



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 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	MITTALBEN RAMESHBHAI PATEL
DATE OF BIRTH	25-02-1995
PROPOSED DATE OF HEALTH CHECK UP FOR EMPLOYEE	10-02-2024
SPOUSE	
BOOKING REFERENCE NO.	23M125721100086886S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. PATEL VIPULKUMAR NARESHBHAI
EMPLOYEE EC NO.	125721
EMPLOYEE DESIGNATION	JOINT MANAGER
EMPLOYEE PLACE OF WORK	CHADA
EMPLOYEE BIRTHDATE	05-01-1993

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 **01-02-2024** 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.

Wishful of your co-operation in this regard.

Yours faithfully,

:/-

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))



Vipul Patel <vipul.mech1993@gmail.com>

Health Check up Booking Request(bobE7305), Beneficiary Code-137205

Mediwheel <wellness@mediwheel.in>
To: <vipul.mech1993@gmail.com>
Cc: <customercare@mediwheel.in>

Thu, 1 Feb at 2:25 PM



011-41195959

Dear M.R. PATEL VIPULKUMAR NARESHBHAI,

We have received your booking request for the following health checkup, please upload HRM Letter as soon as possible.

Booking Date : 01-02-2024

User Package Name : Mediwheel Full Body Health Checkup Male Below 40

Hospital Package Name : Mediwheel Full Body Health Checkup Male Below 40

Health Check Code : PKG10000474

Name of Diagnostic/Hospital : Aashka Multispeciality Hospital

Address of Diagnostic/Hospital- : Between Sargassan & Reliance Cross Road, Gandhinagar -0382421

Appointment Date : 10-02-2024

Preferred Time : 8:30am

Member Information		
Booked Member Name	Age	Gender
MR. PATEL VIPULKUMAR NARESHBHAI	31 year	Male

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

- Stool Test
- Thyroid Profile
- ESR

- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile

Tests included in
this Package :

Thanks,
Mediwheel Team

[Terms & Conditions](#)

[Click here](#)

जरीकती प्राधिकारी
Issuing Authority



Employee Code No.

125721

कर्मचारी कोड नं.

Name

Vipulkumar Nareshbhai Patel

नाम

बँक ऑफ बरोडा
Bank of Baroda



धारक के हस्ताक्षर
Signature of Holder


Vmpatel.





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**
HOSPITAL



Name :- Nitul ben Patel,

Age: 29/F

Date: 10/2/24

note :- Skin +
ulcers +

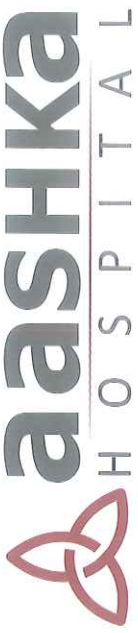
→ Non. gingivitis Recurrent

→ Gen. attrition present

d
Seyen

Aashka Hospitals Ltd.

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Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



DR. PRERAK TRIVEDI
M.D., IDCCM
CRITICAL CARE MEDICINE
REG.NO.G-59493

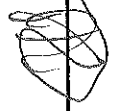
UHID:	Date: 10/2/24	Time: 8 PM
Patient Name:	Prithvi Patel	
Age / Sex:	24	LMP:
History:		
C/C/O:		
Allergy History:	Addiction: -	
Nutritional Screening:	Well-Nourished / Malnourished / Obese	
Vitals & Examination:		
Temperature:	37.8	
Pulse:	88/Min	
BP:	120/78	
SPO2:	98%	
Provisional Diagnosis:		

Advice:

NSZ

Rx

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

Insulin Scale	RBS-	hourly	Diet Advice:
< 150 -	300-350 -		
150-200 -	350-400 -		Follow-up:
200-250 -	400-450 -		Sign:
250-300 -	> 450 -		

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www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



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

UHID:	Date: 10-02-24	Time:
Patient Name: <i>mitul</i>	Age /Sex:	Height:
	Weight:	
History: <i>no.</i>		
Allergy History: <i>no.</i>		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: <i>Bel w m</i>		
Diagnosis: <i>w m</i>		

