



Asarfi Hospital Limited.

Baramuri, P.O.- Bishunpur Polytechnic, Dhanbad (Jharkhand)

Phone : 03262295147 Fax : 08817844529

Email: asarfihospital@hotmail.com



Medi Wheel Full Body Health Checkup

Bill No: AHL/Medi Wheel/2024/48

Bill Date : 16.01.2024

TIN NO. 20861605701

Patient Details

Registration no :MAY22-14777

Patient Name : MR.DHARMENDRA KUMAR

Gender : MALE

Age : 48 Yrs

Mobile No : 9936086866

Address : HIRAK ROAD,DHANBAD, JHARKHAND -828127

Sl.No.	Service(S) Name	Rate	Quantity	Discount	Total
1	Medi Wheel Full Body Health Checkup Above 40 Years (Package)	1800.00	1	0.00	2100.00
				Total Rs.	2100.00
(Rupees Two Thousand One Hundred Only)			Net Amount.	2100.00	
Prepared By :			Ms. Tamanna		



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 DHARMENDRA
EC NO.	166464
DESIGNATION	BRANCH HEAD
PLACE OF WORK	DHANBAD, BANK MORE
BIRTHDATE	15-10-1975
PROPOSED DATE OF HEALTH CHECKUP	07-01-2024
BOOKING REFERENCE NO.	23M166464100081608E

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 **02-01-2024** 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 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))



Bank of Baroda
Bank of Baroda

बैंक मोड़ धनबाद शहरा,
श्री लक्ष्मी कॉम्प्लेक्स, झरिया रोड,
बैंक मोड़, धनबाद - 826001 (झारखण्ड)

Bank More, Dhanbad Branch :
Shree Laxmi Complex, Jharia Road,
Bank More, Dhanbad - 826001 (Jh.)


धर्मनंद कुमार
मुख्य प्रबंधक

Dharmendra Kumar
Chief Manager



Tel. : 0326-2300227 / 2303151
Mob.: 8114595917
Email : vjmjha@bankofbaroda.com
Website : www.bankofbaroda.com



भारत सरकार
Government of India



Dharmendra Kumar
Date of Birth/DOB: 15/10/1975
Male/ MALE



2279 8589 5363
VID: 9136 1441 8535 1810

मेरा आधार, मेरी पहचान

भारत सरकार
Unique Identification Authority of India



Address:
C/O Ram Laxhan Prasad, vijaya bank
(now bob), 240, g t road east, asansol,
Asansol (m Corp), Bardhaman,
West Bengal - 713303



2279 8589 5363
VID: 9136 1441 8535 1810

QR Code with Photograph





OUT PATIENT DEPARTMENT

असर्फी हॉस्पिटल

सबके लिए स्वास्थ्य

Mediwheel

Department of General Medicine

Regd. No. : MAY22-14777
 Patient Name : MR. SHARMENDRA KUMAR
 Age/Sex : 48 Y 2 M 0 D / Male
 Address : HIRAK ROAD, Dhanbad - 826127, JHARKHAND,
 Doctor : Dr. Sumant Kr. MD, Medicine

Visit : OPD/60124/179217
 Mobile : 9936086866
 Date : 6-Jan-2024 2:16 pm
 OPD Timing :
 Referred By :

Allergies :
 Height : Ft In Temp. : C SPO2 : 97 %
 Weight : 68.4 Kg Pulse : 103 BPM B.P. : 120/90 mm/Hg

History and complaints :

→ Family line grade I
 ⇒ Dyslipidemia
 ⇒ Elevated FBG

Examination:

o HbA1c 6.9 %

Diagnosis:

o FBG 115 mg/dl

Investigations:

Medicines Prescribed:

B

- Repeat FBS / PPBS
 HRAIL / Fats Lipid
 after 3 mo

- cap Evalea plus
 1 BD x Sweet
 after food

- T. M. cap 100 x
1 time

Follow up: Days Advice (Diet/ Lifestyle / Rehab)
 Date : - Diet high carb
 Time : - 1st meal morning
 - or avoid junk
 - with medical exam
 34-45 mg

Signature of Doctor

*This document is not valid for medico-legal purposes.

