



Jai Prakash Singh <jaisingh263@gmail.com>

22/12/23

Fwd: Health Check up Booking Confirmed Request(UBOIE3103),Package Code-PKG10000476, Beneficiary Code-303244

1 message

rajesh kumar <rrajeshkumarsoni@gmail.com>
To: Jai Singh <jaisingh263@gmail.com>

21 December 2023 at 20:10

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>
Date: Thu, Dec 21, 2023, 16:58
Subject: Health Check up Booking Confirmed Request(UBOIE3103),Package Code-PKG10000476, Beneficiary Code-303244
To: <rrajeshkumarsoni@gmail.com>
Cc: <customercare@mediwheel.in>



011-41195959

Dear **RAJESH KUMAR**,

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 21-12-2023
Hospital Package Name : Mediwheel Full Body Health Checkup Male Above 40
Patient Package Name : MediWheel Full Body Health Checkup Male 40 To 50
Name of Diagnostic/Hospital : Aakash Hospital
Address of Diagnostic/Hospital- : 90/43 Malviya Nagar New Delhi
City : Delhi
State :
Pincode : 110017
Appointment Date : 22-12-2023
Confirmation Status : Booking Confirmed
Preferred Time : 8:30am-9:30am
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
RAJESH KUMAR	44 year	Male

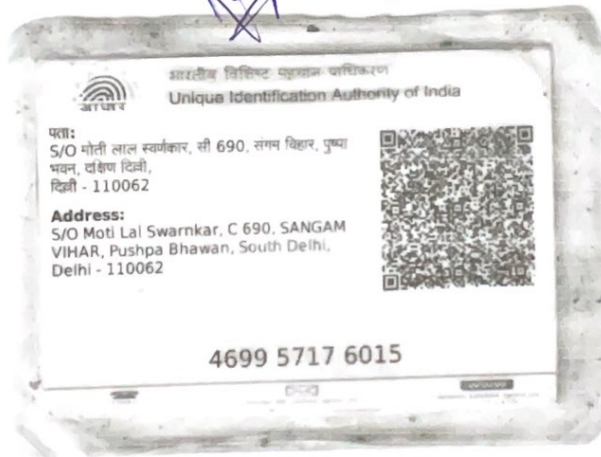
Note - Please note to not pay any amount .

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.



Key →
for medical



8699299108



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ECHOCARDIOGRAM REPORT

NAME : MR. RAJESH
AGE/SEX : 44/M
DATE : 22 .12.2023

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENT	VALUE	NORMAL RANGE
AORTIC ROOT DIAMETER	27	20 – 37 mm
AORTIC VALVE OPENING	N	15 – 26 mm
LEFT ATRIAL DIMENSION	33	19 -40 mm
RV DIMENSION	N	07 – 26 mm
RV THICKNESS	N	03 -09 mm.
LV ED DIMENSION	48	37 – 56 mm
LV ES DIMENSION	25	22-40mm
IVS THICKNESS	ED – 06 ES –11	06 – 12 mm.
LVPW THICKNESS	ED – 06 ES – 09	05 – 11 mm
IVS/LVPW RATION	N	
MITRAL VALVE	DE-N EF – N	
INDICES OF LV FUNCTION		
LVEF	60%	60 +/-5 %
FS	32%	24 -42 %



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IMAGING

- ❖ LV normal size. Good contractility. RWMA absent. No thrombus.
- ❖ LA normal in size. No clot.
- ❖ RV & RA normal size. RV contractility.
- ❖ Mitral valve leaflets normal. PML motion normal. No annular calcification present.
- ❖ Normal tricuspid & pulmonic valves.
- ❖ Aortic valve- tricuspid.
- ❖ Pericardium normal.

RWMA: ABSENT

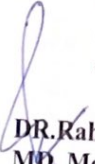
DOPPLER:-

MV	E 0.83 m/sec A 0.78 m/sec	MR	0/4
TV	0.40 m/sec	TR	0/4
AV	1.10 m/sec	AR	0/4
PV	0.85 m/sec	PR	0/4

COLOUR FLOW MAPPING: NORMAL

FINAL IMPRESSION:-

- ❖ Normal LV wall motion and systolic function.
- ❖ Normal flow across valves
- ❖ No LV clot, Vegetation, pericardial effusion.


