

NAME : NARENDRA K LAD

AGE / SEX: 50/M

PACKAGE NAME: Mediwheel Full Body Plus Annual Check Advance With Vitamin Male

SR NO	TEST INCLUSION	SIGNATURE OF TEST CONDUCTING EMPLOYEE
✓1	FASTING BLOOD	<i>myl</i> <i>[Signature]</i>
✓2	POST PRANDIAL BLOOD	<i>[Signature]</i>
✓3	URINE	<i>myl</i> <i>[Signature]</i>
✓4	PSA	<i>myl</i>
5	CHEST XRAY	<i>Poojesh</i>
6	ECG	<i>Anamika</i>
7	TMT	
8	ULTRASOUND ABDOMEN	
9	GENERAL CONSULTATION (PHYSICIAN , DENTAL, <u>ENT</u>)	<i>Jsr</i>
10	DIETICIAN CONSULTATION	<i>[Signature]</i>
11	POST CONSULTATION WITH ALL REPORTS WITH MD DOCTOR	
12	COMPLIMENTARY BREAKFAST INCLUDED	

9.00

11.00

[Handwritten scribbles]



Apex Superspeciality Hospitals

LT Road behind Punjab and Sind bank
Babhai Naka Borivali (w) Mumbai - 400092
Contact No.: -022-42457040

Website:-www.apexgroupofhospitals.com

Email:-medical.admin_ash@apexhospitals.in

GST No.:-27AADCG1913E2Z0



Credit Bill OP

Reg No : 140023267	Bill No : OPCRB2425/235	Payer : MEDIWHEEL(ARCOFEMI HEALTHCARE)
Patient Name : Mr. NARENDRA K LAD	Bill Date Time : 25/05/2024 8:19AM	Presc. Doctor : Dr. Apex Hospitals/NA
Gender/Age : Male/50 Yr 0 Mth 0 Days	Lab No : 3122	Referred By : Self
Contact No : 9820514223	Address : GORAI -1 C-11 PLOT NO 53 MANGUL MURTI HOUSING C H S L T D BORIVALI WEST MUM-92 , MUMBAI, MAHARASHTRA, INDIA, - 400092	

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	MEDIWHEEL FULL BODY PLUS ANNUAL CHECK ADVANCED WITH VITAMIN MALE (Dr. Apex Hospitals)	3100.00	1.00	3100.00	0.00	3100.00	0.00	3100.00
Details Of Package								
2	ECG (Dr. Apex Hospitals)							
3	STRESS TEST (TMT) (Dr. CHIRAG SHAH)							
4	DIETICIAN CHARGES (Dr. SAKSHI GUPTA)							
	OPD CONSULTATION (Dr. CHIRAG SHAH)							
5	BLOOD SUGAR F&PP (Dr. Neeraj Gujar)							
7	BUN (BLOOD UREA NITROGEN) (Dr. Neeraj Gujar)							
3	GLYCOCYLATED HEMOGLOBIN (HBA1C) (Dr. Neeraj Gujar)							
9	LIPID PROFILE SERUM (Dr. Neeraj Gujar)							
10	LIVER FUNCTION TEST (LFT) SERUM (Dr. Neeraj Gujar)							
11	PHOSPHORUS (SERUM) (Dr. Neeraj Gujar)							
12	SERUM CREATININE (Dr. Neeraj Gujar)							
13	URIC ACID (SERUM) (Dr. Neeraj Gujar)							
14	B12 VITAMIN (Dr. Neeraj Gujar)							
15	PROSTATIC SPECIFIC ANTIGEN(PSA) (Dr. Neeraj Gujar)							
16	T3 + T4 + TSH (Dr. Neeraj Gujar)							
17	URINE ROUTINE (Dr. Neeraj Gujar)							
18	COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD (Dr. Neeraj Gujar)							
19	ERYTHROCYTE SEDIMENTATION RATE (ESR) (Dr. Neeraj Gujar)							
	BLOOD GROUPING (Dr. Neeraj Gujar)							
21	VITAMIN D3 (Dr. Neeraj Gujar)							
22	VISION TEST (EYE CHECK UP) (Dr. Apex Hospitals)							
23	BMI (BOODY MASS INDEX) (Dr. Apex Hospitals)							
24	USG ABD & PELVIS MALE (Dr. SAUMIL PANDYA)							
25	X RAY CHEST PA (Dr. SAUMIL PANDYA)							

Gross Amount	3100.00
Round Off Amount	
Net Amount	3100.00
Payer Amount	3100.00
Patient Amount	0.00
Amt Received (Rs.)	0.00
Balance Amount	3100.00

Varration :

Note :- Kindly Make the Payment In the Name of Apex Superspeciality Hospitals

Hussain Shaikh

Authorised Signatory

Printed Date:25/05/2024

Printed By:hussains

Prepared By:Hussain Shaikh

Health checkup at tie-up Ctr

HealthChkUp Authorisatn letter



Union Bank of India

To,

RO - MUMBAI ANDHERI
NEW VINOD SILK MILL COMPOUND,
CHAKRAVARTY ASHOK ROAD ASHOK
NAGAR, KANDIVLI -EAST MUMBAI, - 0

The Chief Medical Officer

M/S Mediwheel
<https://mediwheel.in/signup011-41195959>(A brand name of
Arcofemi Healthcare Ltd),
Mumbai400021

Dear Sir,

Tie-up arrangement for Health Checkup under Health Checkup 50-60 Male

Shri/Smt./Kum. NARENDRA K LAD,.

P.F. No. 629092 Designation : Single Window Operator-A

Checkup for Financial Year 2023-2024 **Approved Charges Rs. 4000.00**

The above mentioned staff member of our Branch/Office desires to undergo Health Checkup at your Hospital/Centre/Clinic, under the tie-up arrangement entered into with you, by our bank.

Please send the receipt of the above payment and the relevant reports to our above address.

Thanking you,

Yours Faithfully,

(Signature of the Employee)

BRANCH MANAGER/SENIOR MANAGER

PS. : Status of the application- Sanctioned



View Worklist

Previous in Worklist

Next in Worklist

Health checkup at tie-up Ctr | HealthChkUp Authorisatn letter

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter

Employee Request for Health Checkup at Tie-up Centre/Clinic

Employee Id 629092

Name NARENDRA K LAD,, Date of Birth 07/09/1970 Gender Male

Designation Single Window Operator-A Grade CLERK

Department RO - MUMBAI ANDHERI Location MUMBAI - JUHU VILE PARLE (W)

I wish to undergo Health Checkup at M/S Mediwheel

under tie up arrangement with our bank for the FinancialYear 2023-2024

The health checkup charges payable to above Centre as per bank's agreement with them is Rs. 4000.00

Kindly make the payment to them towards their health checkup charges after deducting TDS and Service Tax as applicable.

**As bank is making payment to the above Centre/Clinic as per my request, I will undergo health checkup at above mentioned Centre only.

