



011-41195959

Dear Manipal Hospital

We have received a booking request for the details are following. Please provide your confirmation by clicking on the yes button.

Are you sure to confirm the booking?

Name : MR. TYAGI VIVEK
Package Name : Mediwheel Full Body Health Checkup Male Below 40
Package Code : PKG10000474
Location : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment
Contact Details : 7983109374
E-mail id : vivek.tyagi@bankofbaroda.co.in
Booking Date : 13-02-2024
Appointment Date : 17-02-2024

Member Information		
Booked Member Name	Age	Gender
MR. TYAGI VIVEK	31 year	Male

Please login to your account to confirm the same. Also you mail us for confirmation

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

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

21 Tests included in this Package :

- 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

Thanks,
Mediwheel Team

You have received this mail because your e-mail ID is registered with This is a system-generated e-mail Arcofemi Healthcare Limited, please don't reply to this message.

भारतीय विशिष्ट पहचान प्राधिकरण

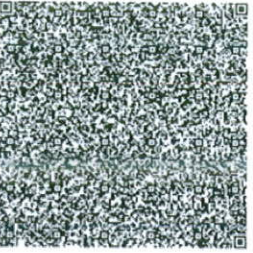
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 0000/00730/70562

Download Date : 26/03/2021
 To
 विवेक त्यागी
 Vivek Tyagi
 AVANISH TYAGI
 D 31/1
 MEENAKSHI PURAM
 MAWANA ROAD MEERUT
 Meerut
 Meerut Cantt
 Meerut Uttar Pradesh - 250001
 7417028543

Issue Date : 25/03/2021

Signature Not Verified
 Digital Signature
 AVANISH TYAGI
 Date: 2021.03.25 11:31:08



for Health
for Aadhaar

आधार क्रमांक / Your Aadhaar No. :

7059 4507 7734
 VID : 9133 7970 3047 5400

मेरा आधार, मेरी पहचान



भारत सरकार
 Government of India



विवेक त्यागी
 Vivek Tyagi
 जन्म तिथि/DOB: 12/03/1992
 पुरुष/ MALE

Download Date : 26/03/2021

Issue Date : 25/03/2021

सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन ऑथेंटिकेशन से पहचान प्रमाणित करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
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- This is electronically generated letter.

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- आधार कई सरकारी और गैर सरकारी सेवाओं को पाना आसान बनाता है।
- आधार में मोबाइल नंबर और ईमेल ID अपडेट करें।
- आधार को अपने स्मार्ट फोन पर रखें, mAadhaar App के साथ।
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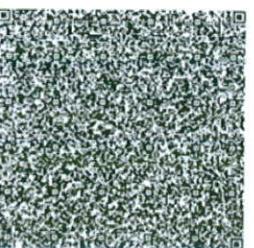


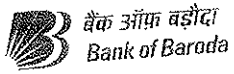
भारतीय विशिष्ट पहचान प्राधिकरण
 Unique Identification Authority of India



पता:
 अवनिश त्यागी, डी 31/1, मीनाक्षी पुरम, मावना मार्ग रोड,
 रोड, मेरु, उत्तर प्रदेश - 250001

Address:
 AVANISH TYAGI, D 31/1, MEENAKSHI
 PURAM, MAWANA ROAD MEERUT,
 Meerut, Meerut,
 Uttar Pradesh - 250001





नाम: **VIVEK TYAGI**
Name:

कर्मचारी कूट क्र. **125650**
E. C. No.