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

Eye examination:

	RIGHT			LEFT		
	S	C	A	S	C	A
D						
N						

6/6'

[Handwritten signature]

Other Advice:

Follow-up:

Consultant's Sign:



Name: seethal baaen Age: 29 year
Rayanesther

Complaints:

noneen -
white discharge,

No of deliveries: 1-7 uses / 00/00/00

Last Delivery: 6 months

History of abortion:

1 Sp. After 2/1200
D&C - 4 year

H/O medical conditions associated:

DM
HTN
Thyroid

MH: Recent Reg:

LMP: 10/1/24

P/A:

P/S: 1 CX (W) diag (PP)

P/V:

Sample:-

Vagina
Cervix

Doctors Sign:- Subinder

Mitalben

700 Contrast 226 166 05

0459 LOT D 942 #

10.02.2024 10:48:07 AM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

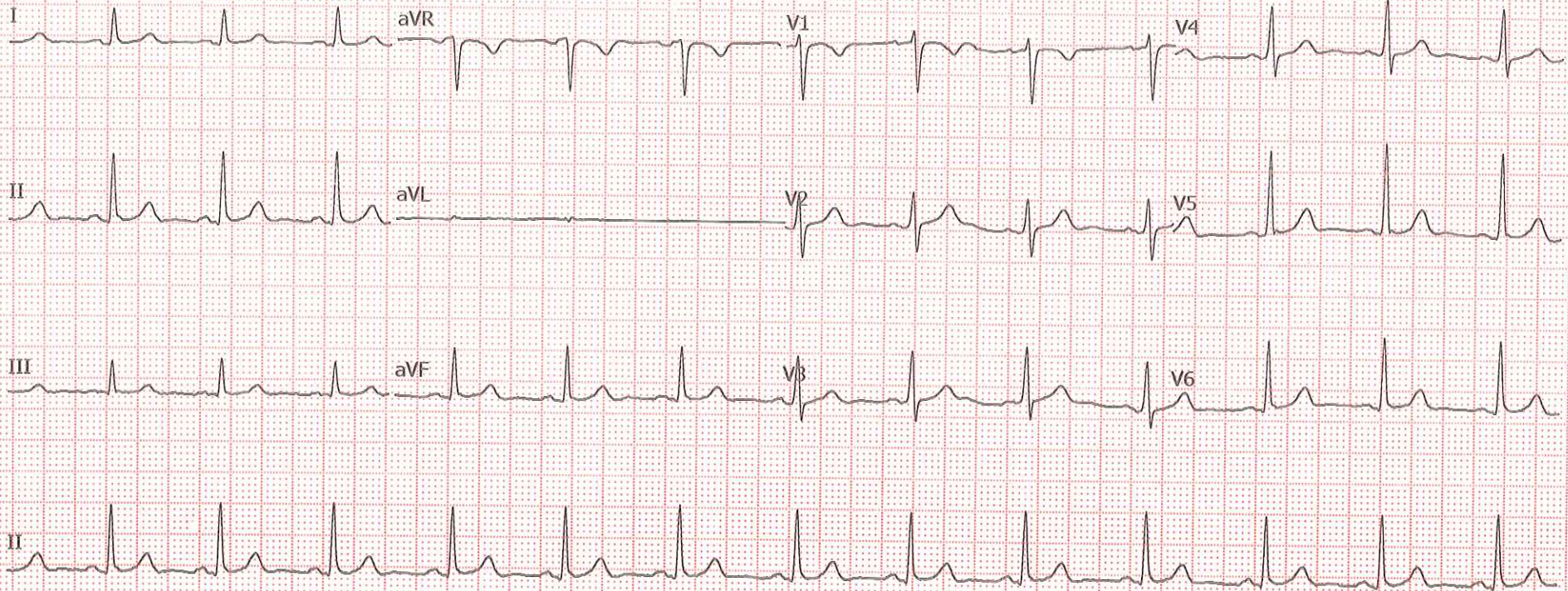
Room:

80 bpm
- / - mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 82 ms
QT / QTcBaz : 356 / 410 ms
PR : 124 ms
P : 90 ms
RR / PP : 744 / 750 ms
P / QRS / T : 35 / 58 / 57 degrees

Normal sinus rhythm
Normal ECG



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www.aashkahospitals.in
CIN: L85110GJ2012PLCO72647

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



PATIENT NAME: MITTALBEN RAMESHBHAI PATEL

GENDER/AGE: Female / 29 Years

DATE: 10/02/24

DOCTOR:

OPDNO: O224057

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



Aashka Hospitals Ltd.

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



PATIENT NAME: MITTALBEN RAMESHBHAI PATEL

GENDER/AGE: Female / 29 Years

DOCTOR:

OPDNO: O224057

DATE: 10/02/24

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 9.6 x 4.0 cms in size.

Left kidney measures about 9.9 x 4.1 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 60 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 6.2 mm. No evidence of uterine mass lesion is seen.

Bilateral adnexa appears normal.

COMMENT: Normal sonographic appearance of liver, GB, pancreas, spleen, kidneys, para aortic region, bladder and uterus.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

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



PATIENT NAME: MITTALBEN RAMESHBHAI PATEL

GENDER/AGE: Female / 29 Years

DATE: 10/02/24

DOCTOR: DR. HASIT JOSHI

OPDNO: 0224057

2D-ECHO

MITRAL VALVE	: NORMAL
AORTIC VALVE	: NORMAL
TRICUSPID VALVE	: NORMAL
PULMONARY VALVE	: NORMAL
AORTA	: 32mm
LEFT ATRIUM	: 33mm
LV Dd / Ds	: 35/23mm
IVS / LVPW / D	: 10/10mm
IVS	: INTACT
IAS	: INTACT
RA	: NORMAL
RV	: NORMAL
PA	: NORMAL
PERICARDIUM	: NORMAL
VEL	: PEAK MEAN
M/S	: Gradient mm Hg Gradient mm Hg
MITRAL	: 0.9/0.7m/s
AORTIC	: 1.2m/s
PULMONARY	: 0.9m/s
COLOUR DOPPLER	: MILD MR/TR
RVSP	: 28mmHg
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.

CARDIOLOGIST

DR. HASIT JOSHI (9825012235)





LABORATORY REPORT

Name : MITTALBEN RMAESHBHAI PATEL Sex/Age : Female/ 29 Years Case ID : 40202200254
Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
Bill. Loc. : Aashka hospital Pt. Loc :
Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Mobile No :
Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : 0224057
Report Date and Time : Acc. Remarks : Normal Ref Id2 : 023249962

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	113.16	mg/dL	70 - 100
Lipid Profile			
LDL Cholesterol	101.15	mg/dL	0.00 - 100.00

Abnormal Result(s) Summary End

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

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LABORATORY REPORT

Name : **MITTALBEN RMAESHBHAI PATEL**

Sex/Age : **Female/ 29 Years**

Case ID : **40202200254**

Ref.By : **HOSPITAL**

Dis. At :

Pt. ID : **3340044**

Bill. Loc. : **Aashka hospital**

Pt. Loc :

Reg Date and Time : **10-Feb-2024 08:35**

Sample Type : **Whole Blood EDTA**

Mobile No :

Sample Date and Time : **10-Feb-2024 08:35**

Sample Coll. By :

