



प्रति,

समन्वयक,
Mediwheel (Arcofemi Healthcare Limited)
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई केशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	AMIT YADAV
जन्म की तारीख	12-08-1987
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	09-03-2024
बुकिंग संदर्भ सं.	23M180899100096834S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MRS. YADAV RAJNISH
कर्मचारी की क.कू.संख्या	180899
कर्मचारी का पद	SINGLE WINDOW OPERATOR A
कर्मचारी के कार्य का स्थान	GHAZIABAD, INDIRAPURAM
कर्मचारी के जन्म की तारीख	18-01-1995

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 05-03-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार केशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	AMIT YADAV
DATE OF BIRTH	12-06-1987
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	09-03-2024
BOOKING REFERENCE NO.	23M180899100096834S
SPOUSE DETAILS	
EMPLOYEE NAME	MRS. YADAV RAJNISH
EMPLOYEE EC NO.	180899
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	GHAZIABAD, INDIRAPURAM
EMPLOYEE BIRTHDATE	18-01-1995

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **05-03-2024** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

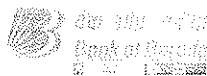
We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	vLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation

भारत सरकार
GOVERNMENT OF INDIA



अमित यादव
Aarjit Yadav
जन्म तिथि/DOB: 12/08/1987
पुरुष / MALE



3844 7894 7318

-आम आदमी का अधिकार

Aarjit

भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:

आत्मज: राजेंद्र सिंह, 601,
ओल्ड विजय नगर,
गाजियाबाद, गाजियाबाद,
उत्तर प्रदेश - 201009

Address:

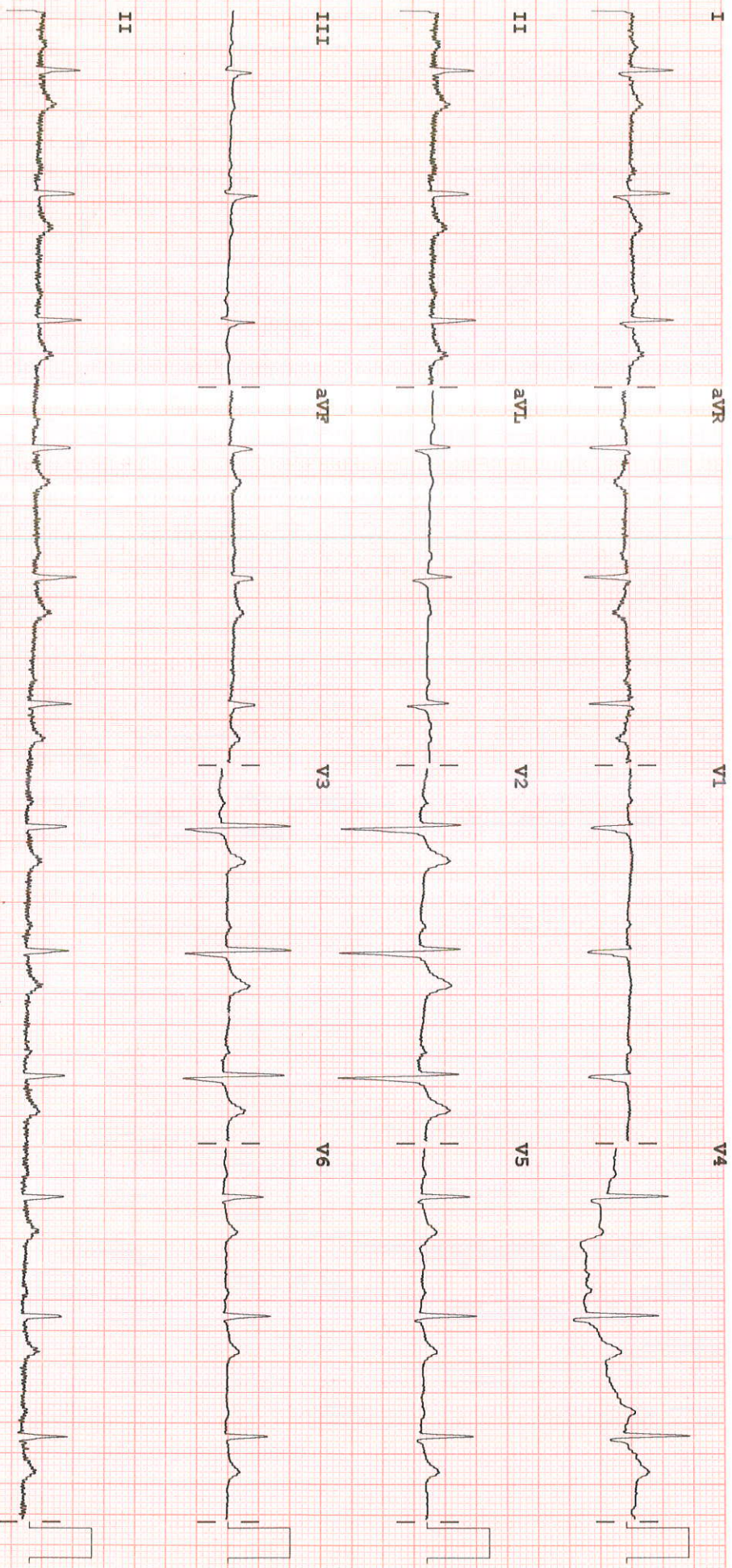
S/O: Rajendra Singh, 601, old vijay
nagar, Ghazabad, Ghazabad,
Uttar Pradesh - 201009