प्राधिकृत अधिकारी, मु. प्र. (सु.) अका. नं.दि.
Issuing Authority CM (S), ZO. ND

धारक के हस्ताक्षर
Signature of Holder

विवरण एवं निम्नलिखित को लौटाना
सहायक महाप्रबंधक (सुरक्षा)
एक अंक बैंक कार्पोरेट सेंटर
सी-26 जी ब्लॉक बान्द्रा कुर्ला कॉम्प्लेक्स
मुंबई 400 051, भारत
फोन : 91 22 6698 51 96 फैक्स : 91 22 2652 5747

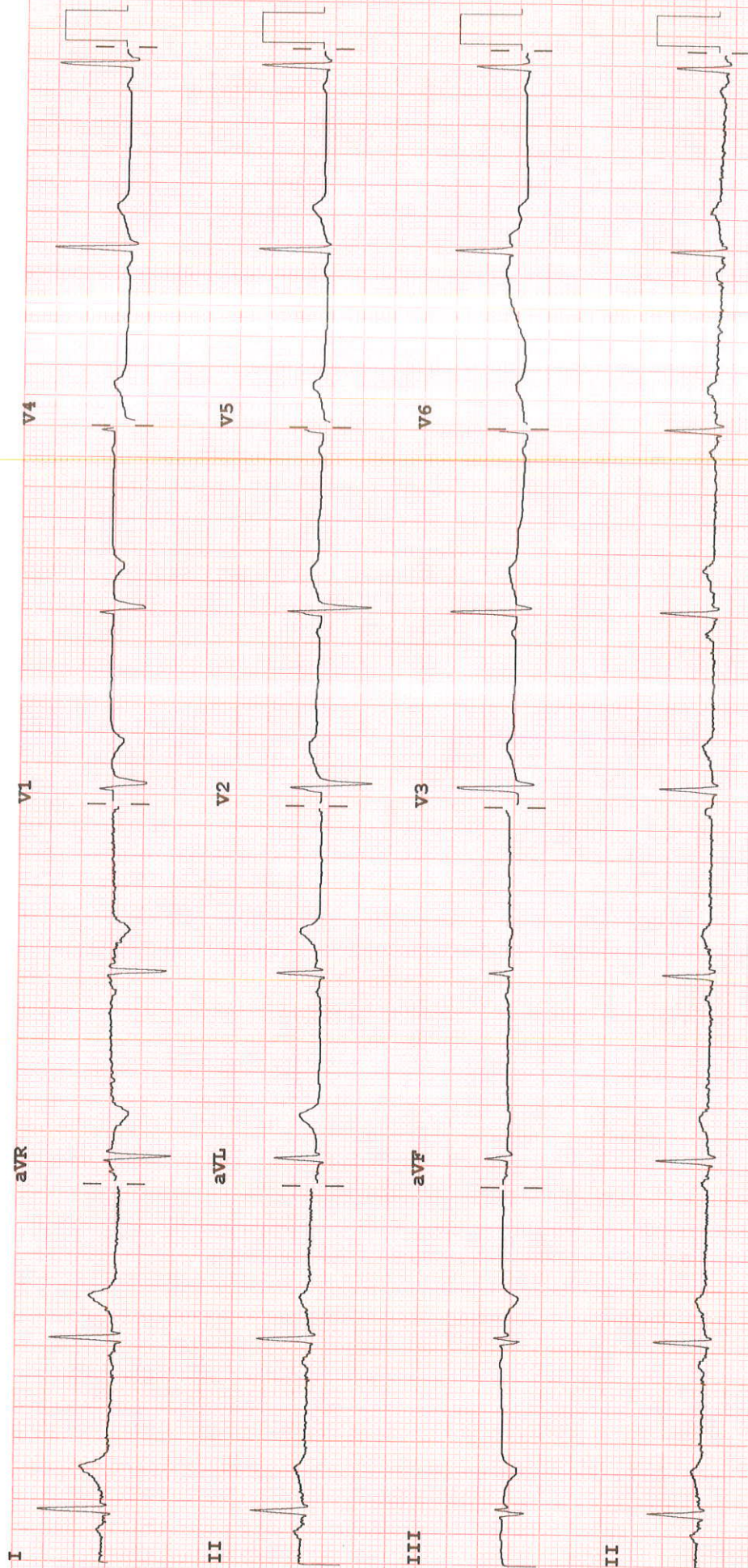
If found, please return to:
Asst. General Manager (Security)
Bank of Baroda, Baroda Corporate Center
C-26, G-Block, Bandra-Kurla Complex
Mumbai 400 051, India
Phone : 91 22 6698 5196. Fax :91 22 2652 5747

रक्त समूह / Blood Group : **AB+**
प्रत्यक्ष चिह्न **MOLE ON CHEST**
Identification Marks :

Vivek Tyagi

- BORDERLINE ECG -

Unconfirmed Diagnosis



Dev:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

PH100B CL P?

