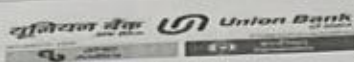


Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India
RO - AHMEDNAGAR
AHMEDNAGAR, AHMEDNAGAR,
Maharashtra, - 0

To,

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

35-40 Female

Shri/Smt./Kum. SHINDE, SONALI MAHESH

P.F. No. 602127

Designation : Asst Manager

Checkup for Financial Year

2023-
2024

Approved Charges Rs.

3000.00

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

Health checkup at tie-up Ctr | HealthChkup Authorisatn letter

ations apply.

व्यापार व वैयक्तिक
सोने तारण कर्ज उपलब्ध
* सोपी सुलभ व जलद व
* कमीत कमी कागदपत्रे



Union Home

GET INSTANT HOME LOAN
AT ATTRACTIVE TERMS
WITH MINIMUM PAPERWORK

Interest on daily
reducing balance

अधिक माहित

कर्ज वितरण करणारी शा



Laboratory Report

Lab ID : 40933806538

Patient : Mr SANDEEP PARAB
DOB :
Tel No :
PID No :
Sex/Age : Male / 42 Years
Ref Id :
Specimen : Serum



Ref. By :
Client : Sea Bird Medicare Pvt Ltd - Powai
 102-104, Gateway Plaza, Central Avenue, Hiranandani
 Gardens Powai - 400076
Processing Location :
 NDPL - Vidyavihar

Registered On:
 14-Sep-2024 20:24
Collected On:
 14-Sep-2024 20:24
Reported On:
 14-Sep-2024 22:43

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
VITAMIN B - 12				
Vitamin B - 12 Level <i>CMIA</i>	194.0	pg/mL	187-883	

Introduction :

Vitamin B12, a member of the corrin family, is a cofactor for the formation of myelin, and along with folate, is required for DNA synthesis. Levels above 300 or 400 are rarely associated with B12 deficiency induced hematological or neurological disease.

Clinical Significance :

Causes of Vitamin B12 deficiency can be divided into three classes: Nutritional, malabsorption syndromes and gastrointestinal causes. B12 deficiency can cause Megaloblastic anemia (MA), nerve damage and degeneration of the spinal cord. Lack of B12 even mild deficiencies damages the myelin sheath. The nerve damage caused by a lack of B12 may become permanently debilitating.

The relationship between B12 and MA is not always clear that some patients with MA will have normal B12 levels; conversely, many individuals with B12 deficiency are not afflicted with MA.

Decreased in:

Iron deficiency, normal near-term pregnancy, vegetarianism, partial gastrectomy/ileal damage, celiac disease, use of oral contraception, parasitic competition, pancreatic deficiency, treated epilepsy and advancing age.

Increased in:

Renal failure, liver disease and myeloproliferative diseases.

Variations due to age Increases: with age.

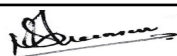
Temporarily Increased after Drug.

Falsely high in Deteriorated sample.

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

Verified by
SRG.




Dr Nilesh Bhamare.
 M.D.Pathology
 MMC Reg.No.2005/9/3404



SEA BIRD MEDICARE CENTRE POWAI

Patient Details

Date: 14-Sep-24

Time: 11:03:00 AM

Name: SANDEEP PARAB ID: 2862

Age: 42 y

Sex: M

Height: 184 cms.

Weight: 80 Kg.

Clinical History: NIL

Medications: NIL

Test Details

Protocol: Bruce

Pr.MHR: 178 bpm

THR: 151 (85 % of Pr.MHR) bpm

Total Exec. Time: 7 m 14 s

Max. HR: 164 (92% of Pr.MHR) bpm

Max. Mets: 10.20

Max. BP: 150 / 100 mmHg

Max. BP x HR: 24600 mmHg/min

Min. BP x HR: 6000 mmHg/min


Test Termination Criteria: THR ACHIEVED

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 25	1.0	0	0	75	110 / 80	-0.64 aVR	1.42 II
Standing	0 : 37	1.0	0	0	82	110 / 80	-0.64 aVR	1.42 II
Hyperventilation	0 : 2	1.0	0	0	82	110 / 80	-0.42 aVR	1.06 II
1	3 : 0	4.6	1.7	10	108	120 / 80	-1.06 aVR	2.48 II
2	3 : 0	7.0	2.5	12	121	130 / 90	-1.06 aVR	3.54 II
Peak Ex	1 : 14	10.2	3.4	14	164	140 / 100	-4.03 aVF	5.66 I
Recovery(1)	1 : 1	1.8	1	0	115	150 / 100	-1.49 III	3.18 II
Recovery(2)	1 : 0	1.0	0	0	93	130 / 90	-0.42 III	2.83 II
Recovery(3)	1 : 0	1.0	0	0	88	120 / 80	-0.64 III	1.77 II
Recovery(4)	0 : 12	1.0	0	0	90	120 / 80	-0.42 III	1.42 V3

