

भारत सरकार
Government of India

राकेश कुमार परेवा
Rakesh Kumar Parewa
जन्म तिथि/DOB: 07/01/1986
पुरुष/ MALE

Download Date: 03/12/2020

Issue Date: 13/12/2019

4923 0497 1602
VID : 9144 7184 7237 8060

मेरा आधार, मेरी पहचान

रकेश

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
S/O: भग चन्द परेवा, बॉर्ड 03, खटीको का मोहला,
मोझमबाद, बीचून, जयपुर,
राजस्थान - 303604

Address:
S/O: Bhag Chand Parewa, 0ward 03, khatiko
ka mohalla, mozamabad, bichoon, Bichoon,
Jaipur,
Rajasthan - 303604

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VID : 9144 7184 7237 8060

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Dr. PIYUSH GOYAL
MBBS, DMRD (Radiologist)
RMC No.-037041



P3 HEALTH SOLUTIONS LLP

📍 B-14, Vidhyadhar Nagar Enclave-II, Near Axis Bank
Central Spine, Vidhyadhar Nagar, Jaipur-302 023
☎ +91 141 4824885 ✉ p3healthsolutionsllp@gmail.com



General Physical Examination

Date of Examination: 09/08/24

Name: RAKESH KUMAR PAREWA Age: 38 YRS DOB: 07/01/1986 Sex: Male

Referred By: IM FINANCE

Photo ID: ADDHARCARD ID #: 1604

Ht: 175 (cm)

Wt: 63 (Kg)

Chest (Expiration): 93 (cm)

Abdomen Circumference: 79 (cm)

Blood Pressure: 125/85 mm Hg PR: 83/min RR: 18/min Temp: Alebiale

BMI 20.6

Eye Examination: R/E - GIG, NIG, NCB
L/E - GIG, NIG, NCB

Other: NO

On examination he/she appears physically and mentally fit: Yes/ No

Signature Of Examinee : [Signature]

Name of Examinee: RAKESH KUMAR PAREWA

Dr. PIYUSH GOYAL

Signature Medical Examiner: [Signature]

Name Medical Examiner: DR. PIYUSH GOYAL

RMC No.-037041



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Patient ID 1224745 Patient Mob No.8690592731

Registered On 02/08/2024 09:45:48

NAME Mr. RAKESH KUMAR PAREWA

Collected On 02/08/2024 10:22:28

Age / Sex Male 38 Yrs 6 Mon 27 Days

Authorized On 02/08/2024 16:23:04

Ref. By

Printed On 02/08/2024 16:23:14

Lab/Hosp Mr.MEDIWHEEL

HAEMOGARAM

Test Name	Value	Unit	Biological Ref Interval
JM FINANCIALS SERVICE LTD			
HAEMOGLOBIN (Hb)	16.0	g/dL	13.0 - 17.0
TOTAL LEUCOCYTE COUNT	5.40	/cumm	4.00 - 10.00
DIFFERENTIAL LEUCOCYTE COUNT			
NEUTROPHIL	52.8	%	40.0 - 80.0
LYMPHOCYTE	40.3 H	%	20.0 - 40.0
EOSINOPHIL	2.3	%	1.0 - 6.0
MONOCYTE	4.6	%	2.0 - 10.0
BASOPHIL	0.0	%	0.0 - 2.0
TOTAL RED BLOOD CELL COUNT (RBC)	5.04	$\times 10^6/\mu\text{L}$	4.50 - 5.50
HEMATOCRIT (HCT)	48.20	%	40.00 - 50.00
MEAN CORP VOLUME (MCV)	96.0	fL	83.0 - 101.0
MEAN CORP HB (MCH)	31.7	pg	27.0 - 32.0
MEAN CORP HB CONC (MCHC)	33.1	g/dL	31.5 - 34.5
PLATELET COUNT	349	$\times 10^3/\mu\text{L}$	150 - 410
RDW-CV	15.3 H	%	11.6 - 14.0

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DR. TANU RUNGTA
MD (Pathology)
RMC No. 17226



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HAEMATOLOGY

Test Name	Value	Unit	Biological Ref Interval
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Erythrocyte Sedimentation Rate (ESR)