Ref Id1 : **o224057**

Report Date and Time : **10-Feb-2024 09:59**

Acc. Remarks : **Normal**

Ref Id2 : **o23249962**

TEST RESULTS UNIT BIOLOGICAL REF. INTERVAL REMARKS

HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin	14.1	G%	12.0 - 15.0
RBC (Electrical Impedance)	4.64	millions/cumm	3.80 - 4.80
PCV(Calc)	42.64	%	36.00 - 46.00
MCV (RBC histogram)	91.9	fL	83.00 - 101.00
MCH (Calc)	30.5	pg	27.00 - 32.00
MCHC (Calc)	33.2	gm/dL	31.50 - 34.50
RDW (RBC histogram)	13.40	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
Total WBC Count	5660	/μL	4000.00 - 10000.00	
Neutrophil	59.1	%	40.00 - 70.00	EXPECTED VALUES /μL 2000.00 - 7000.00
Lymphocyte	32.0	%	20.00 - 40.00	/μL 1000.00 - 3000.00
Eosinophil	1.0	%	1.00 - 6.00	/μL 20.00 - 500.00
Monocytes	8.0	%	2.00 - 10.00	/μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	/μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	303000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.84		0.78 - 3.53

SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Total WBC count within normal limits.
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

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



Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 10-Feb-2024 14:55



CONDITIONS OF REPORTING

All services mentioned herein are subject to limitations which are imposed by the limits of sensitivity and specificity of the diagnostic tests used. While the ability of the specimen received by the laboratory (isolated laboratory) to report a diagnosis may be dependent on the quality of the disease, but only held in driving or a diagnosis in conjunction with the clinical and laboratory studies in evaluating.

Specimens should be sent to the laboratory in a timely manner.

The final report of the test to be prepared and issued in full, without written approval of the Heuberg Suprotech Reference Laboratory.

During every analysis, the laboratory is obligated to contact the concerned laboratory personnel as suggested in the table to the laboratory to get the specimen for re-testing, re-test sampling, re-test confirmatory testing, etc.]. Heuberg Suprotech will take into account the laboratory's policy of retaining & preserving samples after testing for a stipulated period, while the retention period of the sample or fresh specimen is requested.

Each time, it is required to provide information of the referring doctor only.

The laboratory will accept only specimens received from non - Heuberg Suprotech Reference Laboratory (MSRL) locations (within the laboratory) or any other laboratory that is accredited for the specimen belongs to the patient named or identified, such verification is required to ensure the validity of the specimen.

The laboratory will report high or low results, but will not report a result for various technical reasons and this response will appear on the report. The result will be followed by detailed comment at the end of the report, it is expected that a fresh specimen will be sent to the laboratory along with information on the sample parameters.

The laboratory is certified by the Government of Karnataka, Ahmedabad is accredited by ICMR and NABL for COVID-19 testing.

Lab Reports & Advisory Services

Contact Numbers	Contact Numbers
079-40408120	079-40408120
079-40408145	079-40408145
079-40408132	079-40408132
079-40408114	079-40408114
079-40408117	079-40408117
079-40408161	079-40408161

Other Services

Contact Numbers	Contact Numbers
7698009872	7698009872
9824002011	9824002011
9824736915	9824736915
9824406721	9824406721
7698009903	7698009903

For more information, please contact us at suprotechlabs.com with attention to the concerned personnel.

Heuberg Suprotech Branches in Ahmedabad

Branch: Ahmedabad - 079-40408111, 635744307, Bapunagar - 635678001/32,
 Bapunagar - 079-40408115, 23400002, Bopal - 01717-23588162, Gota - 6357244303
 Rajiv Gandhi - 9879624264

Heuberg Suprotech Collection Centers in Ahmedabad

Branch: Ahmedabad - 079-40408111, 079-2674224, Paldi - 6359900406, Naroda - 079-22604774

Heuberg Suprotech Reference Laboratories

MSD Diagnostics Private Limited, Pimpri,
 Mumbai, Maharashtra - 411018
 Heuberg Suprotech Reference Laboratory & Research Centre Pvt. Ltd.
 Heuberg Suprotech Reference Laboratory & Research Centre Pvt. Ltd.
 Heuberg Suprotech Reference Laboratory & Research Centre Pvt. Ltd.

Legal Cities:

Heuberg Suprotech Reference Laboratories Private Limited
 Heuberg Suprotech Reference Laboratory & Research Centre Pvt. Ltd.
 Heuberg Suprotech Reference Laboratory & Research Centre Pvt. Ltd.
 Heuberg Suprotech Reference Laboratory & Research Centre Pvt. Ltd.
 Heuberg Suprotech Reference Laboratory & Research Centre Pvt. Ltd.



