	Reference range (microIU/ml)
Second trimester	0.24 - 2.00
Third trimester	0.43-2.2
	0.8-2.5

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)



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LABORATORY REPORT



Name : GURSEWAK SINGH
 Ref.By : aashka hospital
 Bill. Loc. : Aashka hospital

Sex/Age : Male / 41 Years Case ID : 31002200218
 Dis. At : Pt. ID : 3041162
 Pt. Loc : Pt. Loc :

Reg Date and Time : 07-Oct-2023 16:25 Sample Type : Serum Mobile No : 7009789564
 Sample Date and Time : 07-Oct-2023 16:25 Sample Coll. By : Ref Id1 :
 Report Date and Time : 07-Oct-2023 17:41 Acc. Remarks : Normal Ref Id2 :

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & if TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hypothyroid patients, hypothyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.
 TSH ref range in Pregnancy
 First trimester 0.24 - 2.00
 Second trimester 0.43-2.2
 Third trimester 0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hypert thyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↓	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

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

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note: (L-L-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



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The user agrees to indemnify and hold the provider harmless from and against all claims, damages, losses, and expenses, including reasonable attorneys' fees, that may be asserted against or incurred by the provider in connection with the user's use of the provider's services, whether or not such claims, damages, losses, or expenses are caused in whole or in part by the negligence of the provider.

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Herbert Hoover Research Center

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GANDHINAGAR

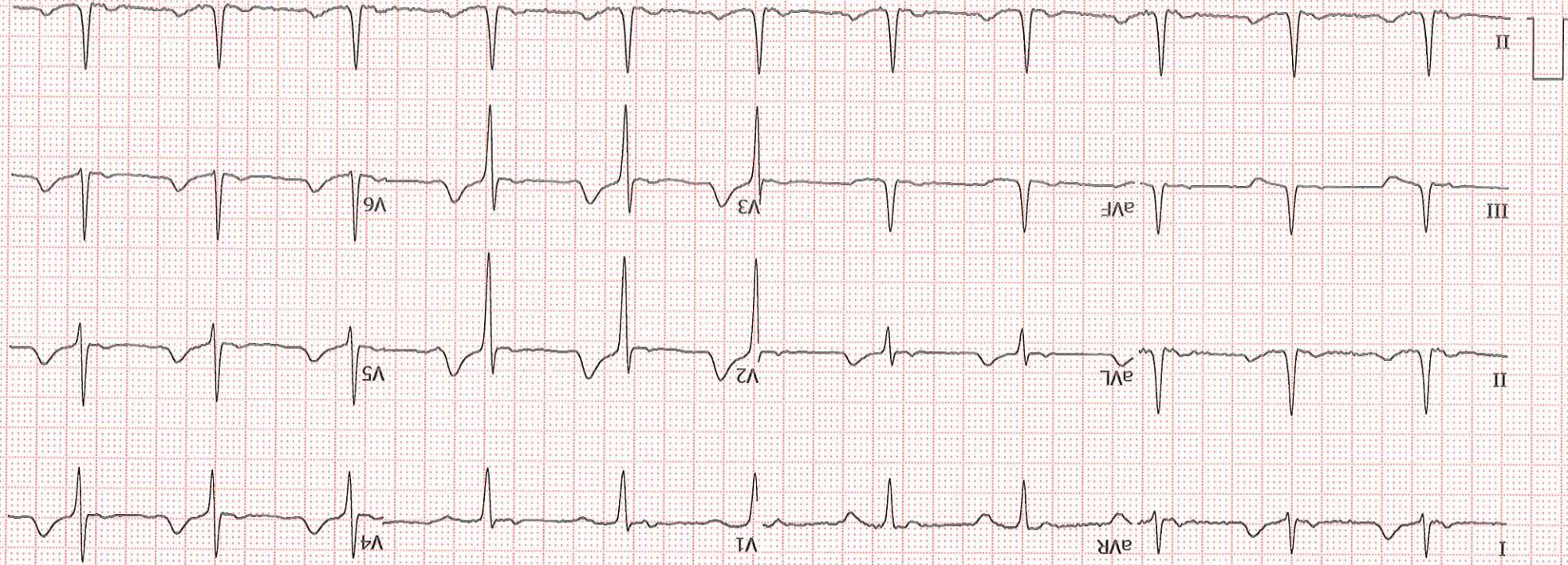
Locatr: 1
Order Num:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

67 bpm
--/-- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:
QRS:
QT / QTcbaz:
PR:
P:
RR / PP:
P / QRS / T:

108 ms
402 / 424 ms
178 ms
120 ms
898 / 895 ms
35 / 69 / 12 degrees
Normal sinus rhythm
Normal ECG



ADDRESSOGRAPH

COLOUR DOPPLER ECHOCARDIOGRAPH REPORT

Patient's Name: Suresh Age: 41 Sex: male

Ref. by Doctor: _____ IP/OP No.: OSP31375 Date: 7/10/23

MITRAL VALVE	:	
AORTIC VALVE	:	
TRICUSPID VALVE	:	<u>2</u>
PULMONARY VALVE	:	
AORTA	:	<u>34</u>
LEFT ATRIUM	:	<u>38</u>
LV Dd/ Ds	:	<u>41/30 - EF 55%</u>
IVS / LVPW / D	:	<u>12.5/12 - Concentric LMH</u>
IVS	:	<u>Intact</u>
IAS	:	
RA	:	<u>2</u>
RV	:	
PA	:	
PERICARDIUM	:	<u>n</u>
VEL	:	PEAK MEAN
M/S	:	Gradient mm Hg Gradient mm Hg
MITRAL	:	<u>0.9/1.0</u>
AORTIC	:	<u>2.4</u>
PULMONARY	:	<u>1.1</u>
COLOUR DOPPLER	:	<u>mixed MR/TR</u>
RSVP	:	<u>28-5</u>

CONCLUSION : Concentric LMH; Reduced LV Compliance; LV for ~~stop~~ STOP TOBACCO/BREACQ/TMT