Submit *Date of Request 21/02/2024 Status of the application Sanctioned

Approve Decline Approved by: 550110 Senior Manager (Branch Head) Date 21/03/2024

Remarks, if declined Approved

Approver Name DAS,KALYAN

- View Worklist Previous in Worklist Next in Worklist



यूनियन बैंक
ऑफ इंडिया



Union Bank
of India



NKS

हस्ताक्षर - / Signature

Name : Narendra K. Lad

कर्मचारी क्र / Employee No: 629092

जन्मतिथि / Birth Date: 07/09/1970

रक्तग्रुप / Blood Group : A+

जारी करने का स्थान

Place of issue: MUMBAI

जारी करने का तारीख

Date of issue : 01.08.2020



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Land Line No. 022 - 42457040
Reception No. 9326787557

Tele.: 022 - 2898 6677 / 46 / 47 / 4

PHYSICIAN CONSULTATION

PRESENT COMPLAINT :

No fresh complaints

PAST MEDICAL / SURGICAL HISTORY:

Tonsilectomy done - 20-25 yrs back

GENERAL EXAMINATION:

PULSE - 82/min
BP: - 110/70 mmHg
BMI -
APETITE: - Good
THIRST: - Thirsty
STOOL: - Satisfactory
URINE: - Normal
SLEEP: - Sound
SKIN: - Normal
NAILS: - NAD
HABITAT: - Nil

SYSTEMIC EXAMINATION:

RESPIRATORY EXAMINATION: - AEBE

CARDIOVASCULAR EXAMINATION: - S1S2 are

ABDOMINAL EXAMINATION: soft, non tender

GYNACOLOGY / OBST HISTORY (FOR FEMALE): —

OPHTHAL EXAMINATION:

FAR VISION: *BLR hypermetropia*
NEAR VISION:
COLOUR VISION: *(N)*

ENT EXAMINATION:

EAR: MASTOID TUNNING FORK TEST: *(N)*
NOSE: EXT NOSE/ POST NASAL SPACE: *(N)* *MAO*
THROAT: TOUNGE/ PALATE/ TEETH: *(N)*
NECK: NODES/ THYROID/TEETH: *(N)*

DENTAL EXAMINATION:

DECAY/ CRIES IF ANY: *NO*
PLAQUE IF ANY: *NO*
GUMS: *(N)*

Chirag K. Shah
Dr. CHIRAG K. SHAH
D. M. B. B. S.
CONSULTING PHYSICIAN CARDIOLOGIST
Reg. No. 2003 / 04 / ...
PHYSICIAN NAME

PHYSICIAN SIGNATURE



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Name: Narendra Lad
age: 53 (male).

ENT Examination.

→ Ear examination:

- There is no wax, oedema or tenderness
- Hearing is good.

* Throat examination:

- tonsillectomy has been occurred before 20-25 years age.
- No swelling, tenderness or anythg.
- patient is fit and fine. on physical examination.

→ examination of Neck:

- there is no lymphadenopathy.
- No tenderness.



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25/5/24

SIB Dr. Jatin Mazrani
(M.S. of Ophthalm.),

Routine Checkup.

No Hb, DM, HTN.

Vrignl <

- OIE: BIE Conjunctiva (N)
- BIE Cornea clear
- BIE Pupil normal.
- BIE Lens (N)

Colour Vn < (N) BIE.

Fundus: BIE normal.

Ans: BIE Hypertension & Presbyopia

Adv: Use of glasses.

B
— E/d ~~Retreat~~ Optire (Can be used by anyone).
1-1-1-1 x 1 month

Dr



Diet Chart

NAME :- NARENDRA LAD

C/O- Weight Management

DIET :- FULL DIET , HIGH PROTEIN

- Early Morning:** 1 cup tea/ coffee/black coffee/ toned milk (**without sugar**) (**preferable avoid**)
- Breakfast:** 1 bowl upma/ poha/ daliya upma **OR** 2 small rava **or** moong dal idli/ 1 dosa with vegetable sambar **OR** 1 bowl oats in milk/water
- Mid-morning:** 1 fruit / **Tru sanz HP - 1 Scoop in 100ml Water**
- Lunch:** 1 bowl raw vegetable salad -
2 small roti/ 1 bhakri (jowar/Multigrain)
1 bowl bhaji / Pulse sabji (**1 Pulse needs to be added- moong, matki, soyabean, soy chunks**)
1 bowl thick dal/ 1 medium piece of chicken or fish or egg preparation in curry
1 bowl rice - (**Preferable avoid/ once a week/ optional**)
OR 1 bowl vegetable daliya khichdi with vegetables
1 bowl curd/1 glass Buttermilk
- Evening snack:** 1 cup tea/ coffee/ toned milk/1 besan chilla **OR** 1 bowl boiled sprouts **OR** 1 vegetable egg/besan omelette with chapatti **OR** 1 rava/moong chilla with curd
- Mid-evening:** 1 bowl dal **OR** vegetable soup / Chicken soup/ **Add Tru sanz Hp - 1scoop in water**
- Dinner:** 1 bowl raw vegetable salad
2 small roti/ 1 bhakri (jowar/Multigrain)
1 bowl bhaji + Pulse Sabji
1 bowl thick dal
OR 1 bowl vegetable daliya khichdi with vegetables/ Pulses Pulavo with vegetable
- Bedtime :-** 1 tsp Sesame seed

Remarks: Drink ample of fluids, upto 3 litres of water daily

Follow small frequent and regular meal pattern. Do not miss meals.

Oil usage ½ litre per month, i.e. 3 teaspoon a day. Preferably mustard oil, sesame oil or rice bran oil.

Salt usage to 3gm. i.e. ½ teaspoon a day.

Include more green leafy vegetables, fruits and pulses in the diet.

Include **calcium** rich foods like milk and milk product, nuts, seeds, etc.

Make sure you get ample of exposure to sunlight for **Vitamin D**.

Avoid red meats like mutton, pork and beef.

Avoid processed foods, refined flour products and fried food. Restrict bakery products.

Avoid all sources of extra salt like sauces, pickles, papads, chutneys, chips, etc.

Avoid all sources of simple sugars like white sugar, brown sugar honey, jaggery.

For detailed diet counselling: Consult Dietician Sakshi Gupta in OPD with prior appointment.



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Reception No. 9326787557

DEPARTMENT OF LABORATORY SCIENCES

Patient Name	Mr. NARENDRA K LAD	LabNo	3122	
UHID/IP No	140023267 / 950	Sample Date	25/05/2024 8:19AM	
Age/Gender	50 Yrs/Male	Receiving Date	25/05/2024 11:46AM	
Bed No/Ward	OPD	Report Date	25/05/2024 1:08PM	
Prescribed By	Dr. Apex Hospitals	Report Status	Final	

HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD				
Sample: W. B. EDTA				
Haemoglobin Estimation (Hb)	13.9	gm/dl	13.5 - 18.0	SLS- Hb Method
RBC Count (Red Blood Cell)	4.88	10 ⁶ /uL	4.70 - 6.00	
PCV (Haematocrit)	38.8 L	%	40.0 - 50.0	
MCV	79.51	fl	78 - 100	Calculated
MCH	28.48	pg	27 - 31	Calculated
MCHC	35.82	gm/dl	30 - 36	Calculated
RDW	12.6	%	11.0 - 16.0	Calculated
Total Leukocyte Count (TLC)	5300	cells/cu.mm	4000.0 - 10500.0	
Neutrophil %	55	%	40 - 80	
Lymphocyte %	37	%	20 - 40	
Eosinophil %	03.	%	0 - 6	
Monocytes %	05	%	1 - 12	
Basophil %	00	%	0 - 2	
Band Cells	00	%		
Absolute Neutrophil Count (ANC)	2915	/cu.mm	2000 - 7000	Calculated
Absolute Lymphocyte Count	1961	/cu.mm	1000 - 3000	Calculated
Absolute Eosinophil Count (AEC)	159	/cu.mm	20 - 500	Calculated
Absolute Monocyte Count	265	/cu.mm	200 - 1000	Calculated
Absolute Basophil Count	0.00	/cu.mm		CALCULATED
Absolute Basophil Count(Not in use)	2915 H	/cu.mm	0 - 100	Calculated
WBCs Morphology	Within normal limits.			
RBCs Morphology	Normocytic Normochromic.			
Platelet Count	296	10 ³ /uL	150 - 400	DC Detection
Platelets Morphology	Adequate on smear			
MPV	9.1	fl	7 - 12	

--End Of Report--

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MD PATHOLOGY



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HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
ERYTHROCYTE SEDIMENTATION RATE (ESR)				
Sample: W. B. EDTA				
ESR (Erythrocyte Sed.Rate)	36	mm/hr	0 * 20	Westergren