DR. Rahul Trehan
MD, Medicine
Consultant Physician & Cardiologist

64.12.2023 1:13:20 PM

Rajesh 44/m
VP8805665-23 12-22-6

ARUNACHAL HOSPITAL

In 07 22.12.2023
TID 07 1:13:20 PM
PH 12
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Patient Name : Mr. Rajesh Kumar Age/Sex : 44 Y / Male UHID : 67678
Ref. By : Self Req. No. : 15351/OPD - 34009 Req. At : 22/12/2023
Sampling Date : 22/12/2023 15:49:00 Reporting Date : 23/12/2023 13:27:46 15:40:11

Sample type : Fluoride Plasma

Report Type : Final

BLOOD GLUCOSE (PP)

Test Name	Results	Units	Bio. Ref. Interval	Method
BLOOD SUGAR PP	181.5	mg/dL	80 - 140	GOD-PAP

Sample type : EDTA Whole Blood

Report Type : Final

BLOOD GROUP

Test Name	Results	Units	Bio. Ref. Interval	Method
Blood Group	"B"			Slide Method
RH TYPING	Negative			Haemagglutination

Sample type : Fluoride Plasma

Report Type : Final

BLOOD GLUCOSE FASTING (FBS)

Test Name	Results	Units	Bio. Ref. Interval	Method
BLOOD SUGAR FASTING	170.2	mg/dL	70 - 110	GOD-PAP

Sample type : SERUM

Report Type : Final

LIPID PROFILE

Test Name	Results	Units	Bio. Ref. Interval	Method
Total Cholesterol	171	mg/dL	0 - 220	CHOD-PAP
Triglycerides	77.5	mg/dL	60 - 165	GPO-TRINDER
HDL Cholesterol	41.9	mg/dL	35 - 80	Selective Inhibition
LDL Cholesterol	129.1	mg/dL	70 - 100	Calculated
VLDL cholesterol	15.5	mg/dL	15 - 30	Calculated
LDL/HDL	3.08		0 - 3.55	

Mr. Suresh
Created By

Approved By

Dr. Meena Metre
MBBS, MD Consultant Pathologist



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CHOLESTEROL RATIO

TOTAL CHOLESTEROL/HDL RATIO 4.08 0 - 4.97

INTERPRETATION :

NATIONAL LIPID ASSOCIATION RECOMMENDATION	TOTAL CHOLESTROL in mg/dl	TRIGLYCERIDE in mg/dl	LDL CHOLESTROL in mg/dl	NON HDL CHOLESTROL(NLA-2014)
OPTIMAL	<200	<150	<100	<130
ABOVE OPTIMAL	---	---	100-129	130-159
BORDERLINE HIGH	200 -239	150-199	130-159	160-189
HIGH	>=240	200-499	160-189	190-219
VERY HIGH	---	>=500	> =190	>=220

A lipid panel is a common blood test that healthcare providers use to monitor and screen for your risk of cardiovascular disease. The panel includes three measurements of your cholesterol levels and a measurement of your triglycerides.

SPECIAL NOTE : 12 HRS FASTING REQUIRED

LFT (LIVER FUNCTION TEST)

Test Name	Results	Units	Bio. Ref. Interval	Method
Bilirubin Total	1.16	mg/dL	0-2	DIAZO

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Direct Bilirubin	0.47	mg/dL	0 - 0.4	DIAZO
Indirect Bilirubin	0.69	mg/dL	0.2 - 1.2	Calculated
Protein Total - Serum	6.6	g/dL	6.4 - 8.3	Biuret
Albumin - Serum	4.5	g/dL	3.5 - 5.2	BCG
Globulin - Serum	2.1	g/dL	1.8 - 3.6	Calculated
A/G Ratio	2.14		0.8 - 1.2	Calculated
SGOT	49	U/L	0 - 35	IFCC without P5P
SGPT	70	IU/L	0 - 45	IFCC without P5P
Alkaline Phosphatase - Serum	117	U/L	53 - 128	AMP
GGTP	34	U/L	0 - 55	Glupa-c

INTERPRETATION:

In an asymptomatic patient, Non alcoholic fatty liver disease (NAFLD) is the most common cause of increased AST, ALT levels. NAFLD is considered as hepatic manifestation of metabolic syndrome. In most type of liver disease, ALT activity is higher than that of AST; exception may be seen in Alcoholic Hepatitis, Hepatic Cirrhosis, and Liver neoplasia. In known cases of Chronic Liver disease due to Viral Hepatitis B & C, Alcoholic liver disease or NAFLD, Enhanced liver fibrosis (ELF) test may be used to evaluate liver fibrosis. In a patient with Chronic Liver disease, AFP and Des-gamma carboxyprothrombin (DCP)/PIVKA II can be used to assess risk for development of Hepatocellular Carcinoma.