Department of Dental Sci. & Maxillo Facial Surgery

Mediwheel

Regd. No. : MAY22-14777
 Patient Name : MR. DHARMENDRA KUMAR
 Age/Sex : 48 Y 2 M 0 D / Male
 Address : HIRAK ROAD , Dhanbad - 828127 , JHARKHAND ,
 Doctor : Dr. Urmi Agarwal MDS (Dental Surgeon)
 Visit : OPD/60124/179001
 Mobile : 9936086866
 Date : 6-Jan-2024 10:43 am
 OPD Timing :
 Referred By :

Allergies :
 Height : Ft In Temp. : C SPO2 : %
 Weight : Kg Pulse : BPM B.P. : mm/Hg

History and complaints :

Pt came for general dental checkup.

Examination:

Diagnosis:

① Missing ant. I.G.

② I.C. - vit - H+

Investigations:

Medicines Prescribed:

T/P - ① Scaling & Mouth
 ② Prox crown

Rs -
 ① Toothpaste Vaidaj-①

Follow up:

Days

Advice
(Diet/ Lifestyle / Rehab)

Date :

Time :

Signature of Doctor

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



48 Years
mrdhamendra kumar
Male

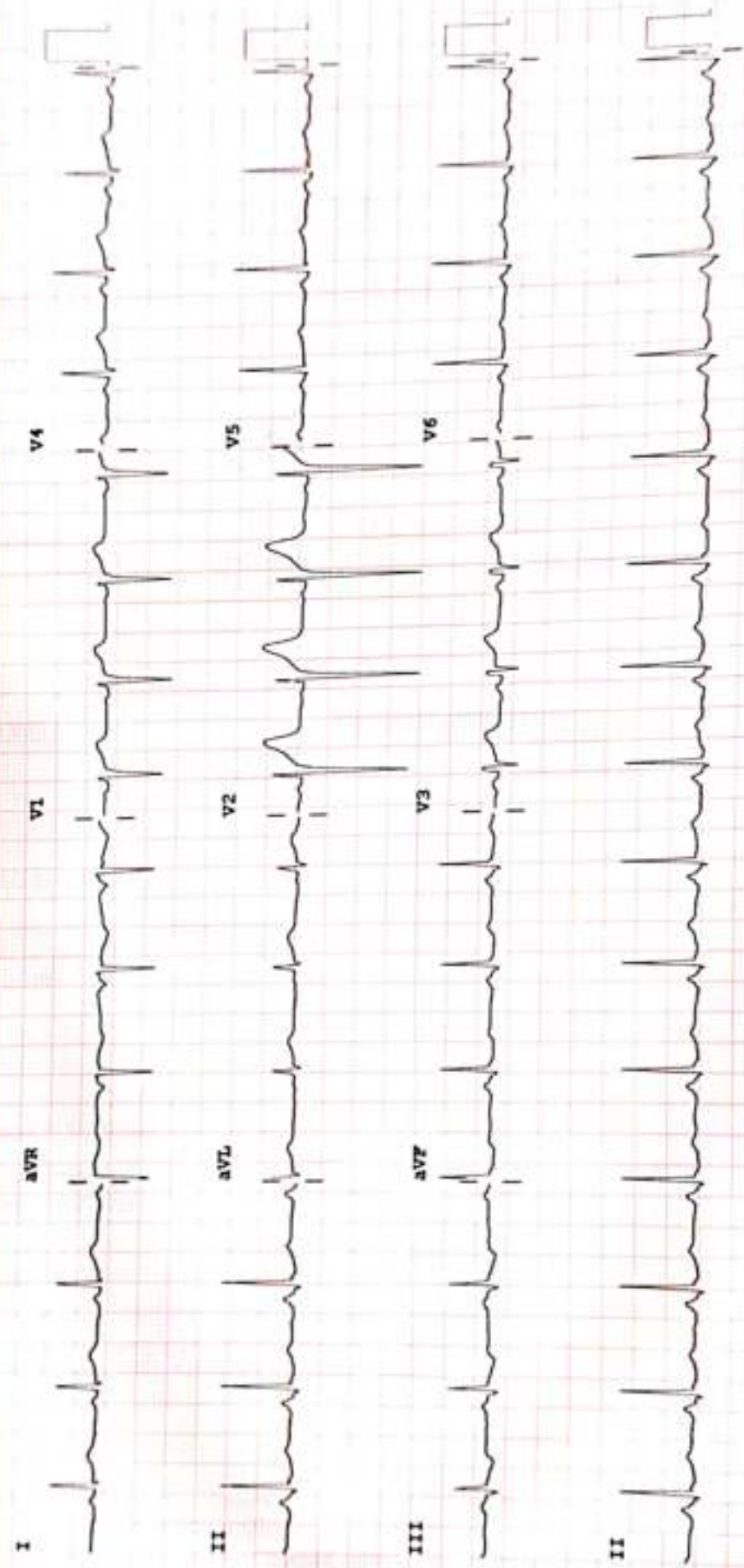


Rate 88 Sinus rhythm.....normal P axis, V-rate 50-99
PR 128 Minimal ST elevation, anterior leads.....ST >0.10mV, V1-V4

QRSD 76
QT 337
QTc 408
--AXIS--
P 60
QRS 44
T 2
12 Lead: Standard Placement

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 50- 0.50-100 Hz W

PH100B CL P?