--End Of Report--

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IMMUNO-HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
BLOOD GROUPING				
Sample: W. B. EDTA				
Blood Group (ABO and Rh)	"A" Rh Positive			SLIDE METHOD

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
BLOOD SUGAR F&PP				
Sample: Fl. Plasma				
Glucose (Fasting Blood Sugar / FBS)	99.45	mg/dl	70 - 110	Glucose Oxidase,Hydrogen Peroxide
Urine Fasting Sugar	Absent		Absent	
Urine Fasting Ketone	Absent		Absent	
Blood Sugar(2 Hours PP)	117.0	mg/dl	70 - 140	Glucose Oxidase,Hydrogen Peroxide
Urine PP Sugar	SNR			
Urine PP Ketone	SNR			

Note: An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :

The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

--End Of Report--

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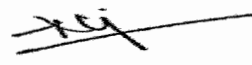
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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
BUN (BLOOD UREA NITROGEN)				
BUN - Blood Urea Nitrogen		mg/dl		
BUN - Blood Urea Nitrogen (SINGLE)	14.70	mg/dl	7 - 20	
PHOSPHORUS (SERUM)				
Sample: Serum				
Phosphorus	4.79	mg/dl	2.5 - 5.0	Phosphomolybdate Reduction
SERUM CREATININE				
Sample: Serum				
Creatinine	1.02	mg/dl	0.80 - 1.50	Jaffes
URIC ACID (SERUM)				
Sample: Serum				
Uric Acid	4.91	mm/hr	3.5 - 8.5	URICASE-PEROXIDASE

--End Of Report--


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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIPID PROFILE SERUM				
Sample: Serum				
Cholesterol-Total	168.2	mg/dl	< 200.00	Cholesterol Oxidase,Esterase,Peroxidase
Triglycerides	76.21	mg/dl	< 150	Enzymatic End point
HDL Cholesterol	44.73	mg/dl	40.00 - 60.00	Phosphotungstat
VLDL Cholesterol	15.24	mg/dl	6.00 - 38.00	Calculated Value
LDL Cholesterol	108.23 H	mg/dl	< 100.00	Calculated Value
Cholesterol Total : HDL Cholesterol Ratio	3.76		3.50 - 5.00	Calculated Value
LDL Cholesterol : HDL Cholesterol Ratio	2.42 L		2.50 - 3.50	Calculated Value

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIVER FUNCTION TEST (LFT) SERUM				
Sample: Serum				
Bilirubin Total (TBil)	0.89	mg/dl	0.30 - 1.30	Diphyline Diazonium Salt
Bilirubin Direct (Dbil)	0.36	mg/dl	0.00 - 0.50	
Bilirubin indirect	0.53	mg/dl	1 - 1	
SGPT (ALT)	17.45	U/L	5 - 40	IFCC modified
SGOT (AST)	15.71	U/L	5 - 40	IFCC modified
Protein Total	6.68	gm/dl	6.00 - 8.00	Biuret
Albumin	3.42	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	3.26	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.05		1.00 - 2.50	Calculated Value
Alkaline Phosphatase	60.66	IU/L	42 - 140	
GGTP (GAMMA GT)	16.21	IU/L	15.0 - 72.0	UV Kinetic IFCC

--End Of Report--

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Patient Name	Mr. NARENDRA K LAD	LabNo	3122	
UHID/IP No	140023267 / 950	Sample Date	25/05/2024 8:19AM	
Age/Gender	50 Yrs/Male	Receiving Date	25/05/2024 11:46AM	
Bed No/Ward	OPD	Report Date	25/05/2024 1:08PM	
Prescribed By	Dr. Apex Hospitals	Report Status	Final	

CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
URINE ROUTINE				
Sample: Urine				
PHYSICAL EXAMINATION				
Quantity	15	ml		
Color	Pale Yellow			
Appearance	Slightly Hazy			Clear
Specific Gravity	1.020		1.010 - 1.025	
CHEMICAL EXAMINATION				
pH	6.0		4.5 - 8.5	
Protein	Absent			
Glucose	Absent			
Ketone	Absent			
Occult Blood	PRESENT(+)			
Bile Salt	Absent			Absent
Bile Pigment	Absent			Absent
MICROSCOPIC EXAMINATION				
Pus Cells	2-3			
RBCs	4-6			
Epithelial Cells	3-4			
Crystals	Absent			Absent
Casts	Absent			Absent
Bacteria	Absent			Absent
Yeast Cells	Normal		Normal	
Amorphous Deposit	Absent			
Others	ABSENT			

--End Of Report--

Dr. Neeraj Gujar
MD PATHOLOGY

Patient Id : PVD04224-25/10929 Sample ID : 24056283
 Patient : MR NARENDRA K. LAD Reg. Date : 25/05/2024
 Age/sex : 50 Yrs/ Male Report Date : 25/05/2024
 Center : APEX SUPERSPECIALITY HOSPITALS Case No. :
 Ref. By : Self



VITAMIN B12- SERUM

Test Description	Result	Unit	Biological Reference Range
Vitamin B12- Serum	536.4	pg/ml	197.0 - 771.0
Method : ECLIA			

INTERPRETATION

1. Vit B12 levels are decreased in megaloblastic anemia, partial/total gastrectomy, pernicious anemia, peripheral neuropathies, chronic alcoholism, senile dementia, and treated epilepsy.
2. An associated increase in homocysteine levels is an independent risk marker for cardiovascular disease and deep vein thrombosis.
3. Very high levels (> 1200) may be seen for several weeks after injections of B12

VITAMIN D- TOTAL (25-OH-VIT D)- SERUM

Test Description	Result	Unit	Biological Reference Range
Vitamin D- Total (25-OH-Vit D)			
Vitamin D- Total (25-OH-Vit D)- Serum	27.5	ng/ml	2-10 : Deficiency 10-30 : Insufficiency 30-100 : Sufficiency > 100 : Toxicity
Method : ECLIA			


INTERPRETATION:

Vitamin D is a fat soluble vitamin & exists in two main forms as cholecalciferol (Vitamin D3) which is synthesized in skin from 7-dehydrocholesterol in response to sunlight exposure & Ergocalciferol (Vitamin D2) present mainly in dietary sources. Both cholecalciferol & Ergocalciferol are converted to 25 (OH) Vitamin D in liver. Testing for 25 (OH) Vitamin D is recommended as it is the best indicator of Vitamin D nutritional status as obtained from sunlight exposure & dietary intake.

1. 25 OH Vitamin D is the best indicator of Vitamin D nutritional status, it is used as an aid in assessment of Vitamin D sufficiency in adults.
2. 25 OH Vitamin D deficiency is seen in secondary hyperparathyroidism.
3. Decreased levels of 25 OH Vitamin D can lead to Osteomalacia, reduced bone mass & thus increase the risk of bone fractures.
4. Decreased 25 OH Vitamin D levels are also associated with low bone mineral density & also seen in nutritional rickets.
5. Decreased levels of 25 OH Vitamin D are also associated with increased cardiovascular risk, low immunity & chronic renal failure.
6. Elevated levels are associated with Vitamin D intoxication.

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

Term & Conditions* Test processed at Pathvision Central Processing Laboratory- Dahisar west Mumbai-68 Individual laboratory investigations are never conclusive but should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 24hr of sample collection and get test redone. Partial reproduction of this report is not permitted The test report is not valid for Medico-legal purpose.