**RADIOLOGY REPORT**

NAME	MR Vivek TYAGI	STUDY DATE	17/02/2024 10:29AM
AGE / SEX	31 y / M	HOSPITAL NO.	MH010712441
ACCESSION NO.	R6898210	MODALITY	US
REPORTED ON	17/02/2024 11:05AM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS**FINDINGS**

LIVER: Liver is normal in size (measures 137 mm), shape and echotexture. Rest normal.

SPLEEN: Spleen is normal in size (measures 101 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 9.9 mm.

COMMON BILE DUCT: Appears normal in size and measures 3.5 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended with normal walls. A single non-mobile echogenic shadow without posterior acoustic shadowing is seen embedded in posterior wall of gallbladder measuring ~ 3.2 mm suggesting solitary small polyp /cholesterol granule. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 92 x 31 mm.

Left Kidney: measures 97 x 46 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 35 x 26 x 23 mm with volume 11 cc. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Small polyp / Solitary cholesterol granule embedded in posterior wall of gallbladder.

Recommend clinical correlation.



Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS
CONSULTANT RADIOLOGIST

*****End Of Report*****



RADIOLOGY REPORT

NAME	MR Vivek TYAGI	STUDY DATE	17/02/2024 10:03AM
AGE / SEX	31 y / M	HOSPITAL NO.	MH010712441
ACCESSION NO.	R6898209	MODALITY	CR
REPORTED ON	17/02/2024 10:15AM	REFERRED BY	HEALTH CHECK MGD

XR- CHEST PA VIEW

FINDINGS:

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

IMPRESSION:

No significant abnormality noted.
Recommend clinical correlation.

Dr. Monica Shekhawat MBBS, DNB
CONSULTANT RADIOLOGIST

*****End Of Report*****



LABORATORY REPORT

Name	: MR VIVEK TYAGI	Age	: 31 Yr(s) Sex :Male
Registration No	: MH010712441	Lab No	: 202402002881
Patient Episode	: H18000001810	Collection Date	: 17 Feb 2024 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 17 Feb 2024 13:48
Receiving Date	: 17 Feb 2024 09:53		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
			Specimen Type : Serum
THYROID PROFILE, Serum			
T3 - Triiodothyronine (ELFA)	0.690	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	6.640	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	7.830 #	μIU/mL	[0.250-5.000]

NOTE:

TSH stimulates the thyroid gland to produce the main thyroid hormones T3 and T4. In cases of hyperthyroidism TSH level is severely inhibited and may even be undetectable. In rare forms of high-origin hyperthyroidism, the TSH level is not reduced, since the negative-feedback control of the thyroid hormones has no effect.

In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low.

The TSH assay aids in diagnosing thyroid or hypophysial disorders.

The T4 assay aids in assessing thyroid function, which is characterized by a decrease in thyroxine levels in patients with hypothyroidism and an increase in patients with hyperthyroidism.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.



LABORATORY REPORT

Name	: MR VIVEK TYAGI	Age	: 31 Yr(s) Sex :Male
Registration No	: MH010712441	Lab No	: 202402002881
Patient Episode	: H18000001810	Collection Date	: 17 Feb 2024 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 17 Feb 2024 13:48
Receiving Date	: 17 Feb 2024 09:53		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL <i>Method: D P D</i>	0.63	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT <i>Method: DPD</i>	0.11	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) <i>Method: Calculation</i>	0.52	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) <i>Method: BIURET</i>	7.00	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) <i>Method: BCG</i>	4.66	g/dl	[3.50-5.20]
GLOBULINS (SERUM) <i>Method: Calculation</i>	2.30	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO <i>Method: Calculation</i>	1.99		[1.00-2.50]
AST (SGOT) (SERUM) <i>Method: IFCC W/O P5P</i>	24.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) <i>Method: IFCC W/O P5P</i>	26.40	U/L	[17.00-63.00]
Serum Alkaline Phosphatase <i>Method: AMP BUFFER IFCC)</i>	80.0	IU/L	[32.0-91.0]
GGT	30.0	U/L	[7.0-50.0]