KFT (KIDNEY FUCTION TEST)

Test Name	Results	Units	Bio. Ref. Interval	Method
Blood Urea	16.7	mg/dL	19 - 45	Urease
Creatinine - Serum	0.76	mg/dL	0.7 - 1.3	Enzymatic GLDH
Uric Acid - Serum	5.1	mg/dL	3.5 - 7.2	Uricase
Blood Urea Nitrogen (BUN)	7.8	mg/dL	6 - 20	Calculated

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URINE SUGER PP (+) Negative MANUAL

Sample type : EDTA Whole Blood

Report Type : Final

COMPLETE HAEMOGRAM

Test Name	Results	Units	Bio. Ref. Interval	Method
Haemoglobin	15.0	gm/dL	13.2 - 18	Calorimetric Method
TLC	4200	/CUMM	4000 - 11000	Impedence
Differential Leucocyte Count(DLC)				
Neutrophils	70	%	40 - 75	Microscopy
Lymphocytes	26	%	20 - 45	Microscopy
Eosinophils	02	%	1 - 6	Microscopy
Monocytes	02	%	2 - 10	Microscopy
Basophils	00	%	0 - 3	Microscopy
RBC COUNT	5.15	millions/cumm	4.5 - 5.5	Microscopy
PCV (Haematocrit)	45.8	%	40 - 50	RBC PULSE HEIGHT DETECTION
MCV	88.9	gm/dL	76 - 96	Calculated
MCH	29.2	Picogram	27 - 32	Calculated
MCHC	32.8	gm/dL	31.5 - 34.3	Calculated
Platelet Count	1.57	Lakh/cmm	1.5 - 4	AUTOMATED IMPEDANCE
RDW CV	13.2	%	12 - 15	Histogram
ESR	15	mm H Hr.	0 - 20	Westergren

Sample type : URINE

Report Type : Final

URINE SUGAR FASTING

Test Name	Results	Units	Bio. Ref. Interval	Method
URINE SUGAR FASTING	Negative		Negative	

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URINE ROUTINE AND MICROSCOPY

Test Name	Results	Units	Bio. Ref. Interval	Method
URINE PHYSICAL EXAMINATION				
Volume	20	ml		MANUAL
COLOUR/APPEARANCE	PALE YELLOW		PALE YELLOW	
Transparency	S Turbid		Clear	
pH	6.5		6 - 7.5	Manual Reagent Strip (double indicator)
Specific Gravity	1.015		1.005-1.030	Manual Reagent Strip (double indicator)
Chemical Examination				
URINE GLUCOSE	Negative		Negative	GOD POD
URINE PROTEIN	Negative		Negative	Tetrabromophenol blue
URINE KETONE BODIES/ACETONE	Negative		Negative	Sodium nitroprusside
BLOOD	Negative		Negative	Peroxidase
LEUKOCYTES	Negative		Negative	Esterase
NITRITE	Negative		Negative	Tetrahydrbenzo(h) quinolin
BILIRUBIN	Negative		Negative	Diazotized dichloraniline
UROBILINOGEN	0.9		0.2 - 1	Ehrlich reaction
MICROSCOPIC EXAMINATION				
PUS CELLS	2-4	/Hpf	0 - 9	Microscopy
RBC'S	Nil	/HPF	0 - 4	Microscopy
Epithelial Cells	3-5	/HPF	0 - 4	Microscopy

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Patient Name : Mr. Rajesh Kumar Age/Sex : 44 Y / Male UHID : 67678
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BACTERIA	Absent	-	Absent	Microscopy
CRYSTALS	Absent		Absent	Microscopy
CASTS	Absent	/LPF	Absent	Microscopy
YEAST CELL	Absent		Absent	Microscopy
OTHERS	Nil		Nil	Microscopy

Sample type: SERUM

Report Type: Final

THYROID TEST(TFT)

Test Name	Results	Units	Bio. Ref. Interval	Method
T3	0.78	ng/ml	0.8 - 2	ELFA
T4	4.99	ug/dL	5.1 - 14.1	ELFA
TSH	1.70	ulu/ml	0.25 - 5	ELFA