DR. SANDEEP B. PORWAL
 MBBS MD (Path) Mumbai
 MMC Reg no 2001031640

Patient Id : **PVD04224-25/10929** Sample ID : 24056283
 Patient : MR NARENDRA K. LAD Reg. Date : 25/05/2024
 Age/sex : 50 Yrs/ Male Report Date : 25/05/2024
 Center : APEX SUPERSPECIALITY HOSPITALS Case No. :
 Ref. By : Self



HBA1C-GLYCOSYLATED HAEMOGLOBIN

Test Description	Result	Unit	Biological Reference Range
HbA1c- (EDTA WB)	5.6	%	< 5.6 Non-diabetic 5.7-6.4 Pre-diabetic > 6.5 Diabetic
Estimated Average Glucose (eAG)	114.02	mg/dL	
Method : HPLC-Biorad D10-USA			


INTERPRETATION

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
5. To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
6. Interference of Haemoglobinopathies in HbA1c estimation.
 - A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
 - C. Heterozygous state detected (D10/ Tosho G8 is corrected for HbS and HbC trait).
7. In known diabetic patients, following values can be considered as a tool for monitoring the glycaemic control.
 - Excellent Control - 6 to 7 %,
 - Fair to Good Control - 7 to 8 %,
 - Unsatisfactory Control - 8 to 10 %
 - and Poor Control - More than 10 %.

Note : Haemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy

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

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DR. SANDEEP B. PORWAL
 MBBS MD (Path) Mumbai
 MMC Reg no 2001031640



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APEX SUPERSPECIALITY HOSPITALS DIAGNOSTICS



CASHLESS
FACILITY

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Borivali (W), Mumbai - 400091.
email: medical.admin_ash@apexhospitals.in | www.apexgroupofhospitals.com

visit website
googlemap



Land Line No. 022 - 42457040
Reception No. 9326787557

DEPARTMENT OF RADIOLOGY

Patient Name	Mr. NARENDRA K LAD	LabNo	3122
UHID/IP No	140023267 / 950	Order Date	25/05/2024 8:19AM
Age/Gender	50 Yrs/Male	Receiving Date	27/05/2024 11:20AM
Bed No/Ward	OPD	Report Date	27/05/2024 11:48AM
Prescribed By	Dr. Apex Hospitals	Report Status	Final



DIGITAL X-RAY CHEST <PA> VIEW

The lung on either side shows adequate translucency and exhibit normal vasculature.

Both hila are symmetrical in outline size and shape.

Trachea is central in position and no mediastinal abnormality is visible.

The costophrenic angles appear clear.

Cardiac shadow is unremarkable.

Bone thorax appears unremarkable.

--End Of Report--

Dr. SAUMIL PANDYA
MD, D.N.B, RADIOLOGIST



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email: medical.admin_ash@apexhospitals.in | www.apexgroupofhospitals.com



Land Line No. 022 - 42457040
Reception No. 9326787557

NAME - MR. NARENDRA LAD	AGE/SEX -50Y/M
REF - APEX HOSPITAL	DATE - 25/05/2024

SONOGRAPHY OF ABDOMEN AND PELVIS MALE

TECHNIQUE: Real time, B mode, gray scale sonography of the abdominal and pelvic organs was performed with convex transducer.

LIVER: The liver is normal in size, shape and has smooth margins. The hepatic parenchyma shows homogeneous increased echo texture without solid or cystic mass lesion or calcification. No evidence of intra hepatic biliary radical dilatation.

PORTAL VEIN: It is normal in transverse diameter.

GALL BLADDER: The gall bladder is well distended. There is no evidence of calculus, wall thickening or pericholecystic collection.

COMMON BILE DUCT: The visualised common bile duct is normal in caliber. No evidence of calculus is seen in the common bile duct. Terminal common bile duct is obscured due to bowel gas artifacts.

PANCREAS: The head and body of pancreas is normal in size, shape, contours and echo texture. Rest of the pancreas is obscured due to bowel gas artifacts.

SPLEEN: The spleen measures 8.6 cm normal in size and shape. Its echo texture is homogeneous.

KIDNEYS:

Right kidney	Left kidney
9.0 x 5.1 cm	8.6 x 4.9 cm

The kidneys are normal in size and have smooth renal margins. Cortical echo texture is normal. The central echo complex does not show evidence of hydronephrosis. No evidence of hydroureter, bilaterally. calculi are seen in right kidney midpole and left kidney midpole measuring about 5.8mm and 2.5mm respectively.

URINARY BLADDER: The urinary bladder is well distended. It shows uniformly thin walls and sharp mucosa. No evidence of calculus is seen. No evidence of mass or diverticulum is noted.

PROSTATE: It measures about volume is 15.5 gm. The prostate gland shows well defined and smooth margins. The prostatic echotexture is normal and homogeneous.

There is no ascites. There is no obvious evidence of significant lymphadenopathy.

IMPRESSION:

Grade I fatty infiltration of liver.
Bilateral renal non obstructing calculi.



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Land Line No. 022 - 42457040
Reception No. 9326787557

Dr. Saumil Pandya
MD DNB Consultant Radiologist

UNI-EM

ELECTRONICS COMPLEX INDORE

TREADMILL TEST REPORT

narendra lad
 ID : 22386
 DATE : 25/05/2024
 AGE/SEX : 53 / M
 HT/WT : 178 / 80
 REF. BY :

PROTOCOL : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100	ST LEVEL (MM)			METS	
								II	V1	V5		
SUPINE												
STANDING					69	90 / 60	62	-0.6	1.5	-0.3		
HYPERTENT		0:5			68	90 / 60	61	0	1	0.1		
VALSALVA					69	90 / 60	62	0.1	1	0		
Stage 1	2:55	2:55	2.7	10	70	90 / 60	63	0	0.4	0.1		4.67
Stage 2	5:55	2:55	4	12	105	90 / 60	94	0.1	0	-0.3		7.04
Stage 3	8:55	2:55	5.4	14	127	90 / 60	114	-0.7	0	-0.7		9.92
PK-EXERCISE	9:9	0:9	6.7	16	165	110 / 60	181	-0.8	0.3	-0.7		10.20
RECOVERY	12:14	2:55			163	110 / 60	179	-0.8	0.4	-0.6		
					89	130 / 80	115	-0.3	0.2	0.1		

RESULTS

EXERCISE DURATION : 9:9
 MAX HEART RATE : 165 bpm
 MAX BLOOD PRESSURE : 130 / 80 mm Hg
 REASON OF TERMINATION : Adhem 7HR
 BP RESPONSE : Normal
 ARRHYTHMIA : None
 H.R. RESPONSE : Normal
 IMPRESSIONS : Normal

Sanjay Negta for Dr. Chirag V. Shah

Dr. CHIRAG V. SHAH
 D.N.B.(M.D.)
 CONSULTING PHYSICIAN CARDIOLOGIST
 Reg. No. 2003 / 04 / 1649

Technician :