05

mm in 1st hr

00 - 15

Method:- Westergreen

The erythrocyte sedimentation rate (ESR or sed rate) is a relatively simple, inexpensive, non-specific test that has been used for many years to help detect inflammation associated with conditions such as infections, cancers, and autoimmune diseases. ESR is said to be a non-specific test because an elevated result often indicates the presence of inflammation but does not tell the health practitioner exactly where the inflammation is in the body or what is causing it. An ESR can be affected by other conditions besides inflammation. For this reason, the ESR is typically used in conjunction with other tests, such as C-reactive protein. ESR is used to help diagnose certain specific inflammatory diseases, including temporal arteritis, systemic vasculitis and polymyalgia rheumatica. (For more on these, read the article on Vasculitis.) A significantly elevated ESR is one of the main test results used to support the diagnosis. This test may also be used to monitor disease activity and response to therapy in both of the above diseases as well as

Technologist

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(CBC): **Methodology:** TLC,DLC Fluorescent Flow cytometry, HB SLS method,TRBC,PCV,PLT Hydrodynamically focused Impedance. and MCH,MCV,MCHC,MENTZER INDEX are calculated. **InstrumentName:** Sysmex 6 part fully automatic analyzer XN-L,Japan





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Test Name	Value	Unit	Biological Ref Interval
FASTING BLOOD SUGAR (Plasma) Method:- GLUCOSE OXIDASE/PEROXIDASE	99.3	mg/dl	70.0 - 115.0
Impaired glucose tolerance (IGT)		111 - 125 mg/dL	
Diabetes Mellitus (DM)		> 126 mg/dL	

Instrument Name: HORIBA CA60 Interpretation: Elevated glucose levels (hyperglycemia) may occur with diabetes, pancreatic neoplasm, hyperthyroidism and adrenal cortical hyper-function as well as other disorders. Decreased glucose levels (hypoglycemia) may result from excessive insulin therapy or various liver diseases.

BLOOD UREA NITROGEN (BUN) Method:- Various liver diseases	13.8	mg/dl	0.0 - 23.0
SERUM CREATININE Method:- JAFFE	0.89	mg/dl	Males : 0.6-1.50 mg/dl Females : 0.6 -1.40 mg/dl
SERUM BILIRUBIN (TOTAL) Method:- DIAZOTIZED SULFANILIC	0.38	mg/dL	Infants : 0.2-8.0 mg/dL Adult - Up to - 1.2 mg/dL
SGPT Method:- IFCC	31.3	U/L	0.0 - 40.0

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Test Name	Value	Unit	Biological Ref Interval
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TEST

BLOOD GROUP ABO

"O" NEGATIVE



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Test Name	Value	Unit	Biological Ref Interval
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Urine Routine

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW
APPEARANCE	Clear		Clear

CHEMICAL EXAMINATION

REACTION(PH)	6.5		5.0 - 7.5
SPECIFIC GRAVITY	1.030		1.010 - 1.030
PROTEIN	NIL		NIL
SUGAR	NIL		NIL
BILIRUBIN	NEGATIVE		NEGATIVE
UROBILINOGEN	NORMAL		NORMAL
KETONES	NEGATIVE		NEGATIVE
NITRITE	NEGATIVE		NEGATIVE

MICROSCOPY EXAMINATION

RBC/HPF	NIL	/HPF	NIL
WBC/HPF	2-3	/HPF	2-3
EPITHELIAL CELLS	0-1	/HPF	2-3
CRYSTALS/HPF	ABSENT		ABSENT
CAST/HPF	ABSENT		ABSENT
AMORPHOUS SEDIMENT	ABSENT		ABSENT
BACTERIAL FLORA	ABSENT		ABSENT
YEAST CELL	ABSENT		ABSENT
OTHER	ABSENT		ABSENT

*** End of Report ***

Technologist
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NAME:	MR. RAKESH KUMAR PAREWA	AGE	38 YRS/M
REF.BY	MEDIWHEEL	DATE	02/08/2024

CHEST X RAY (PA VIEW)

Bilateral lung fields appear clear.