TSH 0.25-5µIU/ml

T3 0.61-1.63ng/ml

T4 4.68-9.36 µg/dl

Wallach's reference range for Thyroid for neonates and children

Age	TSH (µIU/ml)	TT4(µg/dl)	TT3(ng/ml)
1-4 days	1-39	11.08-21.61	0.97-7.42
1-4 wks	1.7-9.1	8.29-17.24	1.04-3.45
1-12 mon	0.8-8.2	5.93-16.38	1.04-2.47
1-5 yrs	0.7-5.7	7.33-15.04	1.04-2.66
6-10 yrs	0.7-5.7	6.40-13.33	0.91-2.40
11-15 yrs	0.7-5.7	5.54-11.78	0.84-2.14
15-18 yrs	0.7-5.7	4.21-11.86	0.78-2.0

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Patient Name : Mr. Rajesh Kumar	Age/Sex : 44 Y / Male	UHID : 67678
Ref. By : Self	Req. No. : 15351/OPD - 34009	Req. At : 22/12/2023
Sampling Date : 22/12/2023 15:49:00	Reporting Date : 23/12/2023 13:27:46	15:40:11

Pregnancy TSH T3 T4
1st Trimester 0.3 to 4.50.81 -1.907.8 -14.77
2nd Trimester 0.5 to 4.61.00-2.60 7.14-19.58
3rd Trimester 0.8 to 5.21.00-2.60 8.32-17.02

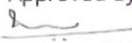
Note:

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 T3 plays an important part in maintaining euthyroidism.
TSH, T4 & T3 determination may be associated with other tests such as FT4 & FT3 assay, as well as with the clinical examination of the patient.

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

End of Report

Mr. Suresh
Created By

Approved By

Dr. Meena Metre
MBBS, MD Consultant Pathologist



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#011 40501000 (100 Lines), 9871027922
info@aakashhospital.com, www.aakashhospital.com

NAME: MR. RAJESH KUMAR	AGE: 44 Y	SEX: MALE
REF.BY: MEDICAL	DATE: 22.12.23	X RAY NO: 36182

CHEST (PA VIEW)

The diaphragmatic domes have smooth contours, a normal arched shape and occupy a normal position.

The costophrenic angles are clear.

Prominent pulmonary markings. Both lungs are otherwise normally aerated and are applied to the chest wall on all sides.

The mediastinum is centered and of normal width.

The cardiac and vascular shadows show a normal configuration.

The thoracic skeleton is symmetrically shaped and the spine is unremarkable.

The soft tissue envelope of chest shows no abnormalities.

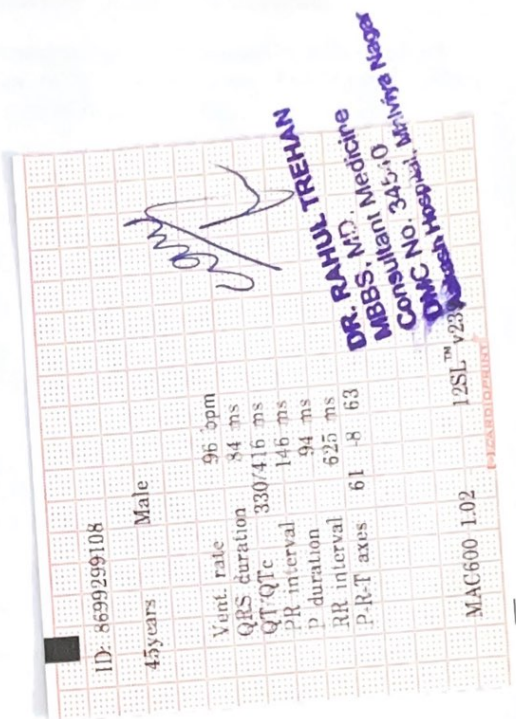
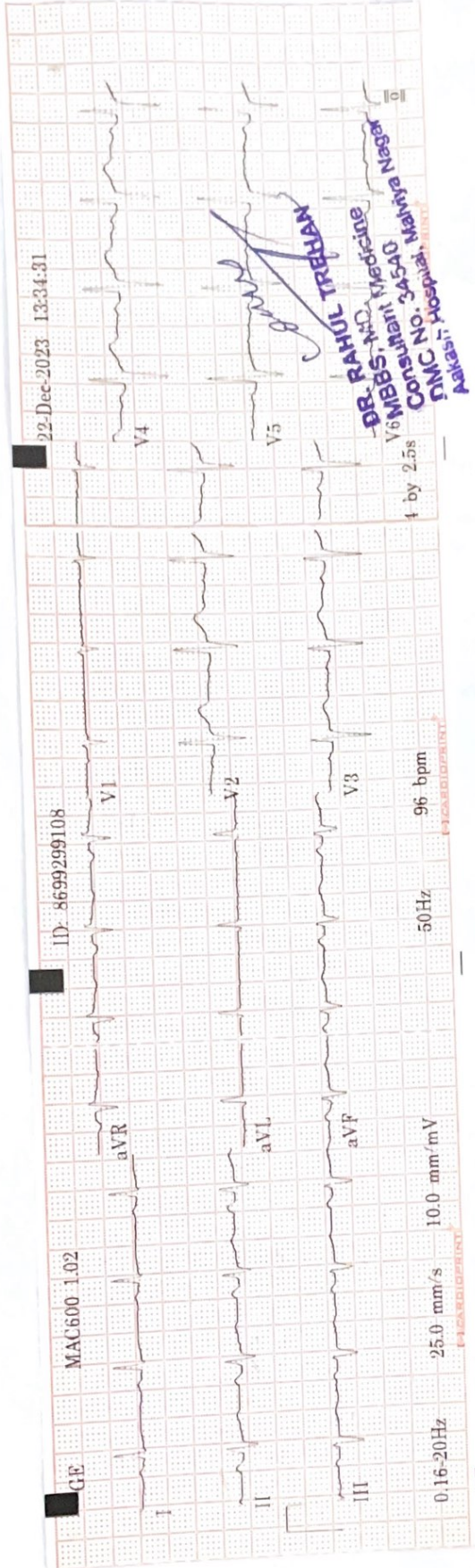
Correlate clinically.