UNI-EM

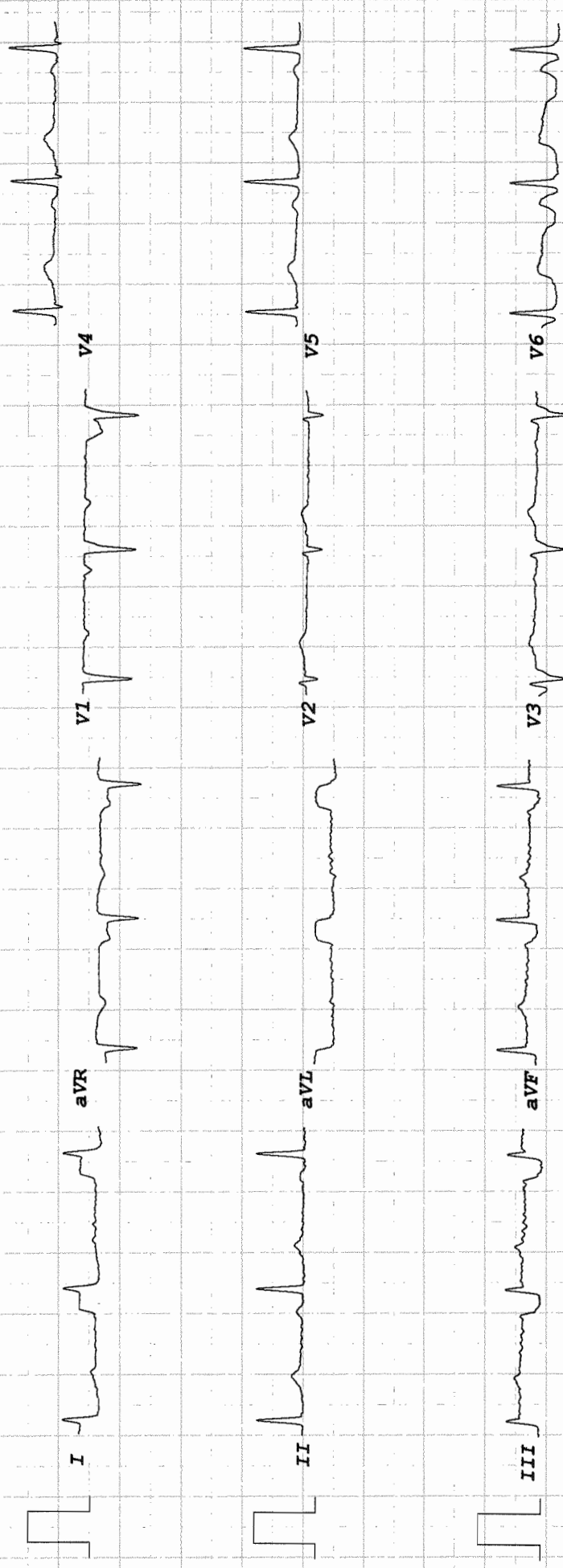
narendra lad
I.D. 22386
Age 53/M
Date 25/05/2024

RATE 69bpm
B.P. 90/60

PRETEST
SUPINE

ST @ 10mm/mV
80ms PostJ

RAW ECG



UNI-EM

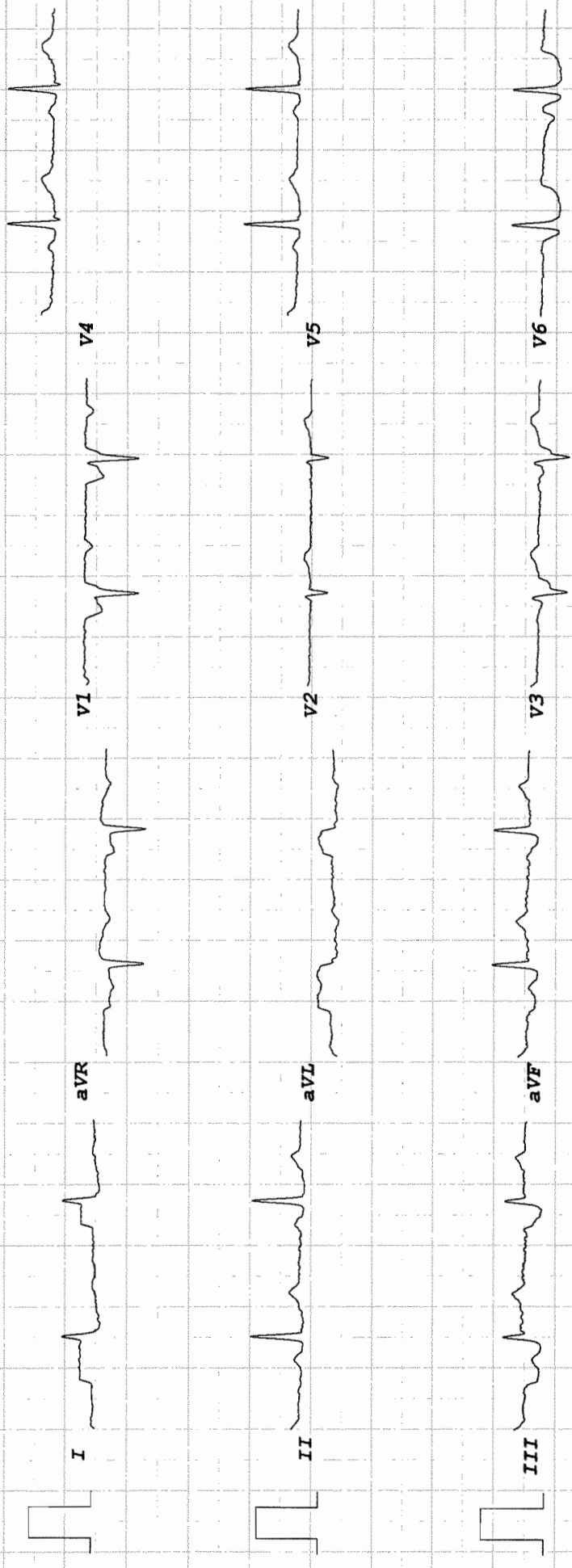
narendra lad
I.D. 22386
Age 53/M
Date 25/05/2024