ECHOCARDIOGRAPHY REPORT

Name: MR DHARMENDRA KUMAR

Age: 48

Sex: Male

Date: 06/01/2024

2D & M-MODE MEASUREMENTS

IVSd	1.0 cm
LVIDd	3.7 cm
LVPWd	1.2 cm
IVSs	1.3 cm
LVIDs	2.4 cm

2D & M-MODE CALCULATIONS

EDV(Teich)	59 ml
ESV(Teich)	21 ml
EF(Teich)	65 %
%FS	35 %
SV(Teich)	38 ml
LVd Mass	150.30 g
RWT	0.66

MITRAL VALVE

MV E Vel	0.74 m/s
MV DecT	209 ms
MV Dec Slope	3.5 m/s ²
MV A Vel	0.91 m/s
MV E/A Ratio	0.82
E'	0.09 m/s
E/E'	8.40

AORTIC VALVE

AV Vmax	1.38 m/s
AV maxPG	7.63 mmHg

TRICUSPID VALVE

PV Vmax	1.83 m/s
PV maxPG	13.44 mmHg

COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-60%)
- GRADE I DIASTOLIC DYSFUNCTION
- NO MR, AR, NO TR, NO PAH
- IAS, IVS INTACT
- NO CLOT, PE
- IVC NORMAL

IMPRESSION:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-60%)
- GRADE I DIASTOLIC DYSFUNCTION

DR. S.H. CHAVAN
(CONSULTANT CARDIOLOGIST)

TECH SIG



RADIOLOGY REPORT

Reg. No.	14777	Ref. Dr.	SELF
Name	MR. DHARMENDRA KUMAR	Study	USG WHOLE ABDOMEN
Age & Sex	48Y /M	Rep Date	06.01.2024

USG WHOLE ABDOMEN

- LIVER** : Liver is normal in size & shape. It appears bright in echotexture. Fat sparing areas are seen in caudate and right lobe of liver. IHBR are not dilated.
- GALL BLADDER** : GB is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- CBD** : CBD is normal in course & caliber.
- PV** : PV is normal in course & caliber.
- PANCREAS** : Pancreas is normal in size, shape & echotexture. Peripancreatic soft tissues appear normal. MPD is not dilated.
- SPLEEN** : Spleen is normal in shape, size & echotexture. It measures 9.1cm in size.
- KIDNEYS** : The right kidney measures 9.7 x 4.6cm. The left kidney measures 9.5 x 5cm. Both kidneys are normal in shape, size & position. The pelvicalyceal system is normal. Corticomedullary differentiation is maintained. No focal lesion is seen.
- URINARY BLADDER** : Urinary bladder is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- PROSTATE** : Prostate is normal in size, shape & echotexture. It measures 4.1 x 4 x 3.2cm in size (volume – 28gram).
- OTHERS** : No ascites or retroperitoneal lymphadenopathy is seen.
- IMPRESSION** :
 - Grade I diffuse fatty infiltration of liver with fat sparing areas in caudate and right lobe of liver.

Clinical correlation is suggested.




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

**FINAL REPORT**

Name : MR. DHARMENDRA KUMAR
 Reg. No. : MAY22-14777
 Age / Sex : 48 Y 2 M 0 D / Male
 Doctor : Self-Walkin
 Pat. Type : Mediwheel



Collection Time : 06-01-2024 11:16:50
 Receiving Time : 06-01-2024 11:17:37
 Reporting Time : 06-01-2024 12:45:26
 Publish Time : 06-01-2024 2:14 pm

Test Name	Result	Flag	Unit	Reference Range
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Biochemistry**Creatinine, Serum**

Method: Enzymatic

Creatinine, Serum

0.9

Machine Name: XL640

mg/dl 0.6-1.4

Uric Acid, Serum

Method: Enzymatic

Uric Acid, Serum

5.5

Machine Name: XL640

mg/dl 3.4-7.0

Blood Urea Nitrogen (BUN)