3844 7894 7318

-Aam Admi ka Adhikar

- NORMAL ECG -

Unconfirmed Diagnosis



Dev:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60 ~ 0.15-100 Hz

PH100B CL P?



INVESTIGATION REPORT

Patient Name	MR AMIT YADAV	Location	Ghaziabad
Age/Sex	36Year(s)/male	Visit No	: V00000000001-GHZB
MRN No	MH011761030	Order Date	:09/03/2024
Ref. Doctor	Dr. ABHISHEK SINGH	Report Date	:09/03/2024

Echocardiography

Final Interpretation

1. No RWMA, LVEF=60%.
2. Normal CCD.
3. Trace MR, No AR.
4. Trace TR, PASP-16mmHg.
5. No intracardiac clot/mass/pericardial pathology.
6. IVC normal

Chambers & valves:

- **Left Ventricle:** It is normal sized.
- **Left Atrium:** It is normal sized.
- **Right Atrium:** It is normal sized.
- **Right Ventricle:** It is normal sized.
- **Aortic Valve:** It appears normal.
- **Mitral Valve:** Opens normally. Subvalvular apparatus appear normal. Trace MR.
- **Tricuspid Valve:** Trace TR, PASP-16mmHg.
- **Pulmonic Valve:** It appears normal.
- **Main Pulmonary artery & its branches:** Appear normal.
- **Pericardium:** There is no pericardial effusion.

Description:

- LV is normal size with normal contractility.

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P : 0120-3535353

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017

P +91 80 4936 0300 E info@manihospitals.com www.manipalhospitals.com



Patient Name	MR AMIT YADAV	Location	Ghaziabad
Age/Sex	36Year(s)/male	Visit No	: V0000000001-GHZB
	MH011761030	Order Date	09/03/2024
Ref. Doctor	: Dr.ABHISHEK SINGH	Report Date	09/03/2024

Echocardiography**Measurements (mm):**

	Observed values	Normal values
Aortic root diameter	32	20-36 (22mm/M ²)
Aortic valve opening	20	15-26
Left atrium size	34	19-40

	End Diastole	End Systole	Normal Values
Left ventricle size	44	29	(ED=37-56:Es=22-40)
Interventricular septum	09	11	(ED=6-12)
Posterior wall thickness	08	13	(ED=5-10)

LV Ejection Fraction (%)	60%	55%-80%
HR		

Color & Doppler evaluation

Valve	Velocity(cm/s)	Regurgitation
Mitral	E/A-75/41 DT-	Nil
Aortic	136	Nil
Tricuspid	23	Nil
Pulmonary	70	Nil

Dr. Bhupendra Singh
MD, DM (CARDIOLOGY), FACC
Sr. Consultant Cardiology


Dr. Abhishek Singh
MD, DNB (CARDIOLOGY), MNAMS
Sr. Consultant Cardiology

Dr. Sudhanshu Mishra
Cardiology Registrar

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002
: 0120-3535353

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U85110KA2003PTC033055

The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017
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LABORATORY REPORT

Name : MR AMIT YADAV Age : 36 Yr(s) Sex :Male
Registration No : MH011761030 Lab No : 202403001085
Patient Episode : H18000001890 Collection Date : 09 Mar 2024 10:17
Referred By : HEALTH CHECK MGD Reporting Date : 09 Mar 2024 13:39
Receiving Date : 09 Mar 2024 10:17

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

THYROID PROFILE, Serum

Specimen Type : Serum

T3 - Triiodothyronine (ELFA)	0.910	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	7.590	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	1.580	μIU/mL	[0.250-5.000]

NOTE :

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

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

The TSH assay aids in diagnosing thyroid or hypophysial disorders.