RATE 68bpm
B.P. 90/60

PRETEST
STANDING

ST @ 10mm/mV
80ms PostJ

RAW ECG



UNI-EM

narendra lad
I.D. 22386
Age 53/M
Date 25/05/2024

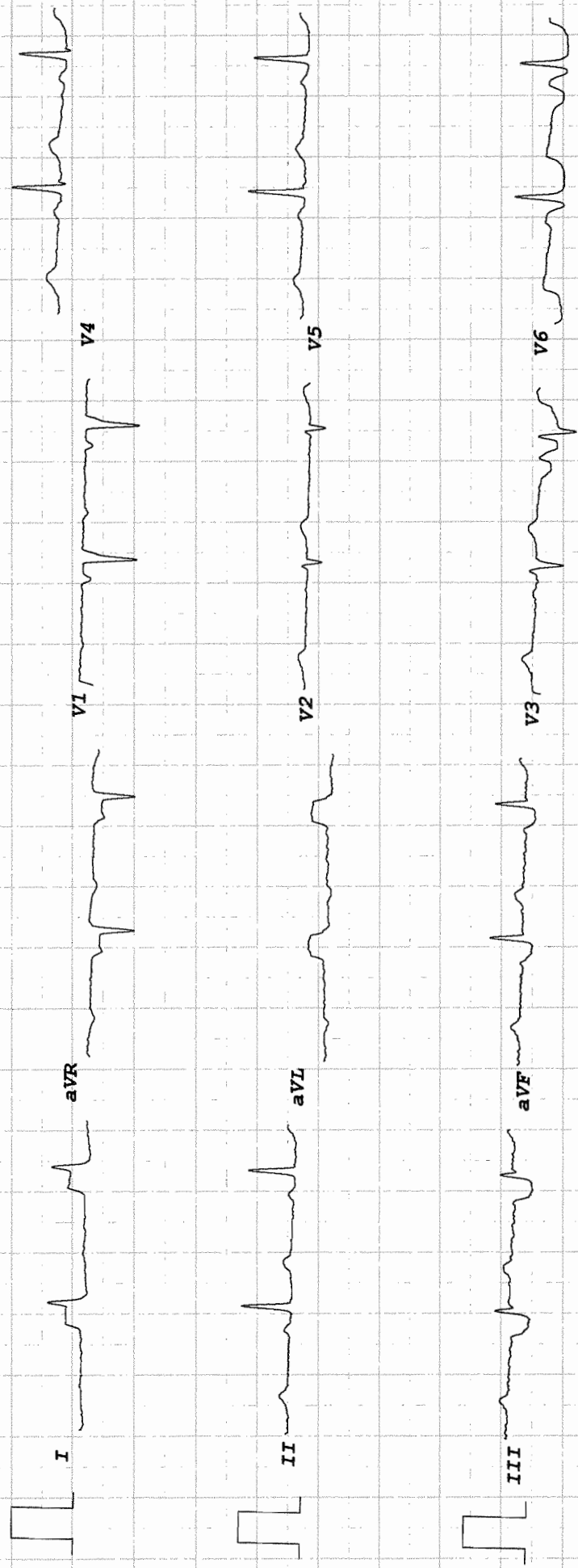
RATE 69bpm
B.P. 90/60

PRETEST
HYPERVENT

ST @ 10mm/mV
80ms PostJ

PHASE TIME 0:05

RAW ECG



narendra lad
I.D. 22386
Age 53/M
Date 25/05/2024

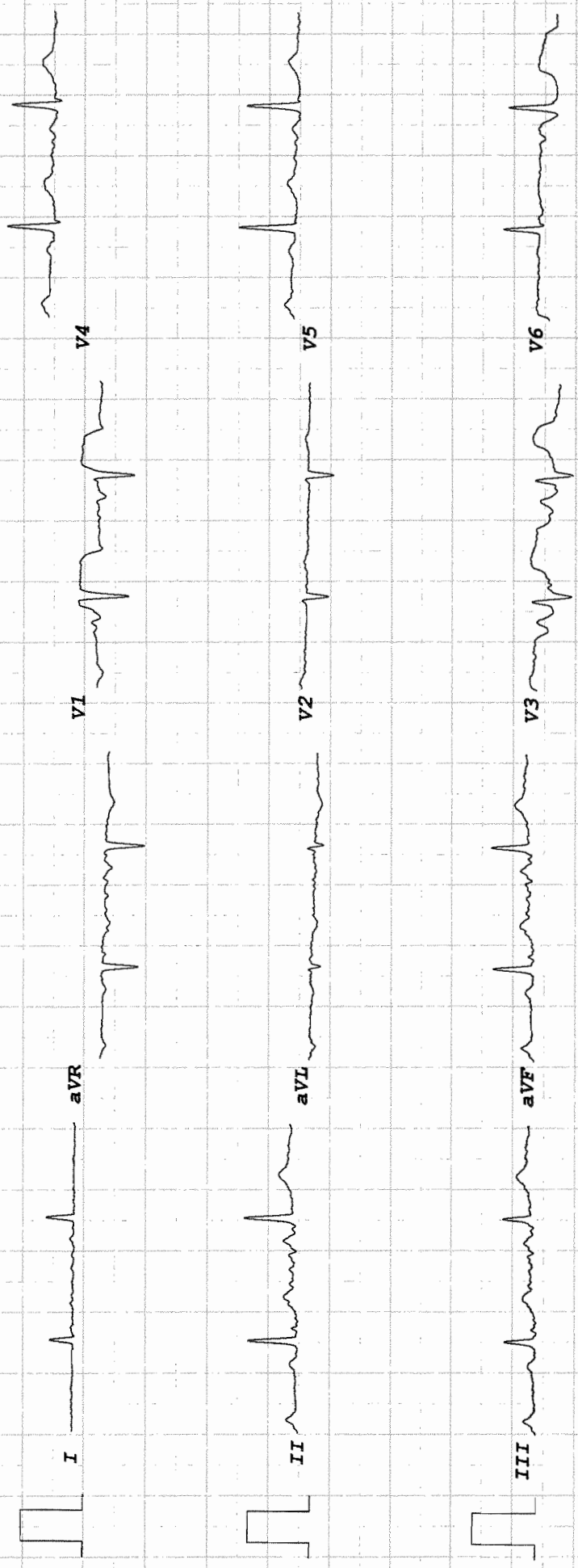
RATE 70bpm
B.P. 90/60

UNI-EM

PRETEST
VALSALVA

ST @ 10mm/mV
80ms PostJ

RAW ECG



UNI-EM