LABORATORY REPORT

Name : MR VIVEK TYAGI

Age : 31 Yr(s) Sex :Male

Registration No : MH010712441

Lab No : 202402002881

Patient Episode : H18000001810

Collection Date : 17 Feb 2024 09:53

Referred By : HEALTH CHECK MGD

Reporting Date : 17 Feb 2024 13:48

Receiving Date : 17 Feb 2024 09:53

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

Page 6 of 7

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

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name	: MR VIVEK TYAGI	Age	: 31 Yr(s) Sex :Male
Registration No	: MH010712441	Lab No	: 202402002882
Patient Episode	: H18000001810	Collection Date	: 17 Feb 2024 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 17 Feb 2024 13:48
Receiving Date	: 17 Feb 2024 09:53		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	93.0	mg/dl	[70.0-110.0]

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%).
Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortical insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia),
Drugs-
insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

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

Alka

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : MR VIVEK TYAGI
Registration No : MH010712441
Patient Episode : H18000001810
Referred By : HEALTH CHECK MGD
Receiving Date : 17 Feb 2024 09:53

Age : 31 Yr(s) Sex :Male
Lab No : 202402002881
Collection Date : 17 Feb 2024 09:53
Reporting Date : 17 Feb 2024 13:30

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDENCE)	5.06	millions/cumm	[4.50-5.50]
HEMOGLOBIN	15.1	g/dl	[13.0-17.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	46.8	%	[40.0-50.0]
MCV (DERIVED)	92.5	fL	[83.0-101.0]
MCH (CALCULATED)	29.8	pg	[25.0-32.0]
MCHC (CALCULATED)	32.3	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	12.4	%	[11.6-14.0]
Platelet count	179	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	12.1		
WBC COUNT (TC) (IMPEDENCE)	4.94	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	46.0	%	[40.0-80.0]
Lymphocytes	40.0	%	[20.0-40.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	7.0 #	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
ESR	13.0 #	mm/1sthour	[0.0-



LABORATORY REPORT

Name	: MR VIVEK TYAGI	Age	: 31 Yr(s) Sex :Male
Registration No	: MH010712441	Lab No	: 202402002881
Patient Episode	: H18000001810	Collection Date	: 17 Feb 2024 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 17 Feb 2024 14:26
Receiving Date	: 17 Feb 2024 09:53		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	4.9	%	[0.0-5.6]
Method: HPLC			
			As per American Diabetes Association(ADA)
			HbA1c in %
			Non diabetic adults >= 18years <5.7
			Prediabetes (At Risk)5.7-6.4
			Diagnosing Diabetes >= 6.5
Estimated Average Glucose (eAG)	94	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glyceemic control.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	5.0	(4.6-8.0)
Specific Gravity	1.015	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)



LABORATORY REPORT

Name	: MR VIVEK TYAGI	Age	: 31 Yr(s) Sex :Male
Registration No	: MH010712441	Lab No	: 202402002881
Patient Episode	: H18000001810	Collection Date	: 17 Feb 2024 10:45
Referred By	: HEALTH CHECK MGD	Reporting Date	: 17 Feb 2024 13:57
Receiving Date	: 17 Feb 2024 10:45		

CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	0-1 /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	243 #	mg/dl	[<200]
Method:Oxidase,esterase, peroxide			Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	137	mg/dl	[<150]
			Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	56.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	27	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	160.0 #	mg/dl	[<120.0]
			Near/ Borderline High:130-159 High Risk:160-189
T.Chol/HDL.Chol ratio (Calculated)	4.3		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio (Calculated)	2.9		<3 Optimal 3-4 Borderline >6 High Risk