Method: Calculated

Blood Urea Nitrogen (BUN)

10.4

Machine Name: XL640

mg/dl 07-21

Fasting Blood Glucose, Plasma

Method: GOD-POD

Fasting Blood Glucose, Plasma

115.5

H

Machine Name: XL640

mg/dl 70-110

LIPID PROFILE, SERUM

Method: Spectrophotometry

Triglycerides (Enzymatic)

305.0

H

Machine Name: XL640

mg/dl Normal: <150
 Borderline-high:
 150-199 High risk
 200-499
 Very high risk >500
 <200 No risk 200-239
 Moderate
 risk >240 High risk
 0-30

Cholesterol, Total (CHOD/PAP)

243.0

H

mg/dl

VLDL Cholesterol (Calculated)

61

H

mg/dl

HDL Cholesterol (Enzymatic)

50.1

L

mg/dl

<40 High Risk ; >60 No
 Risk

DR N N SINGH
MD (PATHOLOGY)**Condition of Laboratory Testing & Reporting**

(1) Results are valid only if the test is performed on the original specimen(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Results are not valid for medico-legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Haemolysed/clotted/lipemic etc. (c) Incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab to lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297802262, Email: labasarfi@gmail.com

24 HOUR EMERGENCY

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"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



FINAL REPORT

Name : MR. DHARMENDRA KUMAR
Reg. No. : MAY22-14777
Age / Sex : 48 Y 2 M 0 D / Male
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 06-01-2024 11:16:50
Receiving Time : 06-01-2024 11:17:38
Reporting Time : 11-01-2024 15:24:20
Publish Time : 11-01-2024 3:32 pm

Test Name	Result	Flag	Unit	Reference Range
LDL Cholesterol (Calculated)	131.9	H	mg/dl	Optimum:<100 Above optimum: <130; Moderate risk:130-159; High risk:>160
Cholesterol Total : HDL Ratio (Calculated)	4.85		mg/dl	1.2-6.0
GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD				
Method : HPLC / Nephelometry				Machine Name: BIO-RAD, D-10 / MISPA
HbA1C	6.8	H	%	4.4-6.2
Estimated average glucose (eAG)	148.46		mg/dl	
Glucose, PP				
Method : GOD-POD				
Glucose, PP	125.0		mg/dl	70-140




DR N N SINGH
MD (PATHOLOGY)

Lab Note: If Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) / Sample(s). (2) Laboratory investigators are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico-legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Hemolyzed/clotted/serum etc. (c) incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the name on the test requisition form. (5) The Results of the Test may vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email: labasarfi@gmail.com.

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ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baranasi, Distt. Varanasi, Pincode 221008 B2B 130

Ph. No. : 7800300000, 780034601514



MC-8939

FINAL REPORT

Name : MR. DHARMENDRA KUMAR
 Reg. No. : MAY22-14777
 Age / Sex : 48 Y 2 M 0 D / Male
 Doctor : Self-Walkin
 Pat. Type : Mediwheel



Collection Time : 06-01-2024 11:16:50
 Receiving Time : 06-01-2024 11:17:37
 Reporting Time : 06-01-2024 12:45:26
 Publish Time : 06-01-2024 2:14 pm

Test Name	Result	Flag	Unit	Reference Range
Liver Function Test (LFT)				
Method: Spectrophotometry				
Bilirubin Total (Diazo)	0.5		mg/dl	0.3-1.2
Bilirubin Direct (Diazo)	0.2		mg/dl	0.00-0.2
Bilirubin Indirect (Calculated)	0.3		mg/dl	0.00-1.0
SGPT (IFCC without PDP)	40.0		U/L	7-50
SGOT (IFCC without PDP)	16.7		U/L	5-45
Alkaline Phosphate (PNP AMP Kinetic)	232.5		U/L	70-306
GGT (Enzymatic)	50.8		U/L	0-55
Protein Total (Biuret)	6.9		g/dl	6.4-8.3
Albumin (BCG)	4.2		g/dl	3.5-5.2
Globulin (Calculated)	2.7		g/dl	2.3-3.5
A : G Ratio (Calculated)	1.56			0.8-2.0