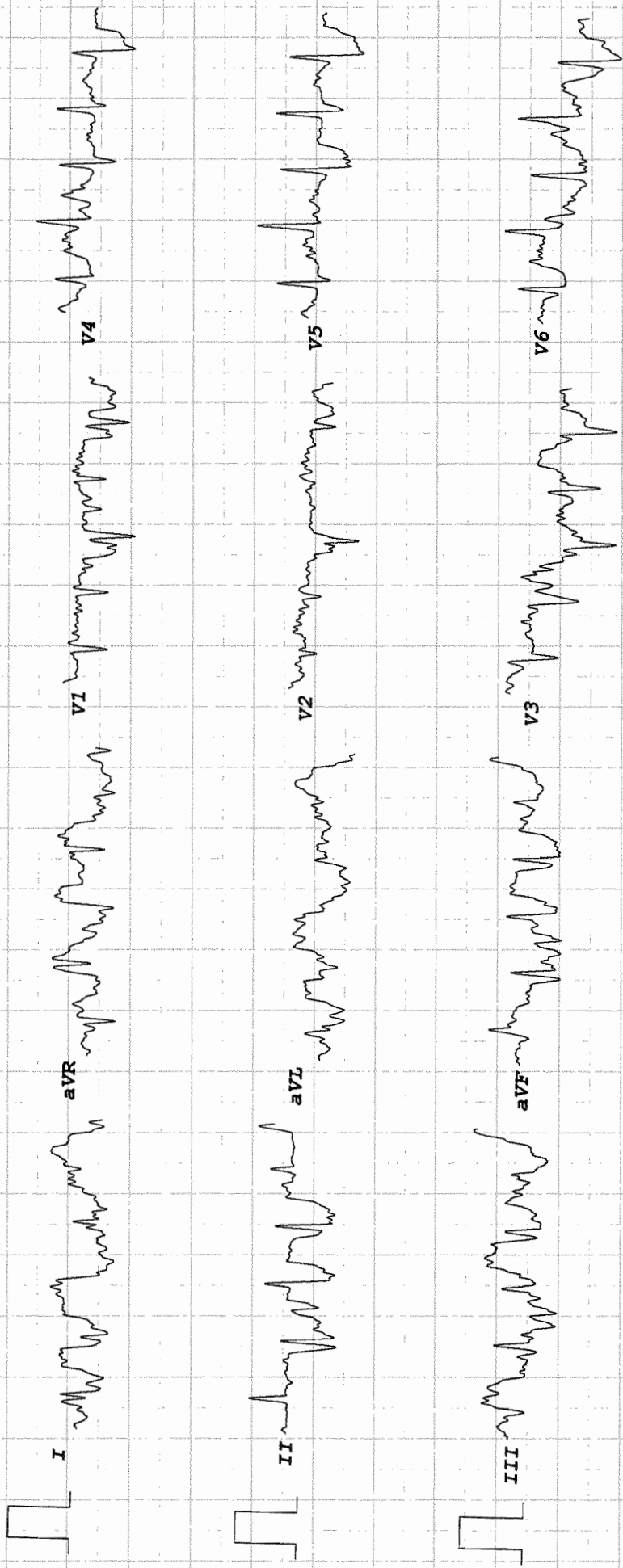
RAW ECG

narendra lad
 I.D. 22386
 Age 53/M
 Date 25/05/2024

RATE 163bpm
 B.P. 110/60

Bruce
 PK-EXERCISE
 TOTAL TIME 9:09
 PHASE TIME 0:09

ST @ 10mm/mV
 80ms PostJ
 Speed 6.7 km/hr
 SLOPE 16 %



UNI-EM

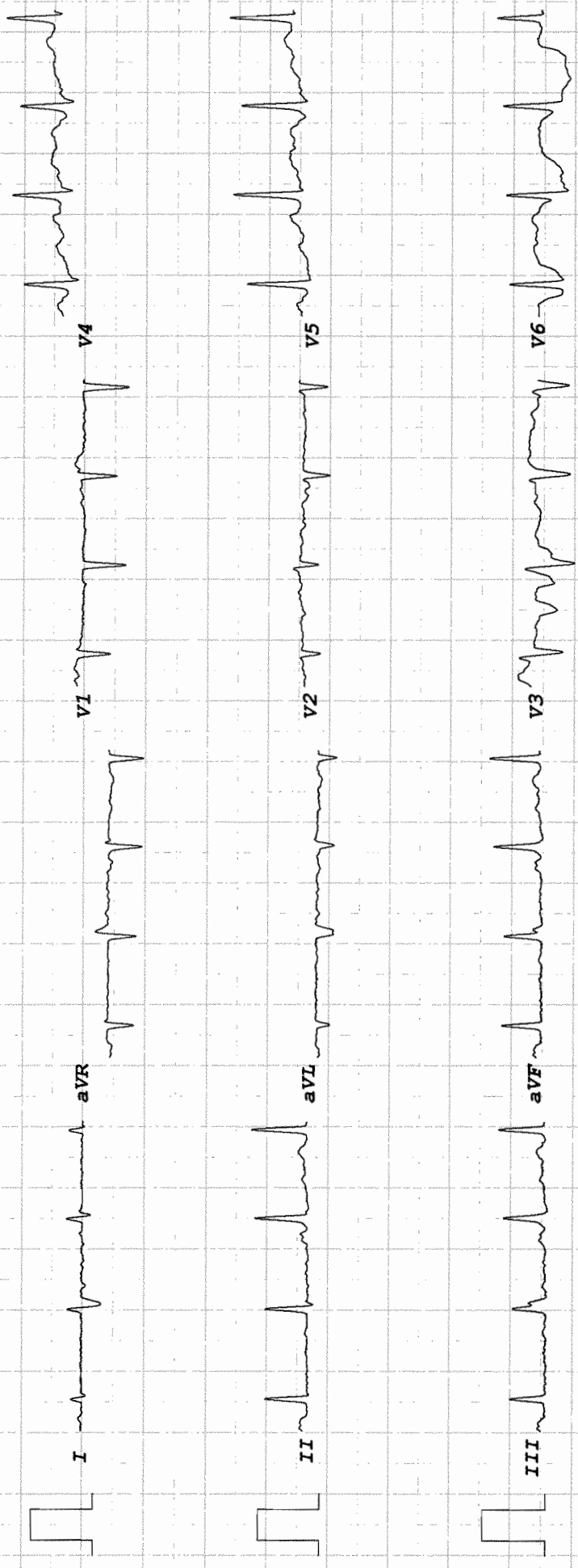
narendra lad
 I.D. 22386
 Age 53/M
 Date 25/05/2024

RATE 105bpm
 B.P. 90/60

Bruce
 Stage 1
 TOTAL TIME 2:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 2.7 km/hr
 SLOPE 10 %

