
Patient Name	: Mrs. SHIVANI KANAUIA	Age/Gender	: 40 Y/F
UHID/MR No.	: SKAN.0000136140	OP Visit No	: SKANOPV168846
Sample Collected on	: 05-06-2024 13:57	Reported on	: 06-06-2024 15:28
LRN#	: LAB13518379	Specimen	: Cervical Smear
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 09560253892		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
LBC PAP TEST- PAPSURE IT Dose	.		

---End Of Report---

MEDICAL EXAMINATION REPORT

NAME: MRS. SHIVANI KANAUIA

AGE/SEX: 40 Y/FEMALE

DATE OF BIRTH: 29/09/1983

ADDRESS: SIGNATURE GREEN APPT. ZOO ROAD, SWAROOP NAGAR – KANPUR – 208002

OBSERVATIONS

- | | |
|--------------------------|---------------------|
| 1. DIABETES MELLITUS: NO | 2. HYPERTENSION: NO |
| 3. C.O.P.D.: NO | 4. TUBERCULOSIS: NO |
| 5. EYE DISORDER: NO | 6. PARALYSIS: NO |
| ➤ EPILEPSY: NO | 8. DENTAL: NORMAL |
| 9. E.N.T.: NORMAL | |

BLOOD PRESSURE: 110/70 mmhg

PULSE: 86 bpm

WEIGHT: 57 kg

RESPIRATORY RATE: 19/m

HEIGHT: 161 cm

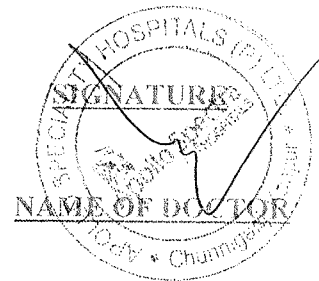
BMI: 22 kg/m²

ADVICE:

- Advice to consultation with an Urologist due to Right Renal Calculus.

PLACE: Kanpur

DATE: 05/06/2024



Mrs Sumari Kanaujia.

40yrs

5/6/24

LMP - 5th May

For health
checkup.

Pap smear.

Slide I - Betocx

Slide II - Endo Cx.

P/S
Bulky ex
& multiple nabothian
cyst
curdy white
discharge

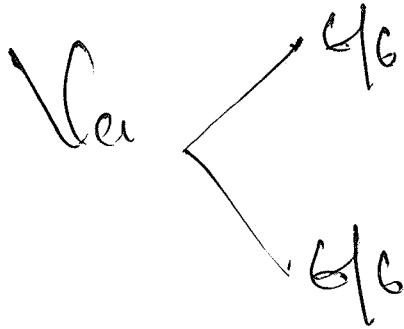
- Fenza Vg suppositoria

1 x 1

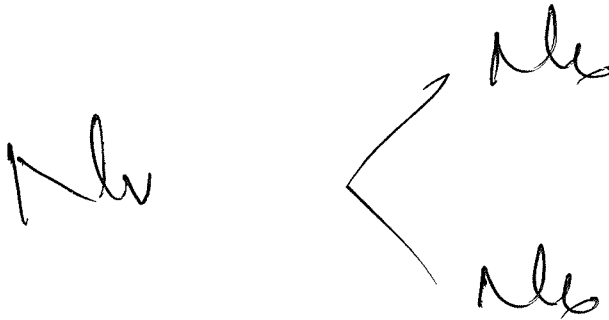
Cp Lactogut UA 1BD

X15

Dr. Shivani



(Disturb)



Colour Vision → W all
 Res
 no actual intervention

Shivani
 डा. शिवनिया दमले
 एम.बी.बी.एस., डी.ओ.
 रजिस्ट्रेशन नं. 4484

GE Healthcare REF 1019728LS1

05.06.2024 9:28:03

Location:
Room:
Order Number:
Indic:

Medication 1:
Medication 2:
Medication 3:

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

81 bpm

mmHg

Mr. Shivani Kamdar

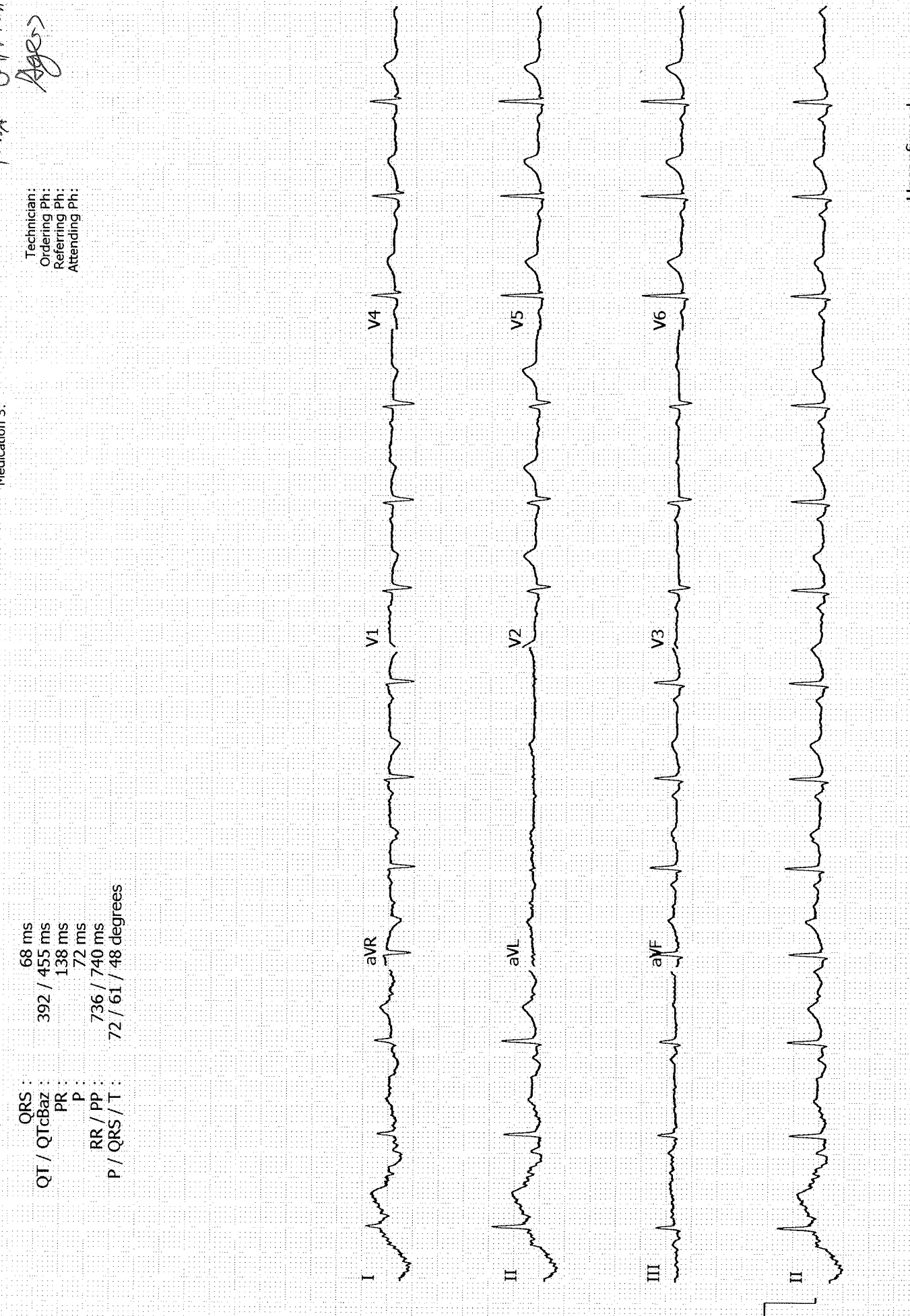
Age: 40/F

QRS: 68 ms
QT / QTcBaz: 392 / 455 ms
PR: 138 ms
P: 72 ms
RR / PP: 736 / 740 ms
P / QRS / T: 72 / 61 / 48 degrees

I
II
III
aVR
aVL
aVF
V1
V2
V3
V4
V5
V6

GE MAC2000 1.1 12SL™ V241

Unconfirmed 4x2.5x3_25_R1 1/1



Patient Name : Mrs. SHIVANI KANAUIJA

Age : 40 Y F

UHID : SKAN.0000136140

OP Visit No : SKANOPV168846

Reported on : 05-06-2024 11:56

Printed on : 05-06-2024 12:03

Adm/Consult Doctor :

Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver- normal in size shape & echogenecity. No focal lesions. Intra hepatic biliary radicles not dilated. Portal vein is normal in course and caliber.