LABORATORY REPORT

Name : **MITTALBEN RMAESHBHAI PATEL** Sex/Age : Female/ 29 Years Case ID : 40202200254
Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
Bill. Loc. : Aashka hospital Pt. Loc. :
Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Whole Blood EDTA Mobile No :
Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : o224057
Report Date and Time : 10-Feb-2024 10:39 Acc. Remarks : Normal Ref Id2 : o23249962

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

ESR 08 mm after 1hr 3 - 20

Westergren Method

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

Dr. Shreya Shah
M.D. (Pathologist)





LABORATORY REPORT



Name : **MITTALBEN RMAESHBHAI PATEL** Sex/Age : Female/ 29 Years Case ID : 40202200254
Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
Bill. Loc. : Aashka hospital Pt. Loc. :
Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Whole Blood EDTA Mobile No :
Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : o224057
Report Date and Time : 10-Feb-2024 09:12 Acc. Remarks : Normal Ref Id2 : o23249962

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS
HAEMATOLOGY INVESTIGATIONS
BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology)
(Both Forward and Reverse Group)

ABO Type : O
Rh Type : POSITIVE

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

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name : MITTALBEN RMAESHBHAI PATEL

Sex/Age : Female/ 29 Years Case ID : 40202200254

Ref.By : HOSPITAL

Dis. At :

Pt. ID : 3340044

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Spot Urine

Mobile No :

Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By :

Ref Id1 : 0224057

Report Date and Time : 10-Feb-2024 09:45 Acc. Remarks : Normal

Ref Id2 : 023249962

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

Flowcytometric Examination By Sysmex UF-5000

Leucocyte Nil /HPF Nil

Red Blood Cell Nil /HPF Nil

Epithelial Cell Present + /HPF Present(+)

Bacteria Nil /µL Nil

Yeast Nil /µL Nil

Cast Nil /LPF Nil

Crystals Nil /HPF Nil

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



Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : **MITTALBEN RMAESHBHAI PATEL** Sex/Age : Female/ 29 Years Case ID : 40202200254
 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Spot Urine Mobile No :
 Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : o224057
 Report Date and Time : 10-Feb-2024 09:45 Acc. Remarks : Normal Ref Id2 : o23249962

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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LABORATORY REPORT



Name : **MITTALBEN RMAESHBHAI PATEL** Sex/Age : Female/ 29 Years Case ID : 40202200254
Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Plasma Fluoride F Mobile No :
Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : o224057
Report Date and Time : 10-Feb-2024 10:39 Acc. Remarks : Normal Ref Id2 : o23249962

TEST

RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

H 113.16 mg/dL 70 - 100

Plasma Glucose - F
Photometric, Hexokinase

Reference range has been changed as per recent guidelines of ISPAD 2018.
<100 mg/dL : Normal level
100-<126 mg/dL: Impaired fasting glucoseeer guidelines
>=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

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



Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name : **MITTALBEN RMAESHBHAI PATEL** Sex/Age : Female/ 29 Years Case ID : 40202200254
 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Serum Mobile No :
 Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : 0224057
 Report Date and Time : 10-Feb-2024 14:19 Acc. Remarks : Normal Ref Id2 : 023249962

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-PGD</i>	187.08	mg/dL	110 - 200
HDL Cholesterol	71.9	mg/dL	48 - 77
Triglyceride <i>Glycerol Phosphate Oxidase</i>	70.15	mg/dL	<150
VLDL <i>Calculated</i>	14.03	mg/dL	10 - 40
Chol/HDL <i>Calculated</i>	2.60		0 - 4.1
LDL Cholesterol <i>Calculated</i>	H 101.15	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
High 160-189			

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



Dr. Shreya Shah
M.D. (Pathologist)