RAW ECG



UNI-EM

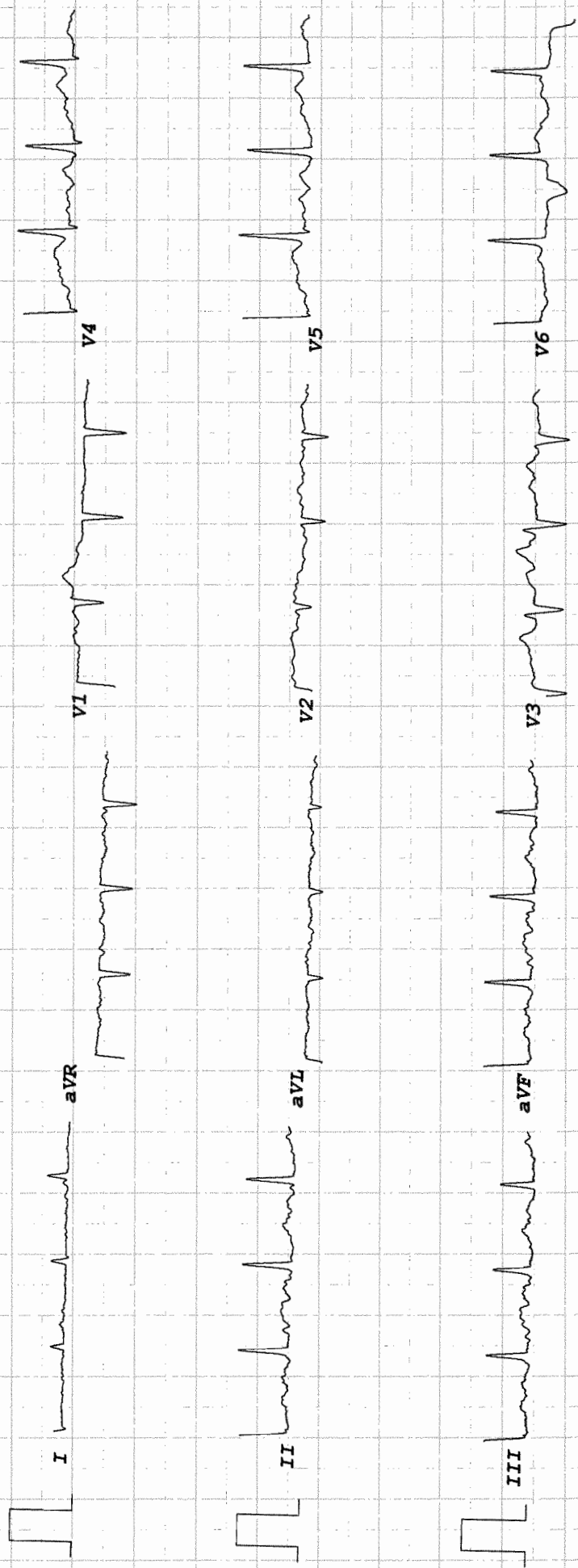
RAW ECG

narendra lad
 I.D. 22386
 Age 53/M
 Date 25/05/2024

RATE 110bpm
 B.P. 90/60

ST @ 10mm/mV
 80ms PostJ
 Speed 4 km/hr
 SLOPE 12 %

Bruce
 Stage 2
 TOTAL TIME 3:25
 PHASE TIME 0:25



narendra lad
I.D. 22386
Age 53/M
Date 25/05/2024

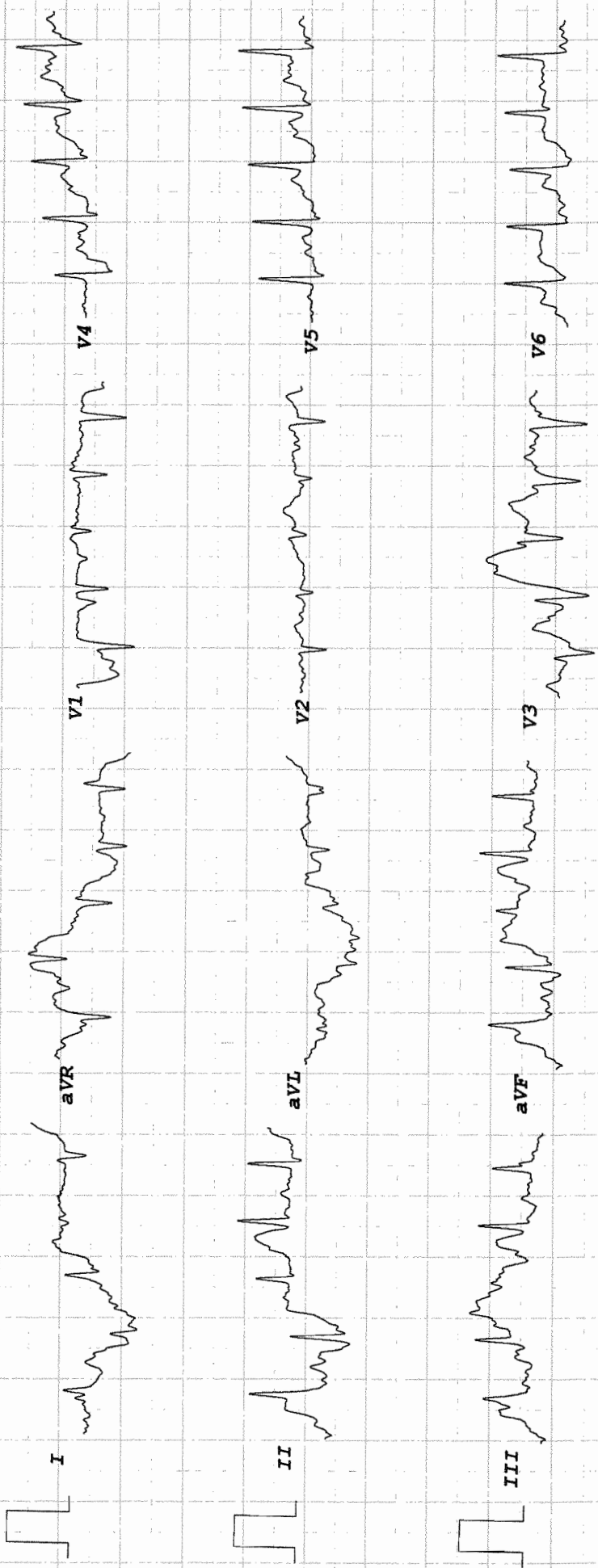
RATE 165bpm
B.P. 110/60

UNI-EM

ST @ 10mm/mV
80ms PostJ
Speed 5.4 km/hr
SLOPE 14 %

RAW ECG

Bruce
Stage 3
TOTAL TIME 8:55
PHASE TIME 2:55



narendra lad
I.D. 22386
Age 53/M
Date 25/05/2024

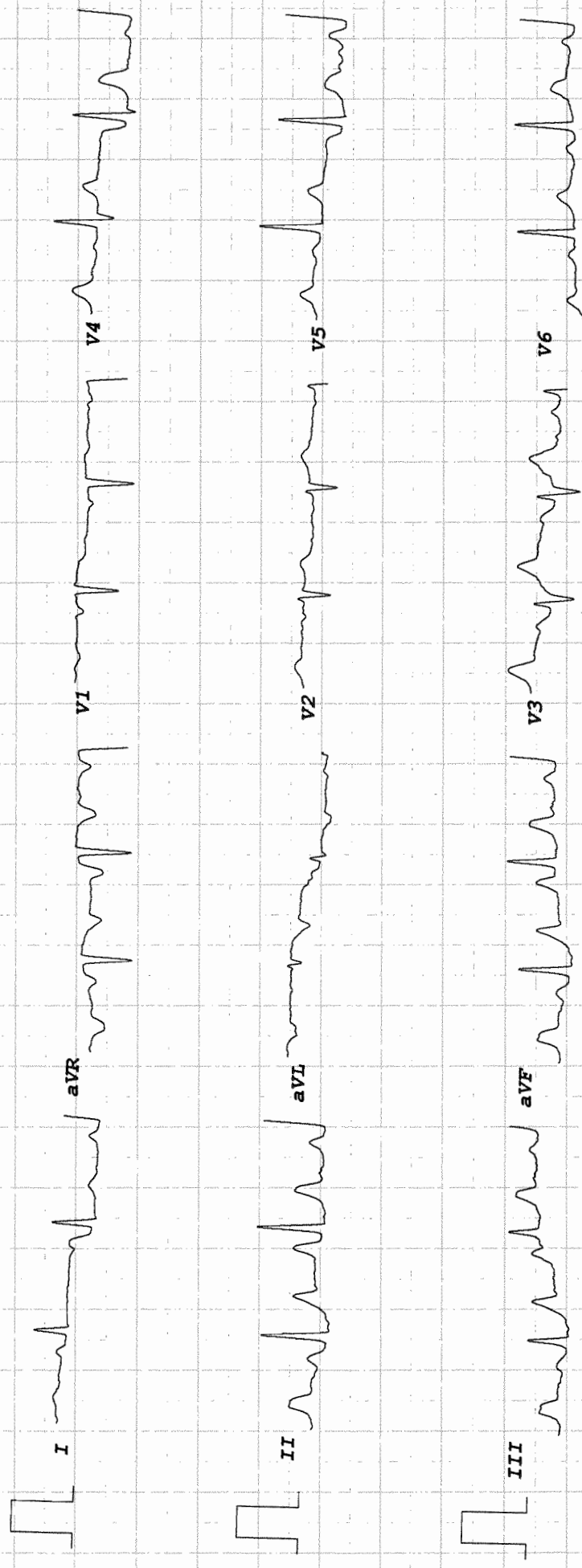
UNI-EM

RATE 89bpm
B.P. 130/80

ST @ 10mm/mV
80ms PostJ

Bruce
RECOVERY
TOTAL TIME 12:14
PHASE TIME 2:55

RAW ECG



ASH/MRD/28



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022-2898 6677 / 46 / 47 / 48

CASHLESS FACILITY

L. T. Road, Besides Punjab & Sind Bank, Babhai Naka, Borivali (W), Mumbai 400091.

E. C. G.

Name Narendra K Lad Date 25/8/24

Age _____ Gender _____

B.P. 110/70

DR. CHIRAG V. SHAH
E. M. B. (M. D.)
CONSULTING PHYSICIAN CARDIOLOGIST
Reg. No. 2003 / 04 / 1649

ELECTROCARDIOGRAPHIC OBSERVATIONS

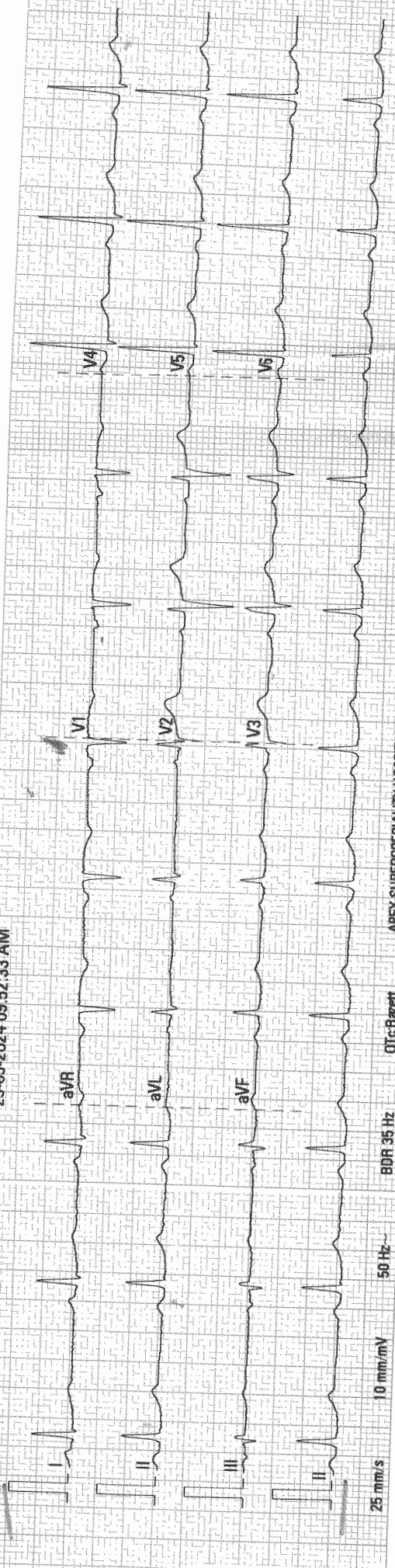
Rate 72 Axis _____ O.R.S. Complex _____

Rhythm Sin P. Wave _____ S.T. Segment _____

ID:2024052509464709

Name:

25-05-2024 09:52:33 AM



25 mm/s

10 mm/mV

50 Hz

BDR 35 Hz

QTc: Bazett

APEX SUPERSPECIALITY HOSPITAL

02.07.00/04.00.00

SN:FK-830/4036

ID:2024
Name
25-05
Sinus
Uncon