Gall Bladder- Normal in distension and wall thickness.No sizeable calculus or mass lesion.

CBD normal in course, caliber & clear in visualized region.

Pancreas - Normal in size, shape and echogenecity. No sizeable mass lesion.Main Pancreatic duct not dilated.

Spleen -normal in size, shape and echogenecity. No focal lesion. Splenic vein at hilum is normal caliber.

Retroperitoneum -obscured by bowel gas.

Bilateral Kidney -Normal in size, shape, position and echogenecity. Corticomedullary differentiation preserved.

Pelvic system not dilated.No calculus or mass lesion. Bilateral ureter not dilated. Right kidney mid pole calculus measuring 3.7mm & right mild renal fullness .

Urinary Bladder -UB is partially distended. Pelvic organs could not be commented.

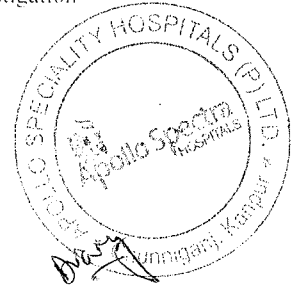
No evidence of ascites.

IMPRESSION:

Right renal calculus with right mild renal fullness

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion. Not valid for medico legal purpose.



Printed on:05-06-2024 11:56

---End of the Report---

Dr. DUSHYANT KUMAR VARSHNEY

MD, DNB

Radiology

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SHIVANI KANAUIJA	Age / Gender : 40Y/Female
UHID/MR No. : SKAN.0000136140	OP Visit No : SKANOPV168846
Sample Collected on : 05-06-2024 09:44	Reported on : 05-06-2024 13:27
LRN# : LAB13518379	Specimen : Blood(EDTA)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 09560253892	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	11.8	11.5 - 15	g/dL
RBC Count Method: Electrical Impedance	4.59	3.8 - 4.8	millions/cu mm
Haematocrit Method: Calculated	37.4	36 - 46	%
MCV Method: Calculated	81.5*	83 - 101	fl
MCH Method: Calculated	25.7*	27 - 32	pg
MCHC Method: Calculated	31.6	31.5 - 34.5	g/dl
RDW	13.7	11.6 - 14	%
Platelet Count Method: Electrical Impedance	1.72	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	5400	4000 - 11000	cells/cumm

Results are to be correlated clinically



Lab Technician / Technologist

NOTE: All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

Dr. SAFINDER SINGH
MD

14/138, Chunniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SHIVANI KANAUIA
UHID/MR No. : SKAN.0000136140
Sample Collected on : 05-06-2024 09:44
LRN# : LAB13518379
Ref Doctor : SELF
Emp/Auth/TPA ID : 09560253892
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 40Y/Female
OP Visit No : SKANOPV168846
Reported on : 05-06-2024 13:28
Specimen : Blood(EDTA)
Adm/Consult Doctor :

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology : Microscopic
RBC : Normocytic Normochromic
WBC : within normal limits. DLC is as mentioned.
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic blood picture
Note/Comment : Please Correlate clinically

End of the report



Results are to be correlated clinically

Lab Technician / Technologist

NOTE: All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Satinder Singh
Excel Hospitals (P) Ltd.

Dr. SATINDER SINGH
MD
Pathology
1/108, Chunniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SHIVANI KANAUIA	Age / Gender : 40Y/Female
UHID/MR No. : SKAN.0000136140	OP Visit No : SKANOPV168846
Sample Collected on : 05-06-2024 09:44	Reported on : 05-06-2024 18:48
LRN# : LAB13518379	Specimen : Serum
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 09560253892	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GAMMA GLUTAMYL TRANSFERASE (GGT)			
GAMMA GT Method: Kinetic Photometric	72*	< 38	U/L
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA Method: Jaffe's Kinetic	0.8	0.55 - 1.02	mg/dl
URIC ACID - SERUM Method: Modified Uricase	6.0	2.6 - 6.0	mg/dl
UREA - SERUM/PLASMA Method: Urease with indicator dye	23	Female: 15 - 36	mg/dl
CALCIUM Method: O-Cresolphthalein complexone	8.1*	8.5 - 10.1	mg/dl
BUN Method: Urease with indicator dye	10.72	7-17	mg/dl
HOSPOHORUS Method: Phosphomolybdate -UV	5.1*	2.5 - 4.5	mg/dl
ELECTROLYTES (Na) Method: ISE-Direct	142	135 - 145	meq/L
ELECTROLYTES (K)	4.0	3.5 - 5.1	meq/L

Results are to be correlated clinically



Lab Technician / Technologist

NOTE: All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

Dr. SATINDER SINGH
MD

Pathology
Chungniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SHIVANI KANAUIJA	Age / Gender : 40Y/Female
UHID/MR No. : SKAN.0000136140	OP Visit No : SKANOPV168846
Sample Collected on : 05-06-2024 09:44	Reported on : 05-06-2024 18:48
LRN# : LAB13518379	Specimen : Serum
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 09560253892	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

Method: ISE-Direct

LIVER FUNCTION TEST (LFT)

BILIRUBIN TOTAL	0.59	0.2 - 1.3	mg/dL
Method: Azobilirubin/dyphylline			
BILIRUBIN (DIRECT)	0.22	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
Method: Dual Wavelength Spectrophotometric			
BILIRUBIN UNCONJUGATED(INDIRECT)	0.37	0.0 - 1.1	mg/dL
Method: Dual Wavelength Spectrophotometric			
ALBUMIN	4.4	3.0 - 5.0	g/dL
Method: Bromocresol Green dye binding			
PROTEIN TOTAL	7.2	6.0 - 8.2	g/dL
Method: Biuret Reaction			
AST (SGOT)	16	14 - 36	U/L
Method: Kinetic (Leuco dye) with P 5 P			
GLOBULIN	2.8	2.8 - 4.5	g/dL
Method: Calculation			
ALT(SGPT)	22	9 - 52	U/L
LIPID PROFILE			
CHOLESTEROL	136	<200 - Desirable 200-239 - Borderline High >=240 - High	mg/dL
Method: CHOD-End Point POD (Enzymatic)			
HDL	56	<40 - Low	mg/dL

Results are to be correlated clinically



Dr. SATINDER SINGH

Lab Technician / Technologist
NOTE: All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

Pathology
14/138, Chunniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
♦ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SHIVANI KANAUIA	Age / Gender : 40 Y/Female
UHID/MR No. : SKAN.0000136140	OP Visit No : SKANOPV168846
Sample Collected on : 05-06-2024 09:44	Reported on : 05-06-2024 18:48
LRN# : LAB13518379	Specimen : Serum
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 09560253892	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

Method: Direct Measure PEG			>=60 - High
LDL	62.8		< 100 - Optimal
Method: Calculation Friedewald's Formula			100-129 - Near Optimal & Above Optimal
TRIGLYCERIDES	86		Normal : <150 mg/dl
Method: Enzymatic GPO/POD/End Point			Border High : 150 - 199
			High : 200 - 499
			Very High : >= 500
			Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.
VLDL	17.2		10-40 mg/dL
Method: Calculated			
GLUCOSE, FASTING			
Glucose - Plasma	90*		Fasting mg/dL
Method: GOD-PAP			- Normal : < 100mg/dL
			- Prediabetes : 100 – 125 mg/dL
			- Diabetes : 126 mg/dL or higher

End of the report

Results are to be correlated clinically



Satinder Singh

Dr. SATINDER SINGH

Excel Hospitals (P) Ltd.