DR. R. DUGGAL
MD(RADIOLOGY)
DMC-2595

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R

RAJESH KUMAR 44Y AKH 36182 M CHEST PA 2023-12-22
AAKASH HOSPITAL 90/43, MALVIYA NAGAR, PH-40501000



ID: 8699299108
43 years Male
Vent. rate 96 bpm
QRS duration 84 ms
QT/QTc 330/416 ms
PR interval 146 ms
P duration 94 ms
RR interval 625 ms
P-R-T axes 61 -8 63

MAC600 1.02



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NAME: MR. RAJESH	AGE: 44 YRS	SEX: MALE
REF. BY: MEDICAL	DATE: 22.12.2023	

ULTRASOUND WHOLE ABDOMEN

LIVER: - Normal sized, with slight homogeneous increase in echotexture suggestive of grade I fatty changes. No focal lesion seen. Intra hepatic biliary system not dilated. Intra hepatic veins radicles are normal.

GALL BLADDER: - Well distended. A solitary calculus 8.6 mm seen in the lumen. At least 2-3 sessile polyps of upto 2.7 mm are seen on both dependent and non dependent wall of neck and proximal body. Walls are otherwise normal. Extra hepatic biliary system is not dilated.

PANCREAS: - Normal size and echotexture. No focal lesion seen. Pancreatic duct not dilated.

SPLEEN: - Normal size and echotexture. No focal lesion seen. Spleno-portal axis is normal.

KIDNEYS: - Both kidneys normally identified in the respective renal fossae. They demonstrate normal size and cortical echotexture. Corticomedullary differentiation well made out with a normal renal parenchymal thickness. No evidence of calculus or hydronephrosis seen on both side.
Right kidney measures approx. 10.5 cm in the long axis.
Left kidney measures approx. 11.7 cm in the long axis.


URINARY BLADDER: - Moderately distended. No calculus or diverticulum is seen. Walls are normal. Both UV Junctions are normal.

SEMINAL VESICLES: - Shows normal sonographic appearances.

PROSTATE:- Is normal in size. Echotexture is normal with no focal lesion. Outline is distinct with no contour bulge.

Retroperitoneum does not show any abnormally enlarged lymph nodes. No free peritoneal fluid or pleural effusion seen. Bowel loops are unremarkable. Both iliac fossae are normal.

Correlate clinically.


DR. R. DUGGAL
MD (RADIOLOGY)
DMC-2595

AAKASH HOSPITAL, MALVIYA NAGAR

ID: VP8805665-23-12-22-7

rajesh 44/m

Exam Date: 22.12.2023 2:10:41 PM