Interpretation

The patient exercised according to the Bruce protocol for 7 m 14 s achieving a work level of Max. METS : 10.20. Resting heart rate initially 75 bpm, rose to a max. heart rate of 164 (92% of Pr.MHR) bpm. Resting blood Pressure 110 / 80 mmHg, rose to a maximum blood pressure of 150 / 100 mmHg. No significant ST-T changes, TMT negative for inducible ischemia for the workload achieved



Dr. Mrinalini Singh
Consultant Physician
MBBS, DNB, MRCP (UK), EDIC
Reg. No. 2019/02/0392

Ref. Doctor: APOLLO

Doctor: ----

(Summary Report edited by user)

(c) Schiller Healthcare India Pvt. Ltd. V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time: 0 m 0 s

Stage Time: 0 m 25 s

HR: 75 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 151 bpm)

B.P: 110 / 80

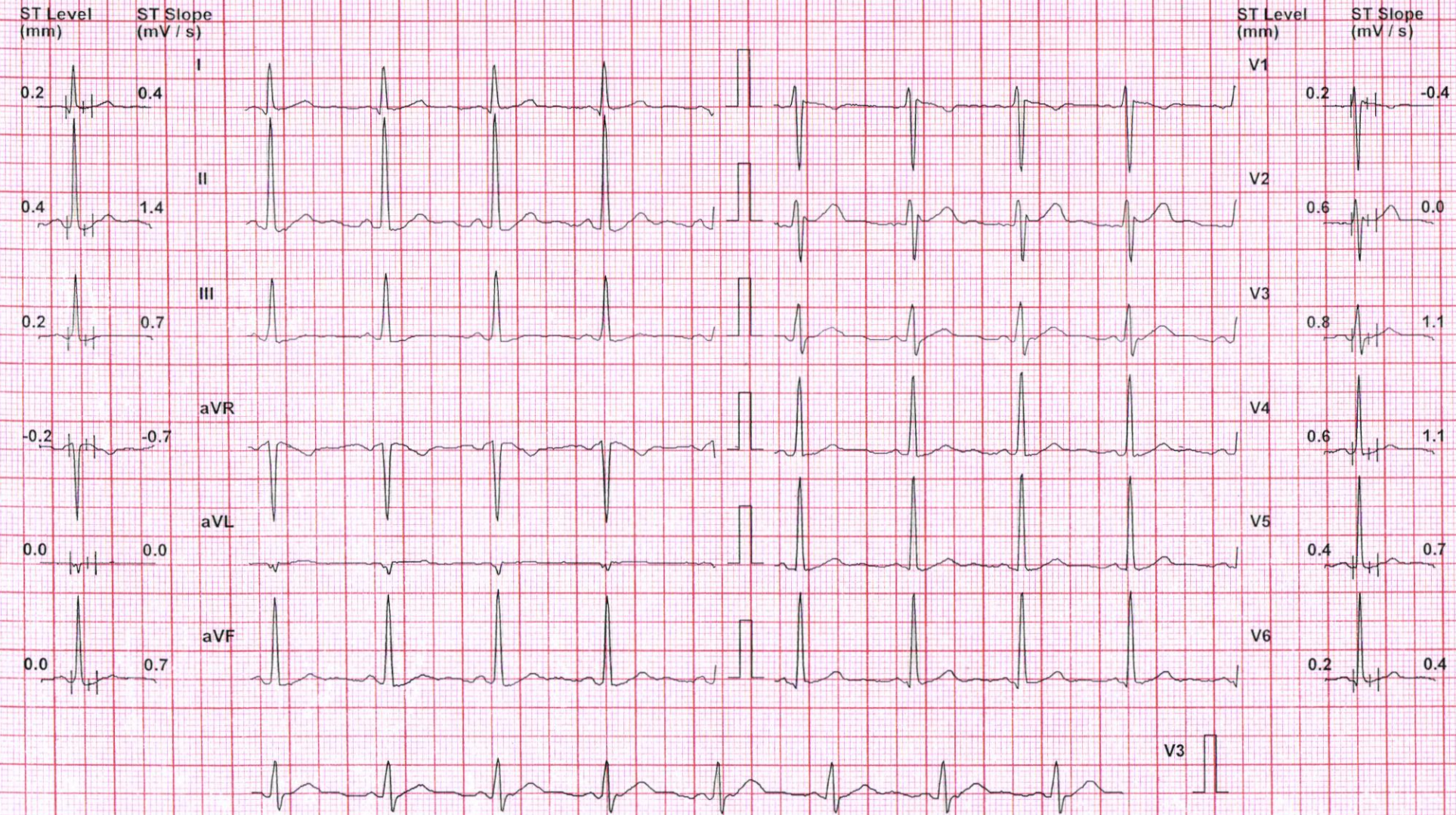


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time : 0 m 0 s

Stage Time : 0 m 37 s **HR: 82 bpm**

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 151 bpm)

B.P: 110 / 80

ST Level (mm) ST Slope (mV / s)

ST Level (mm) ST Slope (mV / s)

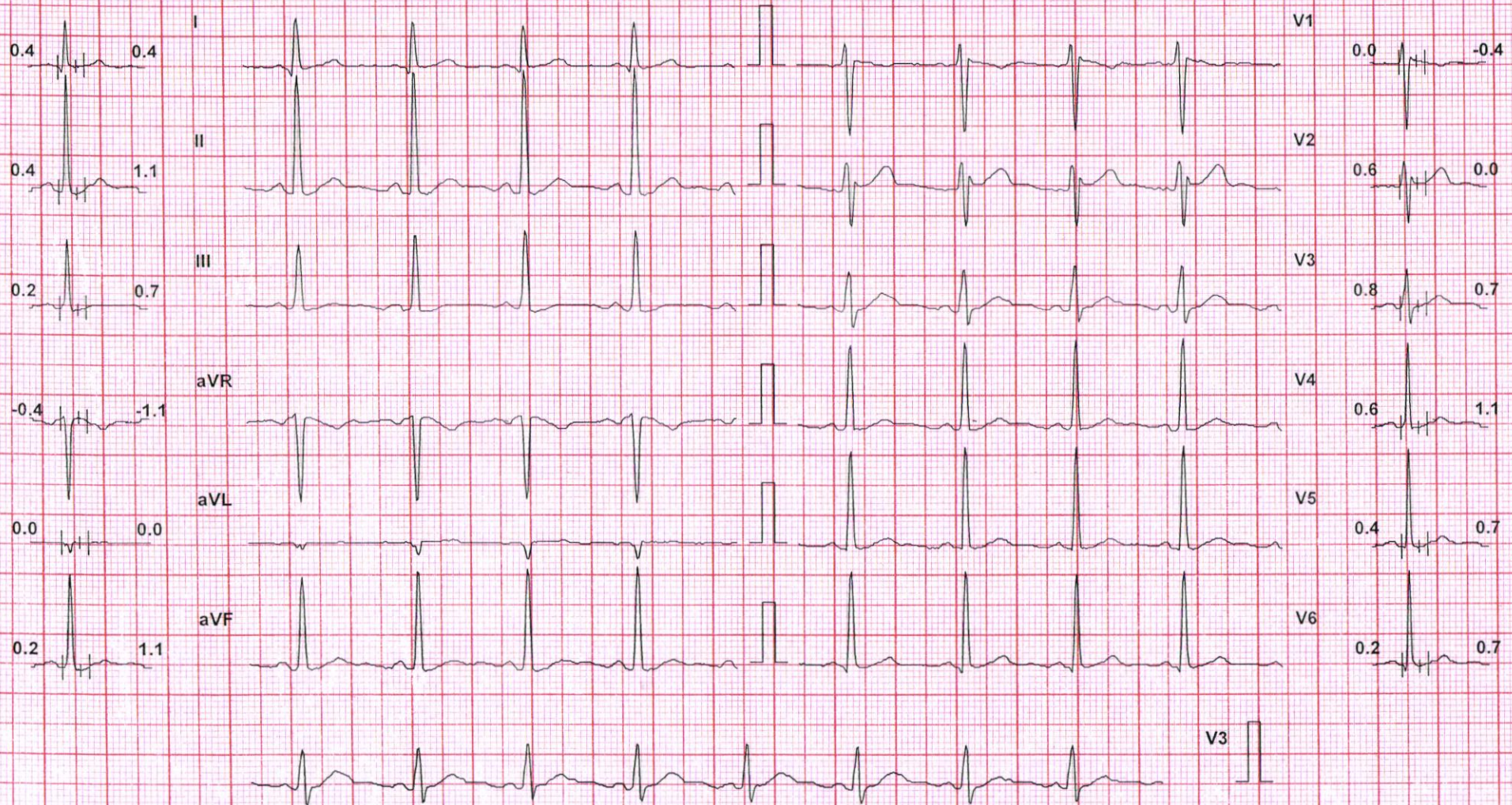


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time : 0 m 0 s

Stage Time : 0 m 2 s

HR: 82 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 151 bpm)