NOTE: All pathological test have technical limitations which may cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Pathology
14/150, Chunniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SHIVANI KANAUIA	Age / Gender : 40Y/Female
UHID/MR No. : SKAN.0000136140	OP Visit No : SKANOPV168846
Sample Collected on : 05-06-2024 09:44	Reported on : 05-06-2024 15:14
LRN# : LAB13518379	Specimen : Blood(bio/EDTA)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 09560253892	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HbA1c, GLYCATED HEMOGLOBIN			
HbA1c, GLYCATED HEMOGLOBIN Method:HPLC	5.5	<=5.6:Non-Diabetic 5.7-6.4: Prediabetes (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	111.15		mg/dL

End of the report



Results are to be correlated clinically



Dr. SATINDER SINGH

Excel Hospitals (P) Ltd.

Pathology
 14/38, Chhatrapati, Kanpur - 208001
 Ph. 0512-2555991, 2555992
 Email : excelhospitals@gmail.com
 ❖ Emergency No. 9935577550

Lab Technician / Technologist
NOTE : All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SHIVANI KANAUIJA	Age / Gender : 40Y/Female
UHID/MR No. : SKAN.0000136140	OP Visit No : SKANOPV168846
Sample Collected on : 05-06-2024 09:44	Reported on : 05-06-2024 13:34
LRN# : LAB13518379	Specimen : Urine
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 09560253892	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.020	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	6.5 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	5-10	2-3	/hpf



Results are to be correlated clinically

Lab Technician / Technologist

NOTE: All biological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

Dr. SATINDER SINGH
MD

Pathology
Panchganga, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SHIVANI KANAUIJA	Age / Gender : 40Y/Female
UHID/MR No. : SKAN.0000136140	OP Visit No : SKANOPV168846
Sample Collected on : 05-06-2024 09:44	Reported on : 05-06-2024 13:34
LRN# : LAB13518379	Specimen : Urine
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 09560253892	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

End of the report

Results are to be correlated clinically



Satinder Singh

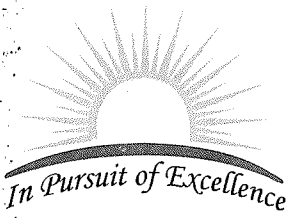
Lab Technician / Technologist

NOTE: All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

Dr. SATINDER SINGH
MD

Pathology
Chunniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550



SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 0512-2219667, 8858154254

e-mail : sonidiagnostics01@gmail.com

Patient Name : MRS. SHIVANI KANAUIJA

Age / Gender : 40 years / Female

Patient ID : 51233

Source : Excel Hospital

Referral : SELF

Collection Time : 05/06/2024, 12:32 p.m.

Reporting Time : 05/06/2024, 04:13 p.m.

Sample ID :



241570005

Test Description	Value(s)	Reference Range	Unit(s)
------------------	----------	-----------------	---------

SAMPLE TYPE : SERUM

T3 Method : CLIA	1.03	0.79 - 1.58	ng/mL
T4 Method : CLIA	8.31	5.2-12.7	µg/dL
TSH Method : CLIA	2.26	0.3-4.5	µIU/mL

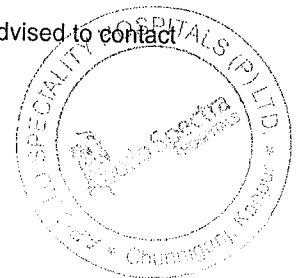
Interpretation

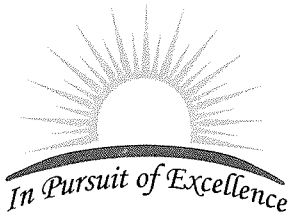
TSH	T4	T3	INTERPRETATION
HIGH	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPOTHYROIDISM
HIGH	LOW OR NORMAL	LOW OR NORMAL	HYPOTHYROIDISM
LOW	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPERTHYROIDISM
LOW	HIGH OR NORMAL	HIGH OR NORMAL	HYPERTHYROIDISM
LOW	LOW OR NORMAL	LOW OR NORMAL	NON-THYROIDAL ILLNESS: RARE PITUITARY (SECONDARY)HYPOTHYROIDISM

****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected, the patient is advised to contact the lab immediately for a recheck.

Dr. S.S.Soni
M.D. (PATHOLOGY)





SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 0512-2219667, 8858154254

e-mail : sonidiagnostics01@gmail.com

Patient Name : MRS. SHIVANI KANAUJIA

Age / Gender : 40 years / Female

Patient ID : 51233

Source : Excel Hospital

Referral : SELF

Collection Time : 05/06/2024, 12:32 p.m.

Reporting Time : 06/06/2024, 02:45 p.m.

Sample ID :



241570005

Reference Number :

SD 175/24

Type of sample

Conventional

Specimen Adequacy

Smears are adequate and satisfactory for evaluation. Transformation zone component is seen.

Interpretation

Negative for intraepithelial lesion/malignancy (NILM).

Comment

Others: Polymorphs are seen at places masking squamous epithelial cells.

****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected, the patient is advised to contact the lab immediately for a recheck.

Dr. S.S. Soni
M.D. (PATHOLOGY)

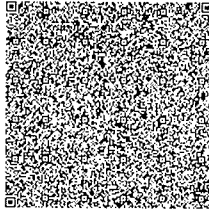


भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 0000/00231/83792

To
शिवानी कनौजिया
Shivani Kanaujia
C/O Ashok Kumar,
Fat No 602,
block I K D A Signature green apartment,
Indra Road Zoo Road Kesapur,
VTC: Kanpur,
PO: Swarup Nagar,
District: Kanpur Nagar,
State: Uttar Pradesh,
PIN Code: 208002,
Mobile: 9560253892



Signature Not Valid
Uniquely signed by 25
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA: 25
Date: 2023-12-21 16:20:25
GMT+05:30

आपका आधार क्रमांक / Your Aadhaar No. :

XXXX XXXX 3082

VID : 9137 4847 1915 8566

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Aadhaar no. issued: 12/02/2015



शिवानी कनौजिया
Shivani Kanaujia
जन्म तिथि/DOB: 29/09/1983
महिला/ FEMALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/
ऑफलाइन एनसम्पल की स्कैनिंग) के साथ किया जाना चाहिए।
Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).

XXXX XXXX 3082

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



सूचना / INFORMATION

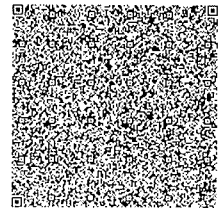
- आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। जन्मतिथि आधार नंबर धारक द्वारा प्रस्तुत सूचना और विनिर्दिष्ट जन्मतिथि के प्रमाण के दस्तावेज पर आधारित है।
- इस आधार पत्र को यूआईडीएआई द्वारा नियुक्त प्रमाणीकरण एजेंसी के जरिए ऑनलाइन प्रमाणीकरण के द्वारा सत्यापित किया जाना चाहिए या ऐप स्टोर में उपलब्ध एमआधार या आधार क्यूआर कोड स्कैनर ऐप से क्यूआर कोड को स्कैन करके या www.uidai.gov.in पर उपलब्ध सुरक्षित क्यूआर कोड रीडर का उपयोग करके सत्यापित किया जाना चाहिए।
- आधार विशिष्ट और सुरक्षित है।
- पहचान और पते के समर्थन में दस्तावेजों को आधार के लिए नामांकन की तारीख से प्रत्येक 10 वर्ष में कम से कम एक बार आधार में अपडेट कराना चाहिए।
- आधार विभिन्न सरकारी और गैर-सरकारी फायदों/सेवाओं का लाभ लेने में सहायता करता है।
- आधार में अपना मोबाइल नंबर और ईमेल आईडी अपडेट रखें।
- आधार सेवाओं का लाभ लेने के लिए एमआधार ऐप डाउनलोड करें।
- आधार/बायोमेट्रिक्स का उपयोग न करने के समय सुरक्षा सुनिश्चित करने के लिए आधार/बायोमेट्रिक्स लॉक/अनलॉक सुविधा का उपयोग करें।
- आधार की मांग करने वाले सहमति लेने के लिए वाच्य हैं।
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in.
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