Machine Name: XL-640

DR N N SINGH
 MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

1. The responsibility for the test result rests on the specimen (sample) belonging to the patient named or identified and the verification of the particulars have been carried out by the sender or his/her representative at the point of generation of the said specimen(s)/ sample(s). Laboratory investigators are only to facilitate in arriving at diagnosis and should be clinically consulted. 2. All results are not valid for medico-legal purposes. (3) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate, (b) mislabeled specimen etc. (4) Improper specimen type for requested test. (5) Specimen quality is unsatisfactory. (6) There is a discrepancy between the label on the specimen container and the name on the test requisition form. (7) The Results of the Test May vary from lab and also from time to time for the same patient. (8) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (9) In case of queries or unexpected test results please call at +91 9207802282. Email: labasarf@gmail.com

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ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur P.O., Barambad 828 130

Ph. No.: 7808368888 Fax: 78083681514



MC-8920

FINAL REPORT

Name : MR. DHARMENDRA KUMAR
 Reg. No. : MAY22-14777
 Age / Sex : 48 Y 2 M 0 D / Male
 Doctor : Self-Walkin
 Pat. Type : Mediwheel



Collection Time : 06-01-2024 11:16:50
 Receiving Time : 06-01-2024 11:17:37
 Reporting Time : 06-01-2024 12:45:26
 Publish Time : 06-01-2024 2:14 pm

Test Name	Result	Flag	Unit	Reference Range
Routine Urine Examination; Urine				
Method: Microscopic				Machine Name: Microscope
Leukocytes	NIL			
Appearance	CLEAR			
Colour	STRAW			
Volume	30		ml.	
Protiens	NEGATIVE			
Glucose	NEGATIVE			
PH	6.5			
Specific Gravity	1.005			
Bilirubin	NEGATIVE			
Ketone Bodies	NEGATIVE			
Bile Salts	XX			
Bile Pigments	XX			
Nitrite	NEGATIVE			
Pus Cells	1-2		/hpf.	
Epithelial Cells	1-2		/hpf.	
R.B.C.	NIL		/hpf.	
Casts	NOT SEEN		/hpf.	

DR N N SINGH
 MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the sender or his/her representative at the point of generation of the test specimen(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) All results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Sample(s) is/are (bacteriemic etc.) (c) Informed specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9237852292. Email: labasarfi@gmail.com

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ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Barambad 828 130

Ph. No.: 7808368888, 9234681514



FINAL REPORT

Name : MR. DHARMENDRA KUMAR
 Reg. No. : MAY22-14777
 Age / Sex : 48 Y 2 M 0 D / Male
 Doctor : Self-Walkin
 Pat. Type : Mediwheel



Collection Time : 06-01-2024 11:16:50
 Receiving Time : 06-01-2024 11:17:37
 Reporting Time : 06-01-2024 12:45:26
 Publish Time : 06-01-2024 2:14 pm

Test Name	Result	Flag	Unit	Reference Range
Crystals	NOT SEEN		/hpf.	
others	NOT SEEN		.	
Protein:Creatinine Ratio; Urine				
Method: Immunoturbidimetry, Spectrophotome				
Protein	75.1		mg/L	
Creatinine	17.3		mg/dl	
PCR	4.34		mg/g	0-0.5

DR N SINGH

MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

(1) It is presumed that the (info) mentioned in the specimens' (Sample(s)) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample(s)(2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test results are not valid for medico-legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Multiple/duplicate/erroneous. (c) Specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test may vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9257602282, Email labasarfi@gmail.com

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FINAL REPORT

Name : MR. DHARMENDRA KUMAR
 Reg. No. : MAY22-14777
 Age / Sex : 48 Y 2 M 0 D / Male
 Doctor : Self-Walkin
 Pat. Type : Mediwheel



Collection Time : 06-01-2024 11:16:50
 Receiving Time : 06-01-2024 11:17:37
 Reporting Time : 08-01-2024 10:09:16
 Publish Time : 11-01-2024 10:19 am

Test Name	Result	Flag	Unit	Reference Range
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Microbiology

Culture & Sensitivity (Urine)

Method : vitek 2 compact

Organism Isolated

NO GROWTH OF ANY ORGANISM

Machine Name: vitek 2 compact




DR N N SINGH
 MD (PATHOLOGY)

Disclaimer

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) / Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Analytical/clinical/epemic etc. (c) incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297962292, Email-lab@asarfi@gmail.com

24 HOUR EMERGENCY



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Bishunbad 828 130
Ph. No.: 7808368888, 9234681514