Bilateral costo-phrenic angles appear clear.

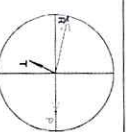
Cardiothoracic ratio is normal.

Thoracic soft tissue and skeletal system appear unremarkable.

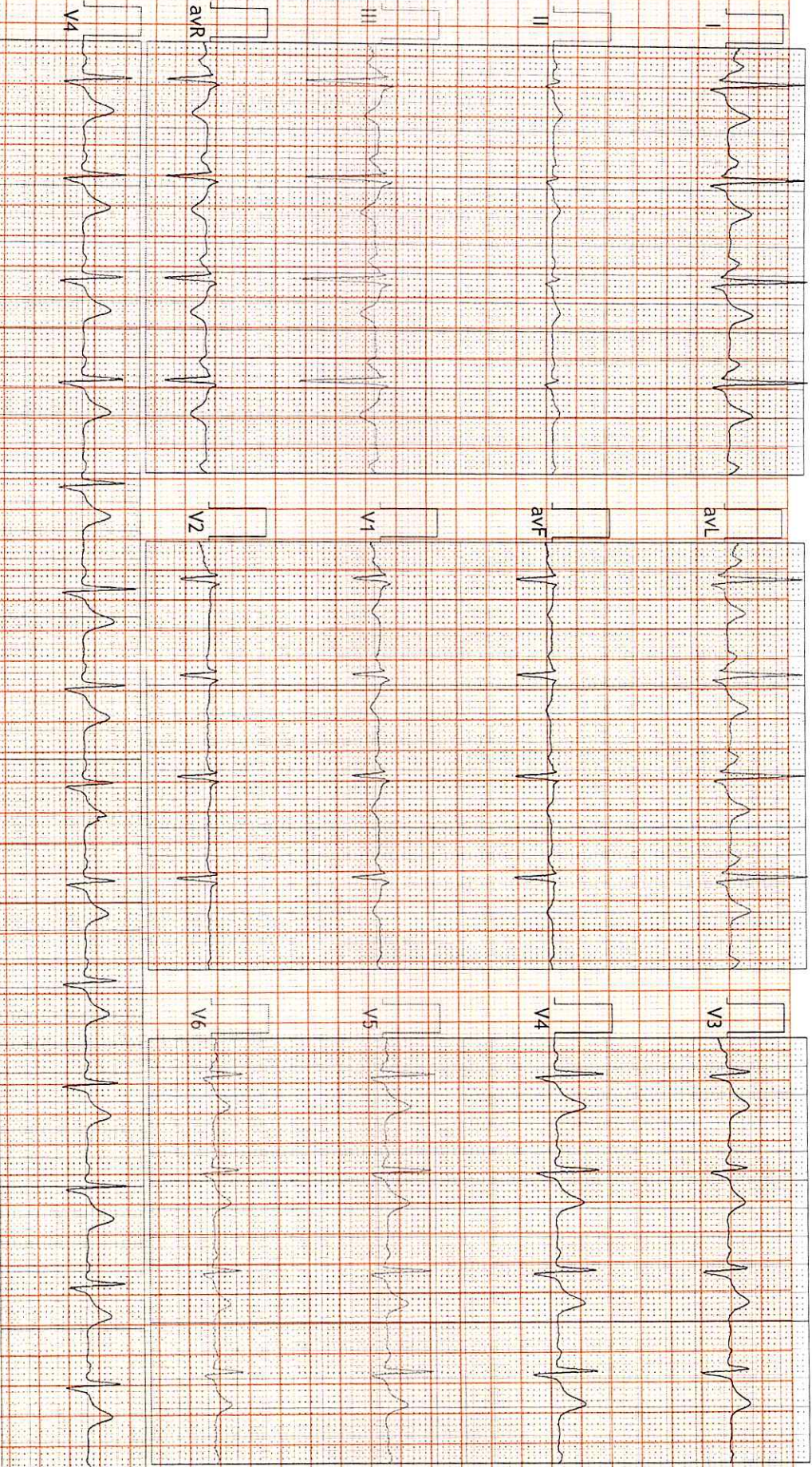
Soft tissue shadows appear normal.