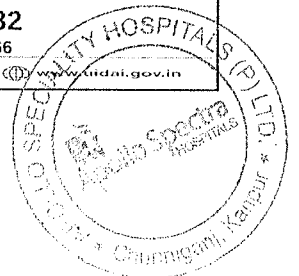
पता:
C/O अशोक कुमार, फ्लैट न 602, ब्लॉक आई के डी ए
सिगनेचर ग्रीन अपार्टमेंट, इन्द्रा रोड जू रोड केसापुर,
कानपुर, स्वरुप नगर, कानपुर नगर,
उत्तर प्रदेश - 208002
Address:
C/O Ashok Kumar, Fat No 602, block I K D A
Signature green apartment, Indra Road Zoo
Road Kesapur, Kanpur, PO: Swarup Nagar,
DIST: Kanpur Nagar,
Uttar Pradesh - 208002



XXXX XXXX 3082

VID : 9137 4847 1915 8566

1947 | help@uidai.gov.in | www.uidai.gov.in



Patient Name	: Mrs. SHIVANI KANAUIJA	Age/Gender	: 40 Y/F
UHID/MR No.	: SKAN.0000136140	OP Visit No	: SKANOPV168846
Sample Collected on	: 05-06-2024 09:44	Reported on	: 05-06-2024 18:50
LRN#	: LAB13518379	Specimen	: Serum(Spl)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 09560253892		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)			
TOTAL T3: TRI IODOTHYRONINE - SERUM Method: CLIA	1.03	0.6 - 1.81 ng/mL	ng/mL
TOTAL T4: THYROXINE - SERUM Method: CLIA	8.31	3.2 - 12.6	µg/dL
TSH: THYROID STIMULATING HORMONE - SERUM Method: CLIA	2.26	0.35 - 5.5 Pregnancy 1st Trimester 0.30 - 4.50 2nd Trimester 0.5 - 4.60 3rd Trimester 0.80 - 5.20	µIU/mL

---End Of Report---

Patient Name	: Mrs. SHIVANI KANAUIJA	Age/Gender	: 40 Y/F
UHID/MR No.	: SKAN.0000136140	OP Visit No	: SKANOPV168846
Sample Collected on	: 05-06-2024 09:44	Reported on	: 05-06-2024 18:48
LRN#	: LAB13518379	Specimen	: Serum
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 09560253892		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GAMMA GLUTAMYL TRANSFERASE (GGT)			
GAMMA GT Method: Kinetic Photometric	72*	< 38	U/L
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA Method: Jaffe's Kinetic	0.8	0.55 - 1.02	mg/dl
URIC ACID - SERUM Method: Modified Uricase	6.0	2.6 - 6.0	mg/dl
UREA - SERUM/PLASMA Method: Urease with indicator dye	23	Female: 15 - 36	mg/dl
CALCIUM Method: O-Cresolphthalein complexone	8.1*	8.5 - 10.1	mg/dl
BUN Method: Urease with indicator dye	10.72	7-17	mg/dl
PHOSPHORUS Method: Phosphomolybdate -UV	5.1*	2.5 - 4.5	mg/dl
ELECTROLYTES (Na) Method: ISE-Direct	142	135 - 145	meq/L
ELECTROLYTES (K) Method: ISE-Direct	4.0	3.5 - 5.1	meq/L
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL Method: Azobilirubin/dyphylline	0.59	0.2 - 1.3	mg/dL
BILIRUBIN (DIRECT) Method: Dual Wavelength Spectrophotometric	0.22	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
BILIRUBIN UNCONJUGATED(INDIRECT) Method: Dual Wavelength Spectrophotometric	0.37	0.0 - 1.1	mg/dL
ALBUMIN Method: Bromocresol Green dye binding	4.4	3.0 - 5.0	g/dL
PROTEIN TOTAL Method: Biuret Reaction	7.2	6.0 - 8.2	g/dL
AST (SGOT) Method: Kinetic (Leuco dye) with P 5 P	16	14 - 36	U/L
GLOBULINN Method: Calculation	2.8	2.8 - 4.5	g/dL
ALT(SGPT)	22	9 - 52	U/L
LIPID PROFILE			
CHOLESTEROL Method: CHOD-End Point POD (Enzymatic)	136	<200 - Desirable 200-239 - Borderline High ≥240 - High	mg/dL
HDL Method: Direct Measure PEG	56	<40 - Low ≥60 - High	mg/dL
LDL Method: Calculation Friedewald's Formula	62.8	< 100 - Optimal 100-129 - Near Optimal & Above Optimal	
TRIGLYCERIDES Method: Enzymatic GPO/POD/End Point	86	Normal : <150 Border High : 150 - 199 High : 200 - 499 Very High : ≥= 500	mg/dl

Patient Name : Mrs. SHIVANI KANAUIA

Age/Gender : 40 Y/F

VLDL
Method: Calculated

17.2

Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.

10-40

mg/dL

GLUCOSE, FASTING

Glucose - Plasma
Method: GOD-PAP

90*

Fasting

mg/dL

- Normal : < 100mg/dL
- Prediabetes : 100 – 125 mg/dL
- Diabetes : 126 mg/dL or higher

---End Of Report---

Patient Name	: Mrs. SHIVANI KANAUIA	Age/Gender	: 40 Y/F
UHID/MR No.	: SKAN.0000136140	OP Visit No	: SKANOPV168846
Sample Collected on	: 05-06-2024 09:44	Reported on	: 05-06-2024 15:14
LRN#	: LAB13518379	Specimen	: Blood(bio/EDTA)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 09560253892		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HbA1c, GLYCATED HEMOGLOBIN			
HbA1c, GLYCATED HEMOGLOBIN Method:HPLC	5.5	<=5.6: Non-Diabetic 5.7-6.4: Prediabetes (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	111.15		mg/dL

---End Of Report---

Patient Name	: Mrs. SHIVANI KANAUIJA	Age/Gender	: 40 Y/F
UHID/MR No.	: SKAN.0000136140	OP Visit No	: SKANOPV168846
Sample Collected on	: 05-06-2024 09:44	Reported on	: 05-06-2024 13:34
LRN#	: LAB13518379	Specimen	: Urine
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 09560253892		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.020	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	6.5 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	5-10	2-3	/hpf
RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

---End Of Report---

Patient Name : Mrs. SHIVANI KANAUIA

Age/Gender : 40 Y/F

UHID/MR No. : SKAN.0000136140

OP Visit No : SKANOPV168846

Sample Collected on : 05-06-2024 09:44

Reported on : 05-06-2024 13:28

LRN# : LAB13518379

Specimen : Blood(EDTA)

Ref Doctor : SELF

Emp/Auth/TPA ID : 09560253892

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology : Microscopic
RBC : Normocytic Normochromic
WBC : within normal limits. DLC is as mentioned.
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic blood picture
Note/Comment : Please Correlate clinically

---End Of Report---

Patient Name	: Mrs. SHIVANI KANAUIA	Age/Gender	: 40 Y/F
UHID/MR No.	: SKAN.0000136140	OP Visit No	: SKANOPV168846
Sample Collected on	: 05-06-2024 09:44	Reported on	: 05-06-2024 13:27
LRN#	: LAB13518379	Specimen	: Blood(EDTA)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 09560253892		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	11.8	11.5 - 15	g/dL
RBC Count Method: Electrical Impedance	4.59	3.8 - 4.8	millions/cu mm
Haematocrit Method: Calculated	37.4	36 - 46	%
MCV Method: Calculated	81.5*	83 - 101	fl
MCH Method: Calculated	25.7*	27 - 32	pg
MCHC Method: Calculated	31.6	31.5 - 34.5	g/dl
RDW	13.7	11.6 - 14	%
Platelet Count Method: Electrical Impedance	1.72	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	5400	4000 - 11000	cells/cumm
Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)			
Neutrophils	63	40 - 80	%
Lymphocytes	33	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	02	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	18	0 - 20	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
BLOOD GROUP ABO AND RH FACTOR			
ABO Method: Microplate Hemagglutination	B		
Rh (D) Type: Method: Microplate Hemagglutination	NEGATIVE		

---End Of Report---

Patient Name	: Mrs. SHIVANI KANAUIA	Age/Gender	: 40 Y/F
UHID/MR No.	: SKAN.0000136140	OP Visit No	: SKANOPV168846
Sample Collected on	:	Reported on	: 05-06-2024 12:03
LRN#	: RAD2343467	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 09560253892		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver- normal in size shape & echogenicity . No focal lesions. Intra hepatic biliary radicles not dilated. Portal vein is normal in course and caliber.