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 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Serum Mobile No :
 Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : 0224057
 Report Date and Time : 10-Feb-2024 14:32 Acc. Remarks : Normal Ref Id2 : 023249962

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with P5P</i>	16.63	U/L	14 - 59	
S.G.O.T. <i>UV with P5P</i>	15.04	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	114.5	U/L	46 - 116	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	16.20	U/L	0 - 38	
Proteins (Total) <i>Colorimetric, Biuret</i>	7.77	gm/dL	6.40 - 8.30	
Albumin <i>Bromocresol purple</i>	4.79	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.98	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.6		1.0 - 2.1	
Bilirubin Total <i>Photometry</i>	0.56	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <i>Diazotization reaction</i>	0.31	mg/dL	0 - 0.50	
Bilirubin Unconjugated <i>Calculated</i>	0.25	mg/dL	0 - 0.8	

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LABORATORY REPORT



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 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Serum Mobile No :
 Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : o224057
 Report Date and Time : 10-Feb-2024 14:18 Acc. Remarks : Normal Ref Id2 : o23249962

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <i>GLDH</i>	18.5	mg/dL	7.00 - 18.70	
Creatinine	0.67	mg/dL	0.50 - 1.50	
Uric Acid <i>Uricase</i>	3.35	mg/dL	2.6 - 6.2	

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



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LABORATORY REPORT

Name : **MITTALBEN RMAESHBHAI PATEL** Sex/Age : Female/ 29 Years Case ID : 40202200254
 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Whole Blood EDTA Mobile No :
 Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : o224057
 Report Date and Time : 10-Feb-2024 09:17 Acc. Remarks : Normal Ref Id2 : o23249962

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Glycated Haemoglobin Estimation

HbA1C 4.97 % of total Hb <5.7: Normal
 5.7-6.4: Prediabetes
 >=6.5: Diabetes

Estimated Avg Glucose (3 Mths) 95.94 mg/dL Not available
Calculated

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_{1c}. 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

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Ref.By : HOSPITAL **Dis. At :** **Pt. ID :** 3340044
Bill. Loc. : Aashka hospital **Pt. Loc. :** **Mobile No. :** **Ref Id1 :** o224057
Reg Date and Time : 10-Feb-2024 08:35 **Sample Type :** Serum **Ref Id2 :** o23249962
Sample Date and Time : 10-Feb-2024 08:35 **Sample Coll. By :** **Acc. Remarks :** Normal
Report Date and Time : 10-Feb-2024 10:23

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Thyroid Function Test

Triiodothyronine (T3)	87.13	ng/dL	70 - 204	
Thyroxine (T4) <i>C/M/A</i>	6.67	ng/dL	4.87 - 11.72	
TSH <i>C/M/A</i>	2.87	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 concentration (>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
 Second trimester
 Third trimester

Reference range (microIU/ml)

0.24 - 2.00
 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

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Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Feb-2024 08:35	Sample Type : Serum	Mobile No :
Sample Date and Time : 10-Feb-2024 08:35	Sample Coll. By :	Ref Id1 : o224057
Report Date and Time : 10-Feb-2024 10:23	Acc. Remarks : Normal	Ref Id2 : o23249962

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. Reference range (microIU/ml) 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 Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

Pending Services
Blood Glucose Fasting & Postprandial
Liquid Base Cytology

----- 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.

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Ref.By : HOSPITAL Dis. At : Pt. ID : 3340044
Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 08:35 Sample Type : Plasma Fluoride F Mobile No :
Sample Date and Time : 10-Feb-2024 08:35 Sample Coll. By : Ref Id1 : 0224057
Report Date and Time : 10-Feb-2024 10:39 Acc. Remarks : Normal Ref Id2 : 023249962

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F <i>Photometric, Hexokinase</i>	H	113.16	mg/dL	70 - 100
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Reference range has been changed as per recent guidelines of ISPAD 2018.

- <100 mg/dL : Normal level
- 100-<126 mg/dL: Impaired fasting glucose level
- >=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Pending Services
Blood Glucose Fasting & Postprandial
Liquid Base Cytology

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

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