IMPRESSION: No significant abnormality is detected

DR. ROHAN GAUR
M.B.B.S, M.D (Radiodiagnosis)
RMC no. 17887



PR Interval: 139 ms
QRS Duration: 190 ms
QT/QTc: 427/510ms
P-QRS-T Axis: 0 - -168 - 115 (Deg)



FINDINGS: Abnormal ECG. with Indication of Ventricular Rhythm and Right Bundle Branch Block

Vent Rate : 85 bpm; PR Interval : ms; QRS Duration: 190 ms; QT/QTc Int : 427/510 ms

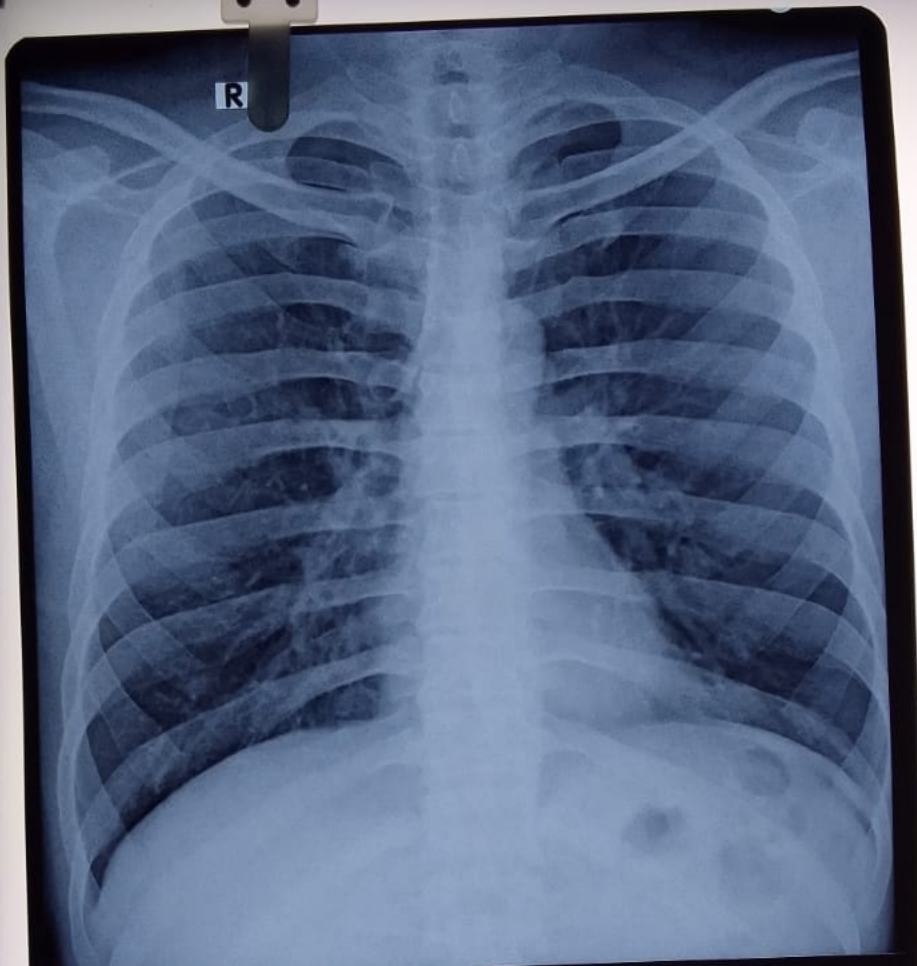
P-QRS-T axis: 0 - -168 - 115 (Deg)

Comments :

Sinus Rhythm with R inversion in lead III and aVL

Dr. Naresh Kumar M
RMC No. 35703

MBBS, DIP CARDIO (SPORTS)
Dr. Aditya Kapoor
D.E.M. (RCGP-UK)



1224745 RAKESH KUMAR PAREWA 38 YRS , MEDIWHEEL M
02.AUG.2024
MAXCARE DIAGNOSTIC (ASSOCIATES OF P3 HEALTH SOLUTIONS LLP)