Gall Bladder- Normal in distension and wall thickness.No sizeable calculus or mass lesion.

CBD normal in course, caliber & clear in visualized region.

Pancreas - Normal in size, shape and echogenicity. No sizeable mass lesion.Main Pancreatic duct not dilated.

Spleen -normal in size, shape and echogenicity. No focal lesion. Splenic vein at hilum is normal caliber.

Retroperitoneum –obscured by bowel gas.

Bilateral Kidney -Normal in size, shape, position and echogenicity. Corticomedullary differentiation preserved. Pelvicalyceal system not dilated.No calculus or mass lesion. Bilateral ureter not dilated. **Right kidney mid pole calculus measuring 3.7mm & right mild renal fullness** .

Urinary Bladder –UB is partially distended. Pelvic organs could not be commented.

No evidence of ascites.

IMPRESSION:

Right renal calculus with right mild renal fullness

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Dr. DUSHYANT KUMAR VARSHNEY

MD, DNB

Radiology

Health Check up Booking Confirmed Request(35ES6643),Package Code-PKG10000450, Beneficiary Code-313267

Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Tue 04-06-2024 16:40

To:shivani2529@gmail.com <shivani2529@gmail.com>

Cc:Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>



011-41195959

Dear **SHIVANI KANAUIA**,

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

Hospital Package Name : Mediwheel Annual Health Checkup Female Starter

Patient Package Name : Executive Health Checkup Female For Self And Spouse

Name of Diagnostic/Hospital : Apollo Spectra - Kanpur

Address of Diagnostic/Hospital- : 14/138 ,Chunni Ganj Mal Road,Kanpur,Kanpur Nagar - 208001

City : Kanpur

State : Uttar Pradesh

Pincode : 208001

Appointment Date : 05-06-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:30am

Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
SHIVANI KANAUIA	40 year	Female
Ashok kumar	41 year	Male

Note - Please note to not pay any amount at the center.

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.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.

- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,

Mediwheel Team

Please Download Mediwheel App



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

Please visit to our [Terms & Conditions](#) for more informaion. [Click here](#) to unsubscribe.

@ 2024 - 25, Arcofemi Healthcare Pvt Limited.(Mediwheel)

Patient Name : Mr. ASHOK KUMAR **Age/Gender** : 41 Y/M

UHID/MR No. : SKAN.0000136139 **OP Visit No** : SKANOPV168866
Sample Collected on : 06-06-2024 12:56 **Reported on** : 06-06-2024 13:22
LRN# : LAB13518699 **Specimen** : Plasma(PP)
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE -
PAN INDIA - FY2324
Emp/Auth/TPA ID : 35ES6643
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)			
Glucose - Plasma Method: GOD-PAP	128	Post prandial : < 140 mg/dL Random : <200mg/dL	mg/dL

---End Of Report---

MEDICAL EXAMINATION REPORT

NAME: Mr. ASHOK KUMAR

AGE/SEX: 41Y/MALE

DATE OF BIRTH: 05/08/1982

ADDRESS: 802, I - BLOCK, KDA SIGNATURE GREEN KANPUR-208026

OBSERVATIONS

- | | |
|--------------------------|---------------------|
| 1. DIABETES MELLITUS: NO | 2. HYPERTENSION: NO |
| 3. C.O.P.D.: NO | 4. TUBERCULOSIS: NO |
| 5. EYE DISORDER: NO | 6. PARALYSIS: NO |
| ➤ EPILEPSY: NO | 8. DENTAL: NORMAL |
| 9. E.N.T.: NORMAL | |

BLOOD PRESSURE: 140/80 mmhg

PULSE: 81 bpm

WEIGHT: 81 kg

RESPIRATORY RATE: 19/Pm

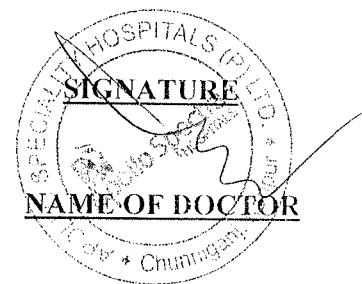
HEIGHT: 173cm

BMI:27.1 kg/m²

Advice to consult gastroenterologist due to subcutaneous lipomas.

PLACE: Kanpur

DATE: 05/06/2024



Mr. Ashok

Mr. Ashok
 R.R. 225 spl 6/6
 101 200 spl 6/6
 (Distt)

Mr. Ashok
 Add. 125 spl
 Add. 125 spl

Colour Vision

W.M.
 R.R.
 cmo entire intermediate

Dr. Jyoti
 510
 4484

81 bpm

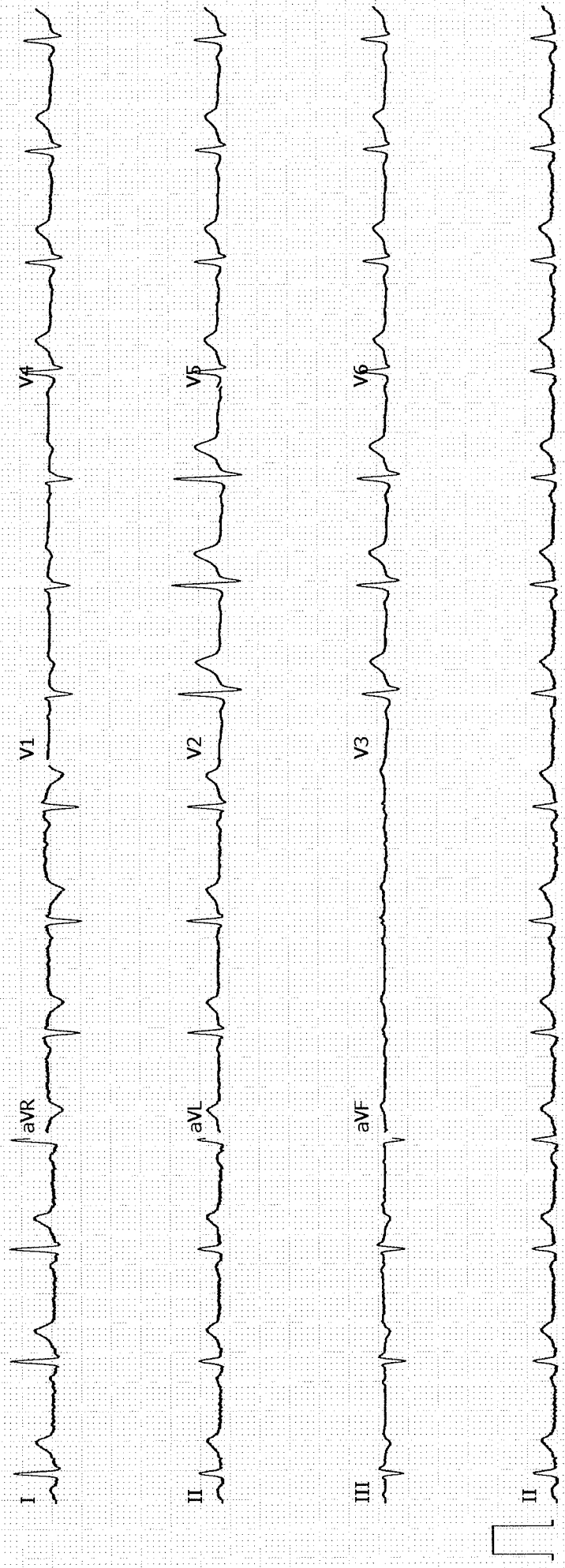
--/-- mmHg

Mrs. Ashok Kumar
Age 41/M

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

Room:
Order Number:
Indir n:
Medication 1:
Medication 2:
Medication 3:

QRS : 84 ms
QT / QTcBaz : 346 / 401 ms
PR : 136 ms
P : 40 ms
RR / PP : 738 / 740 ms
P / QRS / T : 24 / 5 / 21 degrees



Patient Name : Mr. ASHOK KUMAR
UHID : SKAN.0000136139
Reported on : 05-06-2024 13:24
Adm/Consult Doctor :

Age : 41 Y M
OP Visit No : SKANOPV168876
Printed on : 05-06-2024 13:25
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver- normal in size shape & echotexture . No focal lesions. Intra hepatic biliary radicles not dilated. Portal vein is normal in course and caliber.