FINAL REPORT

Name : MR. DHARMENDRA KUMAR
Reg. No. : MAY22-14777
Age / Sex : 48 Y 2 M 0 D / Male
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 06-01-2024 11:16:50
Receiving Time : 06-01-2024 11:17:37
Reporting Time : 06-01-2024 12:45:26
Publish Time : 06-01-2024 2:14 pm

Test Name	Result	Flag	Unit	Reference Range
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Haematology

BLOOD GROUP, ABO & RH TYPING

Method: Agglutination

ABO GROUP	B			0-0
RH TYPING	POSITIVE			0-0

ESR (Erythrocyte Sedimentation Rate)

Method: Westergren

ESR	11	H	mm/hr	0-10
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Machine Name: VES-MATIC 20

DR N N SINGH

MD (INTERNAL MEDICINE)

Condition of Laboratory Testing & Reporting

(1) The Laboratory shall be responsible only for the specimen(s) (sample/s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample/s (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test results are not valid for medico-legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/serum etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email labasarfi@gmail.com

24 HOUR EMERGENCY

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"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Dhambad 828 130
Ph. No.: 7808368888, 9779999999, 9934681514



FINAL REPORT



Name : MR. DHARMENDRA KUMAR
Reg. No. : MAY22-14777
Age / Sex : 45 Y 2 M 0 D / Male
Doctor : Self-Walkin
Pat. Type : Mediwheel

Collection Time : 06-01-2024 11:16:50
Receiving Time : 06-01-2024 11:17:37
Reporting Time : 06-01-2024 12:45:26
Publish Time : 06-01-2024 2:14 pm

Test Name	Result	Flag	Unit	Reference Range
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Immunology and Serology

Prostate Specific Antigen(PSA), Total, Serum

Method: ECLIA

Machine Name: VITROS ECI

Prostate Specific Antigen(PSA), Total, Serum 0.30

ng/ml 0.0-4.0

THYROID PROFILE, TOTAL, SERUM

Method: ECLIA

Machine Name: Vitros ECI

T3, Total 1.49

ng/ml 0.8-2.0

T4, Total 7.40

µg/dL 5.10-14.10

TSH (Ultrasensitive) 2.33

mIU/mL 0.27-4.2

DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

1. The results of the tests are valid only if the specimens are properly labeled and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimens/ Samples. (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Results are not valid for medico-legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Haemolysed/touched/spenic etc. (c) Incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (5) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (6) The Results of the Test May vary from lab and also from time to time for the same patient. (7) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (8) In case of queries or unexpected test results please call at +91 9297862282. Email: abasarfi@gmail.com

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RADIOLOGY REPORT

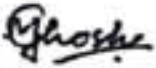
Patient Name :	MR. DHARMENDRA KUMAR	Patient ID :	14777
Modality :	DX	Sex :	M
Age :	48Y	Study :	CHEST PA
Reff. Dr. :	DR. SELF	Study Date :	06-01-2024

CHEST X-RAY

No focal lung lesion seen.
Broncho -vascular markings are prominent in both lung field.
Costophrenic angles are clear.
Hilum—dense.
Cardio-thoracic ratio & bony cage— normal.

IMPRESSION : Non specific infective changes.

Clinical correlation and further investigations suggested.



Dr. Mrinal Kanti Ghosh
MD, (Radio diagnosis)

Date 06-01-2024 Time 13-28-17



Disclaimer: - It is an online interpretation of medical imaging based on clinical data. All modern machines/ procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patient's identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose.



नयनश्री नेत्रालय

PHE

(A Unit of Asarfi Hospital Limited)

Baramuri, Bishunpur Polytechnic, Dhanbad - 828 130 (Jharkhand)

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PRESCRIPTION FOR GLASS

Reg No. 14777

Date: 06/01/24

Name: Mr. Shammendra Kumar Age: 48y Gender: M F

	RIGHT EYE				LEFT EYE			
	D SPH	D CYL	AXIS	VISION	D SPH	D CYL	AXIS	VISION
FOR DISTANCE VISION								
ADD FOR NEAR VISION								

Lens : White / Photo Chromic / Tinted/ Kryptok / Executive / Bifocal / CR 39

P.D./- m.m. For DV

m.m. For NV

Remarks : Constant use/ Distance use / Near use

Refractionist

AHLD/079/13/October/23



2/0 Routine checkups.

96P-2yr

No H/o Bulbar Head Trauma.

No H/o Systemic disease.

DV
G/G

NV
N8+2
N6P

Also.

Use Chew plans.

Review S/S.

~~13/1/21~~