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

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



LABORATORY REPORT

Name : MR AMIT YADAV Age : 36 Yr(s) Sex : Male
Registration No : MH011761030 Lab No : 202403001085
Patient Episode : H18000001890 Collection Date : 09 Mar 2024 10:17
Referred By : HEALTH CHECK MGD Reporting Date : 10 Mar 2024 13:40
Receiving Date : 09 Mar 2024 10:17

BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Blood Group & Rh Typing (Agglutination by gel/tube technique)			Specimen-Blood
Blood Group & Rh typing	O Rh(D) Positive		

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

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NOTE:

- Abnormal Values

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

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : MR AMIT YADAV
Registration No : MH011761030
Patient Episode : H18000001890
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Mar 2024 10:17

Age : 36 Yr(s) Sex : Male
Lab No : 202403001085
Collection Date : 09 Mar 2024 10:17
Reporting Date : 09 Mar 2024 12:22

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDENCE)	4.85	millions/cumm	[4.50-5.50]
HEMOGLOBIN	15.4	g/dl	[13.0-17.0]
Method: cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	45.6	%	[40.0-50.0]
MCV (DERIVED)	94.0	fL	[83.0-101.0]
MCH (CALCULATED)	31.8	pg	[25.0-32.0]
MCHC (CALCULATED)	33.8	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.0	%	[11.6-14.0]
Platelet count	154	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	14.0		
WBC COUNT (TC) (IMPEDENCE)	6.83	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	61.0	%	[40.0-80.0]
Lymphocytes	30.0	%	[20.0-40.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	2.0	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
ESR	35.0 #	mm/1sthour	[0.0-



LABORATORY REPORT

Name	: MR AMIT YADAV	Age	: 36 Yr(s) Sex :Male
Registration No	: MH011761030	Lab No	: 202403001085
Patient Episode	: H18000001890	Collection Date	: 09 Mar 2024 10:17
Referred By	: HEALTH CHECK MGD	Reporting Date	: 09 Mar 2024 14:14
Receiving Date	: 09 Mar 2024 10:17		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	5.1	%	[0.0-5.6]
Method: HPLC			
			As per American Diabetes Association(ADA)
			HbA1c in %
			Non diabetic adults >= 18years <5.7
			Prediabetes (At Risk) 5.7-6.4
			Diagnosing Diabetes >= 6.5
Estimated Average Glucose (eAG)	100	mg/dl	

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

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction [pH]	5.0	(4.6-8.0)
Specific Gravity	1.010	(1.003-1.035)

CHEMICAL EXAMINATION

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



LABORATORY REPORT

Name	: MR AMIT YADAV	Age	: 36 Yr(s) Sex :Male
Registration No	: MH011761030	Lab No	: 202403001085
Patient Episode	: H18000001890	Collection Date	: 09 Mar 2024 11:17
Referred By	: HEALTH CHECK MGD	Reporting Date	: 10 Mar 2024 13:11
Receiving Date	: 09 Mar 2024 11:17		

CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION (Automated/Manual)

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

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	229 #	mg/dl	[<200]
Method:Oxidase,esterase, peroxide			Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	187 #	mg/dl	[<150]
			Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	52	mg/dl	[35-65]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	37 #	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	140.0 #	mg/dl	[<120.0]
			Near/ Borderline High:130-159 High Risk:160-189
T.Chol/HDL.Chol ratio (Calculated)	4.4		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio (Calculated)	2.7		<3 Optimal 3-4 Borderline >6 High Risk

Above optimal-100-129



Name	: MR AMIT YADAV	Age	: 36 Yr(s) Sex :Male
Registration No	: MH011761030	Lab No	: 202403001085
Patient Episode	: H18000001890	Collection Date	: 09 Mar 2024 10:17
Referred By	: HEALTH CHECK MGD	Reporting Date	: 09 Mar 2024 12:11
Receiving Date	: 09 Mar 2024 10:17		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Note:

Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

KIDNEY PROFILE

Specimen: Serum

UREA	18.4	mg/dl	[15.0-40.0]
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Method: GLDH, Kinatic assay

BUN, BLOOD UREA NITROGEN	8.6	mg/dl	[8.0-20.0]
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Method: Calculated

CREATININE, SERUM	0.88	mg/dl	[0.70-1.20]
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Method: Jaffe rate-IDMS Standardization

URIC ACID	6.3	mg/dl	[4.0-8.5]
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Method:uricase PAP

SODIUM, SERUM	136.90	mmol/L	[136.00-144.00]
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POTASSIUM, SERUM	4.55	mmol/L	[3.60-5.10]
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SERUM CHLORIDE	105.0	mmol/L	[101.0-111.0]
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Method: ISE Indirect

eGFR (calculated)	110.5	ml/min/1.73sq.m	[>60.0]
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Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.



LABORATORY REPORT

Name : MR AMIT YADAV Age : 36 Yr(s) Sex :Male
 Registration No : MH011761030 Lab No : 202403001085
 Patient Episode : H18000001890 Collection Date : 09 Mar 2024 10:17
 Referred By : HEALTH CHECK MGD Reporting Date : 09 Mar 2024 12:11
 Receiving Date : 09 Mar 2024 10:17

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL Method: D P D	0.52	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.09	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.43	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.20	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.44	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.80	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.61		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	63.00 #	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	108.40 #	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	66.0	IU/L	[32.0-91.0]
GGT	40.0	U/L	[7.0-50.0]



LABORATORY REPORT

Name : MR AMIT YADAV Age : 36 Yr(s) Sex :Male
Registration No : MH011761030 Lab No : 202403001085
Patient Episode : H18000001890 Collection Date : 09 Mar 2024 10:17
Referred By : HEALTH CHECK MGD Reporting Date : 09 Mar 2024 12:11
Receiving Date : 09 Mar 2024 10:17

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

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

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

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

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name	: MR AMIT YADAV	Age	: 36 Yr(s) Sex :Male
Registration No	: MH011761030	Lab No	: 202403001086
Patient Episode	: H18000001890	Collection Date	: 09 Mar 2024 10:18
Referred By	: HEALTH CHECK MGD	Reporting Date	: 09 Mar 2024 11:14
Receiving Date	: 09 Mar 2024 10:18		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	103.0	mg/dl	[70.0-110.0]

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

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

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

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

Alka

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name	: MR AMIT YADAV	Age	: 36 Yr(s) Sex :Male
Registration No	: MH011761030	Lab No	: 202403001087
Patient Episode	: H18000001890	Collection Date	: 09 Mar 2024 15:13
Referred By	: HEALTH CHECK MGD	Reporting Date	: 10 Mar 2024 12:50
Receiving Date	: 09 Mar 2024 15:13		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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PLASMA GLUCOSE

Specimen: Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS 118.0 mg/dl [80.0-140.0]

Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption, post exercise

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

Dr. Charu Agarwal
Consultant Pathologist



RADIOLOGY REPORT

NAME	MR Amit YADAV	STUDY DATE	09/03/2024 10:26AM
AGE / SEX	36 y / M	HOSPITAL NO.	MH011761030
ACCESSION NO.	R7022351	MODALITY	CR
REPORTED ON	09/03/2024 10:46AM	REFERRED BY	HEALTH CHECK MGD

XR- CHEST PA VIEW

FINDINGS:

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

IMPRESSION:

-No significant abnormality seen.

Please correlate clinically

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

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



NAME	MR Amit YADAV	STUDY DATE	09/03/2024 11:03AM
AGE / SEX	36 y / M	HOSPITAL NO.	MH011761030
ACCESSION NO.	R7022352	MODALITY	US
REPORTED ON	09/03/2024 1:23PM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS**FINDINGS**

LIVER: appears enlarged in size (measures 154 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 117 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 8 mm.

COMMON BILE DUCT: Appears normal in size and measures 3 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

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

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

Right Kidney: measures 114 x 57 mm.

Left Kidney: measures 108 x 43 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

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

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 31 x 27 x 22 mm with volume 9 cc. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Hepatomegaly with diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.



Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS

CONSULTANT RADIOLOGIST

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