Gall Bladder- Normal in distension and wall thickness.No sizeable calculus or mass lesion.

CBD normal in course, caliber & clear in visualized region.

Pancreas - Normal in size, shape and echogenecity. No sizeable mass lesion.Main Pancreatic duct not dilated.

Spleen -normal in size, shape and echogenecity. No focal lesion. Splenic vein at hilum is normal caliber.

Retroperitoneum –obscured by bowel gas.

Bilateral Kidney -Normal in size, shape, position and echogenecity. Corticomedullary differentiation preserved.

Pelvicalyceal system not dilated.No mass or calculus lesion. Bilateral ureter not dilated.

Urinary Bladder –is empty. Pelvic organs could not be commented.

No evidence of ascites.

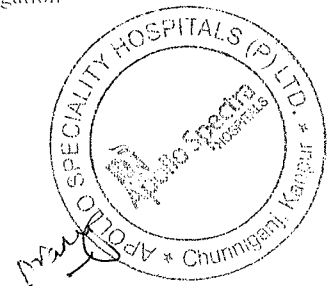
Multiple small hyperechoic lesions seen in subcutaneous plane in anterior abdominal wall - subcutaneous lipomas

IMPRESSION:

Multiple anterior abdominal wall subcutaneous lipomas.

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion. Not valid for medico legal purpose.



Printed on:05-06-2024 13:24

---End of the Report---

Dr. DUSHYANT KUMAR VARSHNEY

MD, DNB

Radiology

Patient Name : Mr. ASHOK KUMAR

Age : 41 Y.M

UHID : SKAN.0000136139

OP Visit No : SKANOPV168845

Reported on : 05-06-2024 11:43

Printed on : 05-06-2024 11:43

Adm/Consult Doctor :

Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

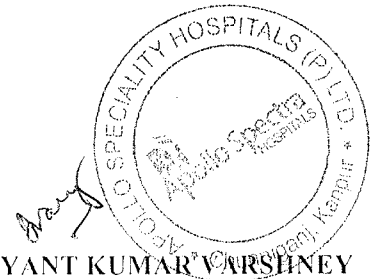
Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

Printed on:05-06-2024 11:43

---End of the Report---



Dr. DUSHYANT KUMAR VARSHNEY

MD. DNB

Radiology

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. ASHOK KUMAR	Age / Gender : 41Y/Male
UHID/MR No. : SKAN.0000136139	OP Visit No : SKANOPV168866
Sample Collected on : 05-06-2024 11:42	Reported on : 05-06-2024 13:46
LRN# : LAB13518699	Specimen : Blood(EDTA)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 35ES6643	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	15.7	13 - 17	g/dL
RBC Count Method: Electrical Impedance	5.25	4.5 - 5.5	millions/cu mm
Haematocrit Method: Calculated	45.7	40 - 50	%
MCV Method: Calculated	87.0	83 - 101	fl
MCH Method: Calculated	29.9	27 - 32	pg
MCHC Method: Calculated	34.4	31.5 - 34.5	g/dl
RDW	13.2	11.6 - 14	%
Platelet Count Method: Electrical Impedance	2.00	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	8200	4000 - 11000	cells/cumm

Results are to be correlated clinically



Satinder Singh

Lab Technician / Technologist
NOTE: All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.
Dr. SATINDER SINGH
MD

1 Pathology
Pata Digniniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. ASHOK KUMAR	Age / Gender : 41Y/Male
UHID/MR No. : SKAN.0000136139	OP Visit No : SKANOPV168866
Sample Collected on : 05-06-2024 11:42	Reported on : 05-06-2024 13:46
LRN# : LAB13518699	Specimen : Blood(EDTA)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 35ES6643	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)

Neutrophils	60	40 - 80	%
Lymphocytes	35	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	03	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	10	0 - 14	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
BLOOD GROUP ABO AND RH FACTOR			
ABO Method: Microplate Hemagglutination	B		
Rh (D) Type: Method: Microplate Hemagglutination	POSITIVE		

End of the report



Results are to be correlated clinically



Lab Technician / Technologist

NOTE: All biological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

Dr. SATINDER SINGH
SONI
MD

Pathology, Ghunniaganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550



DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. ASHOK KUMAR **Age / Gender** : 41Y/Male
UHID/MR No. : SKAN.0000136139 **OP Visit No** : SKANOPV168866
Sample Collected on : 05-06-2024 11:42 **Reported on** : 05-06-2024 18:54
LRN# : LAB13518699 **Specimen** : Plasma(Flouride)
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
STANDARD PLUS MALE - PAN INDIA - FY2324
Emp/Auth/TPA ID : 35ES6643 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE, FASTING			
Glucose - Plasma Method: GOD-PAP	102	Fasting - Normal : < 100mg/dL - Prediabetes : 100 – 125 mg/dL - Diabetes : 126 mg/dL or higher	mg/dL
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA Method: Jaffe's Kinetic	1.1	0.7 - 1.3	mg/dl
URIC ACID - SERUM Method: Modified Uricase	7.1	3.5 – 7.2	mg/dl
UREA - SERUM/PLASMA Method: Urease with indicator dye	23	Male: 19 - 43	mg/dl
CALCIUM Method: O-Cresolphthalein complexone	8.3*	8.5 - 10.1	mg/dl
BUN Method: Urease with indicator dye	10.72	9-20	mg/dl
PHOSPOHORUS Method: Phosphomolybdate -UV	4.5	2.5 - 4.5	mg/dl



Results are to be correlated clinically

Satinder Singh

Lab Technician / Technologist
NOTE : All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Dr. SATINDER SINGH
Excel Hospitals (P) Ltd.

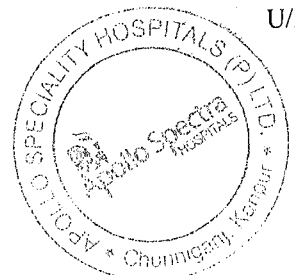
14/38, Chhinniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. ASHOK KUMAR	Age / Gender : 41Y/Male
UHID/MR No. : SKAN.0000136139	OP Visit No : SKANOPV168866
Sample Collected on : 05-06-2024 11:42	Reported on : 05-06-2024 18:54
LRN# : LAB13518699	Specimen : Plasma(Flouride)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 35ES6643	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

ELECTROLYTES (Na)	138	135 - 145	meq/L
Method: ISE-Direct			
ELECTROLYTES (K)	4.2	3.5 - 5.1	meq/L
Method: ISE-Direct			
GAMMA GLUTAMYL TRANFERASE (GGT)			
GAMMA GT	47	< 55	U/L
Method: Kinetic Photometric			
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL	1.11	0.2 - 1.3	mg/dL
Method: Azobilirubin/dyphylline			
BILIRUBIN (DIRECT)	0.28	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
Method: Dual Wavelength Spectrophotometric			
BILIRUBIN UNCONJUGATED(INDIRECT)	0.83	0.0 - 1.1	mg/dL
Method: Dual Wavelength Spectrophotometric			
ALBUMIN	4.7	3.0 - 5.0	g/dL
Method: Bromocresol Green dye binding			
PROTEIN TOTAL	7.5	6.0 - 8.2	g/dL
Method: Biuret Reaction			
AST (SGOT)	32	14 - 36	U/L
Method: Kinetic (Leuco dye) with P 5 P			
GLOBULINN	2.8	2.8 - 4.5	g/dL
Method: Calculation			
ALT(SGPT)	36	9 - 52	U/L

Results are to be correlated clinically



Satinder Singh

Dr. SATINDER SINGH

Excel Hospitals (P) Ltd.

Pathology
14/38, Chunnigany, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

Lab Technician / Technologist
NOTE : All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

DEPARTMENT OF LABORATORY SERVICES

Patient Name :	Mr. ASHOK KUMAR	Age / Gender :	41Y/Male
UHID/MR No. :	SKAN.0000136139	OP Visit No :	SKANOPV168866
Sample Collected on :	05-06-2024 11:42	Reported on :	05-06-2024 18:54
LRN# :	LAB13518699	Specimen :	Plasma(Flouride)
Ref Doctor :	SELF		
Package Name :	ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID :	35ES6643	Adm/Consult Doctor :	
Sponsor Name :	ARCOFEMI HEALTHCARE LIMITED		

LIPID PROFILE

CHOLESTEROL	180	<200 - Desirable 200-239 - Borderline High ≥240 - High	mg/dL
Method: CHOD-End Point POD (Enzymatic)			
HDL	54	<40 - Low ≥60 - High	mg/dL
Method: Direct Measure PEG			
LDL	98.4	< 100 - Optimal 100-129 - Near Optimal & Above Optimal	
Method: Calculation Friedewald's Formula			
TRIGLYCERIDES	138	Normal : <150 Border High : 150 - 199 High : 200 - 499 Very High : ≥= 500	mg/dl
Method: Enzymatic GPO/POD/End Point			
VLDL	27.6	10-40	mg/dL
Method: Calculated			

End of the report



Results are to be correlated clinically



Dr. SATINDER SINGH

Excel Hospitals (P) Ltd.

Pathology
14/436, Chunniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

Lab Technician / Technologist
NOTE : All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. ASHOK KUMAR	Age / Gender : 41Y/Male
UHID/MR No. : SKAN.0000136139	OP Visit No : SKANOPV168866
Sample Collected on : 05-06-2024 11:42	Reported on : 05-06-2024 13:50
LRN# : LAB13518699	Specimen : Urine
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 35ES6643	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.025	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	5.0 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	Occasional	2-3	/hpf



Results are to be correlated clinically



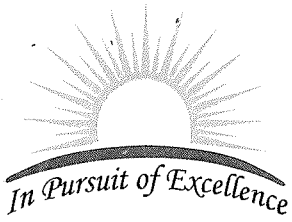
Lab Technician / Technologist

NOTE: All biological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

Dr. SATINDER SINGH
MBBS
MD

Pathology
Chunniganj, Kanpur - 208001
Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550



SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 0512-2219667, 8858154254

e-mail : sonidiagnostics01@gmail.com

Patient Name : MR. ASHOK KUMAR

Age / Gender : 41 years / Male

Patient ID : 51232

Source : Excel Hospital

Referral : SELF

Collection Time : 05/06/2024, 12:30 p.m.

Reporting Time : 05/06/2024, 04:13 p.m.

Sample ID :



241570004

Test Description	Value(s)	Reference Range	Unit(s)
------------------	----------	-----------------	---------

SAMPLE TYPE : SERUM

T3 Method : CLIA	0.86	0.79 - 1.58	ng/mL
T4 Method : CLIA	6.94	5.2-12.7	µg/dL
TSH Method : CLIA	2.08	0.3-4.5	µIU/mL

Interpretation

TSH	T4	T3	INTERPRETATION
HIGH	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPOTHYROIDISM
HIGH	LOW OR NORMAL	LOW OR NORMAL	HYPOTHYROIDISM
LOW	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPERTHYROIDISM
LOW	HIGH OR NORMAL	HIGH OR NORMAL	HYPERTHYROIDISM
LOW	LOW OR NORMAL	LOW OR NORMAL	NON-THYROIDAL ILLNESS: RARE PITUITARY (SECONDARY)HYPOTHYROIDISM

****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected ,the patient is advised to contact the lab immediately for a recheck.

Dr. S.S.Soni
M.D. (PATHOLOGY)





भारत सरकार



आधार

भारत सरकार
Government of India

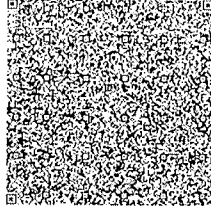
भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 0656/23495/01735

To
अशोक कुमार
Ashok Kumar
C/O: Jogendra Singh
Fat No 602
block I K D A Signature green apartment
Indra Road Zoo Road Kesapur
Kanpur
Kanpur Nagar Uttar Pradesh - 208002
9910123854

Signature Not Verified

Digitally signed by 73
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA 02
Date: 2023.07.21 16:31:02
UTC



आपका आधार क्रमांक / Your Aadhaar No. :

XXXX XXXX 6156
VID : 9167 0213 6411 8622

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Issue Date: 12/02/2015

अशोक कुमार
Ashok Kumar
जन्म तिथि/DOB: 05/08/1982
पुरुष/ MALE

XXXX XXXX 6156
VID : 9167 0213 6411 8622

मेरा आधार, मेरी पहचान



Government of India



AADHAAR

सूचना / INFORMATION

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- आधार विशिष्ट और सुरक्षित है।
- सुरक्षित क्यूआर कोड/ऑफलाइन एक्सएमएल/ऑनलाइन प्रमाणोत्तरण का उपयोग करके पहचान सत्यापित करें।
- आधार के सभी रूप जैसे आधार पत्र, पीवीसी कार्ड, ई-आधार और एम-आधार समान रूप से मान्य हैं। १२ अंकों की आधार संख्या के स्थान पर आभासी (वर्चुअल) आधार पहचान (VID) का भी उपयोग किया जा सकता है।
- १० साल में कम से कम एक बार आधार अपडेट जरूर करें।
- आधार आपको विभिन्न सरकारी और गैर-सरकारी योजनाओं/सेवाओं का लाभ उठाने में मदद करता है।
- आधार में अपना मोबाइल नंबर और ई-मेल आईडी अपडेट रखें।
- आधार सेवाओं का लाभ उठाने के लिए स्मार्टफोन पर mAadhaar ऐप डाउनलोड करें।
- आधार/बायोमेट्रिक्स को लॉक/अनलॉक करने की विरोधता का उपयोग सुरक्षा सुनिश्चित करने के लिए करें।
- आधार (पत्र/ नंबर) चाहने वाली संस्थायों को उचित सहमति लेने के लिए बाध्य किया गया है।
- Aadhaar is a proof of identity, not of citizenship.
- Aadhaar is unique and secure.
- Verify identity using secure QR code/offline XML/online Authentication.
- All forms of Aadhaar like Aadhaar letter, PVC Cards, eAadhaar and mAadhaar are equally valid. Virtual Aadhaar Identity (VID) can also be used in place of 12 digit Aadhaar number.
- Update Aadhaar at least once in 10 years.
- Aadhaar helps you avail various Government and Non- Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app on smart phones to avail Aadhaar Services.
- Use the feature of lock/unlock Aadhaar/biometrics to ensure security.
- Entities seeking Aadhaar are obligated to seek due consent.



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

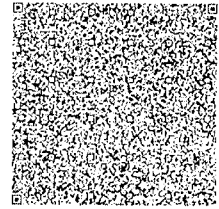


पता:

द्वारा: जोगेन्द्र सिंह, फ्लैट न 602, ब्लॉक आई के डी ए
सिगनेचर ग्रीन अपार्टमेंट, इन्द्रा रोड जू रोड केसापुर,
कानपुर, कानपुर नगर,
उत्तर प्रदेश - 208002

Address:

C/O: Jogendra Singh, Fat No 602, block I K D
A Signature green apartment, Indra Road Zoo
Road Kesapur, Kanpur, Kanpur Nagar,
Uttar Pradesh - 208002



XXXX XXXX 6156
VID : 9167 0213 6411 8622



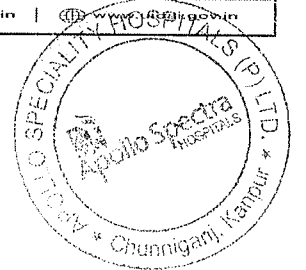
1947



help@uidai.gov.in



www.uidai.gov.in



Patient Name	: Mr. ASHOK KUMAR	Age/Gender	: 41 Y/M
UHID/MR No.	: SKAN.0000136139	OP Visit No	: SKANOPV168866
Sample Collected on	: 05-06-2024 11:42	Reported on	: 05-06-2024 18:56
LRN#	: LAB13518699	Specimen	: Serum(Spl)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 35ES6643		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)			
TOTAL T3: TRI IODOTHYRONINE - SERUM Method: CLIA	0.86	0.6 - 1.81 ng/mL	ng/mL
TOTAL T4: THYROXINE - SERUM Method: CLIA	6.94	3.2 - 12.6	µg/dL
TSH: THYROID STIMULATING HORMONE - SERUM Method: CLIA	2.08	0.35 - 5.5	µIU/mL

---End Of Report---

Patient Name	: Mr. ASHOK KUMAR	Age/Gender	: 41 Y/M
UHID/MR No.	: SKAN.0000136139	OP Visit No	: SKANOPV168866
Sample Collected on	: 05-06-2024 11:42	Reported on	: 05-06-2024 18:54
LRN#	: LAB13518699	Specimen	: Plasma(Flouride)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 35ES6643		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE, FASTING			
Glucose - Plasma Method: GOD-PAP	102	Fasting - Normal : < 100mg/dL - Prediabetes : 100 – 125 mg/dL - Diabetes : 126 mg/dL or higher	mg/dL
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA Method: Jaffe's Kinetic	1.1	0.7 - 1.3	mg/dl
URIC ACID - SERUM Method: Modified Uricase	7.1	3.5 – 7.2	mg/dl
UREA - SERUM/PLASMA Method: Urease with indicator dye	23	Male: 19 - 43	mg/dl
CALCIUM Method: O-Cresolphthalein complexone	8.3*	8.5 - 10.1	mg/dl
BUN Method: Urease with indicator dye	10.72	9-20	mg/dl
PHOSPHORUS Method: Phosphomolybdate -UV	4.5	2.5 - 4.5	mg/dl
ELECTROLYTES (Na) Method: ISE-Direct	138	135 - 145	meq/L
ELECTROLYTES (K) Method: ISE-Direct	4.2	3.5 - 5.1	meq/L
GAMMA GLUTAMYL TRANSFERASE (GGT)			
GAMMA GT Method: Kinetic Photometric	47	< 55	U/L
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL Method: Azobilirubin/dyphylline	1.11	0.2 - 1.3	mg/dL
BILIRUBIN (DIRECT) Method: Dual Wavelength Spectrophotometric	0.28	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
BILIRUBIN UNCONJUGATED(INDIRECT) Method: Dual Wavelength Spectrophotometric	0.83	0.0 - 1.1	mg/dL
ALBUMIN Method: Bromocresol Green dye binding	4.7	3.0 - 5.0	g/dL
PROTEIN TOTAL Method: Biuret Reaction	7.5	6.0 - 8.2	g/dL
AST (SGOT) Method: Kinetic (Leuco dye) with P 5 P	32	14 - 36	U/L
GLOBULINN Method: Calculation	2.8	2.8 - 4.5	g/dL
ALT(SGPT)	36	9 - 52	U/L
LIPID PROFILE			
CHOLESTEROL Method: CHOD-End Point POD (Enzymatic)	180	<200 - Desirable 200-239 - Borderline High >=240 - High	mg/dL
HDL Method: Direct Measure PEG	54	<40 - Low >=60 - High	mg/dL

Patient Name : Mr. ASHOK KUMAR

Age/Gender : 41 Y/M

LDL Method: Calculation Friedewald's Formula	98.4	< 100 - Optimal 100-129 - Near Optimal & Above Optimal	
TRIGLYCERIDES Method: Enzymatic GPO/POD/End Point	138	Normal : <150 Border High : 150 - 199 High : 200 - 499 Very High : >= 500 Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.	mg/dl
VLDL Method: Calculated	27.6	10-40	mg/dL

---End Of Report---

Patient Name	: Mr. ASHOK KUMAR	Age/Gender	: 41 Y/M
UHID/MR No.	: SKAN.0000136139	OP Visit No	: SKANOPV168866
Sample Collected on	: 05-06-2024 11:42	Reported on	: 05-06-2024 15:15
LRN#	: LAB13518699	Specimen	: Blood(bio/EDTA)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 35ES6643		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HbA1c, GLYCATED HEMOGLOBIN			
HbA1c, GLYCATED HEMOGLOBIN Method:HPLC	5.4	<=5.6: Non-Diabetic 5.7-6.4: Prediabetes (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	108.28		mg/dL

---End Of Report---

Patient Name	: Mr. ASHOK KUMAR	Age/Gender	: 41 Y/M
UHID/MR No.	: SKAN.0000136139	OP Visit No	: SKANOPV168866
Sample Collected on	: 05-06-2024 11:42	Reported on	: 05-06-2024 13:50
LRN#	: LAB13518699	Specimen	: Urine
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 35ES6643		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.025	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	5.0 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	Occasional	2-3	/hpf
RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

---End Of Report---

Patient Name : Mr. ASHOK KUMAR

Age/Gender : 41 Y/M

UHID/MR No. : SKAN.0000136139

OP Visit No : SKANOPV168866

Sample Collected on : 05-06-2024 11:42

Reported on : 05-06-2024 13:48

LRN# : LAB13518699

Specimen : Blood(EDTA)

Ref Doctor : SELF

Emp/Auth/TPA ID : 35ES6643

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology : Microscopic
RBC : Normocytic Normochromic
WBC : within normal limits. DLC is as mentioned.
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic blood picture
Note/Comment : Please Correlate clinically

---End Of Report---

Patient Name	: Mr. ASHOK KUMAR	Age/Gender	: 41 Y/M
UHID/MR No.	: SKAN.0000136139	OP Visit No	: SKANOPV168866
Sample Collected on	: 05-06-2024 11:42	Reported on	: 05-06-2024 13:46
LRN#	: LAB13518699	Specimen	: Blood(EDTA)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 35ES6643		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	15.7	13 - 17	g/dL
RBC Count Method: Electrical Impedance	5.25	4.5 - 5.5	millions/cu mm
Haematocrit Method: Calculated	45.7	40 - 50	%
MCV Method: Calculated	87.0	83 - 101	fl
MCH Method: Calculated	29.9	27 - 32	pg
MCHC Method: Calculated	34.4	31.5 - 34.5	g/dl
RDW	13.2	11.6 - 14	%
Platelet Count Method: Electrical Impedance	2.00	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	8200	4000 - 11000	cells/cumm
Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)			
Neutrophils	60	40 - 80	%
Lymphocytes	35	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	03	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	10	0 - 14	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
BLOOD GROUP ABO AND RH FACTOR			
ABO Method: Microplate Hemagglutination	B		
Rh (D) Type: Method: Microplate Hemagglutination	POSITIVE		

---End Of Report---

Patient Name	: Mr. ASHOK KUMAR	Age/Gender	: 41 Y/M
UHID/MR No.	: SKAN.0000136139	OP Visit No	: SKANOPV168866
Sample Collected on	:	Reported on	: 05-06-2024 11:41
LRN#	: RAD2343642	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 35ES6643		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

Dr. DUSHYANT KUMAR VARSHNEY
MD, DNB
Radiology