B.P: 110 / 80

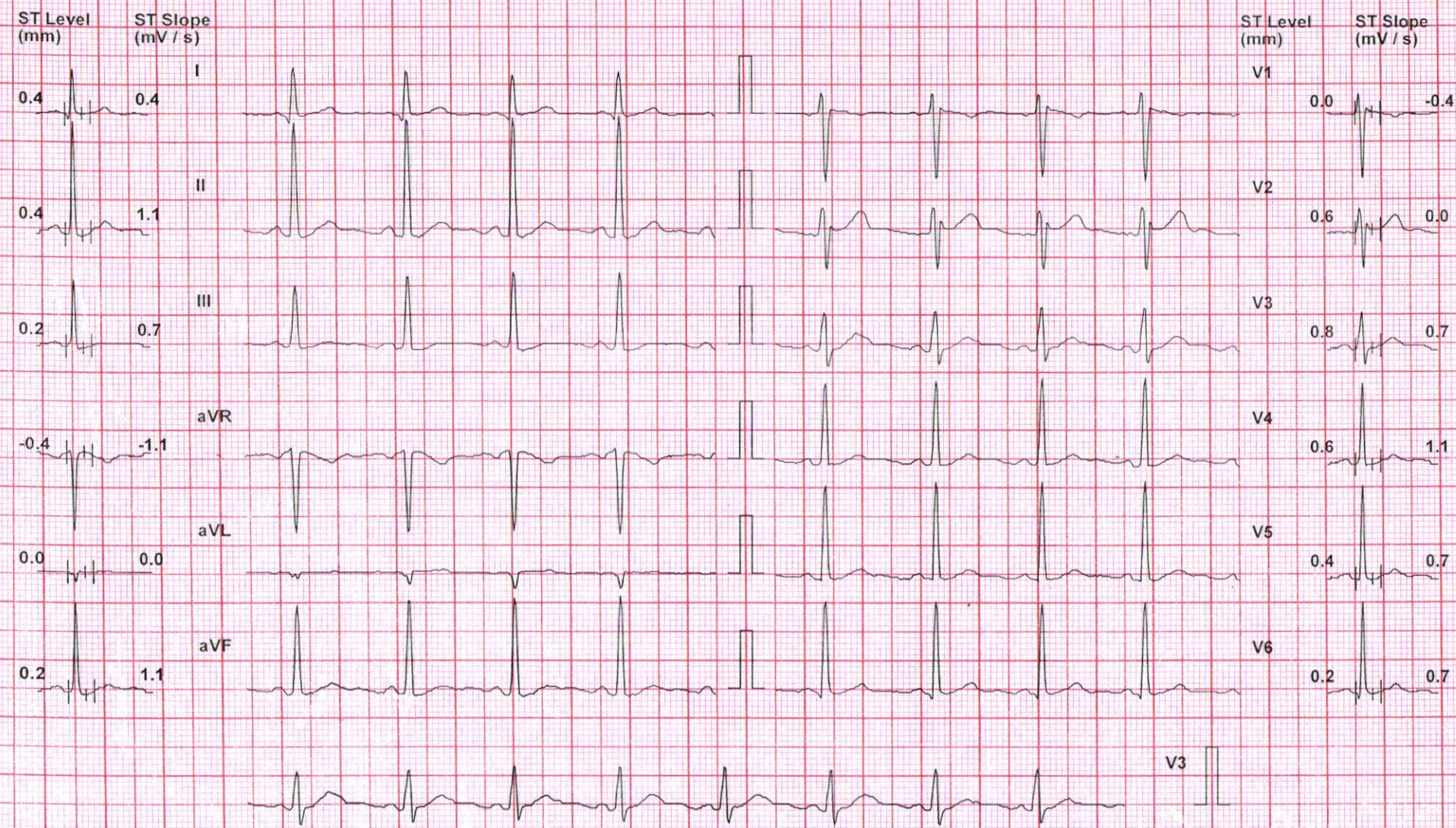


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time : 3 m 0 s

Stage Time : 3 m 0 s

HR: 108 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 151 bpm)

B.P: 120 / 80

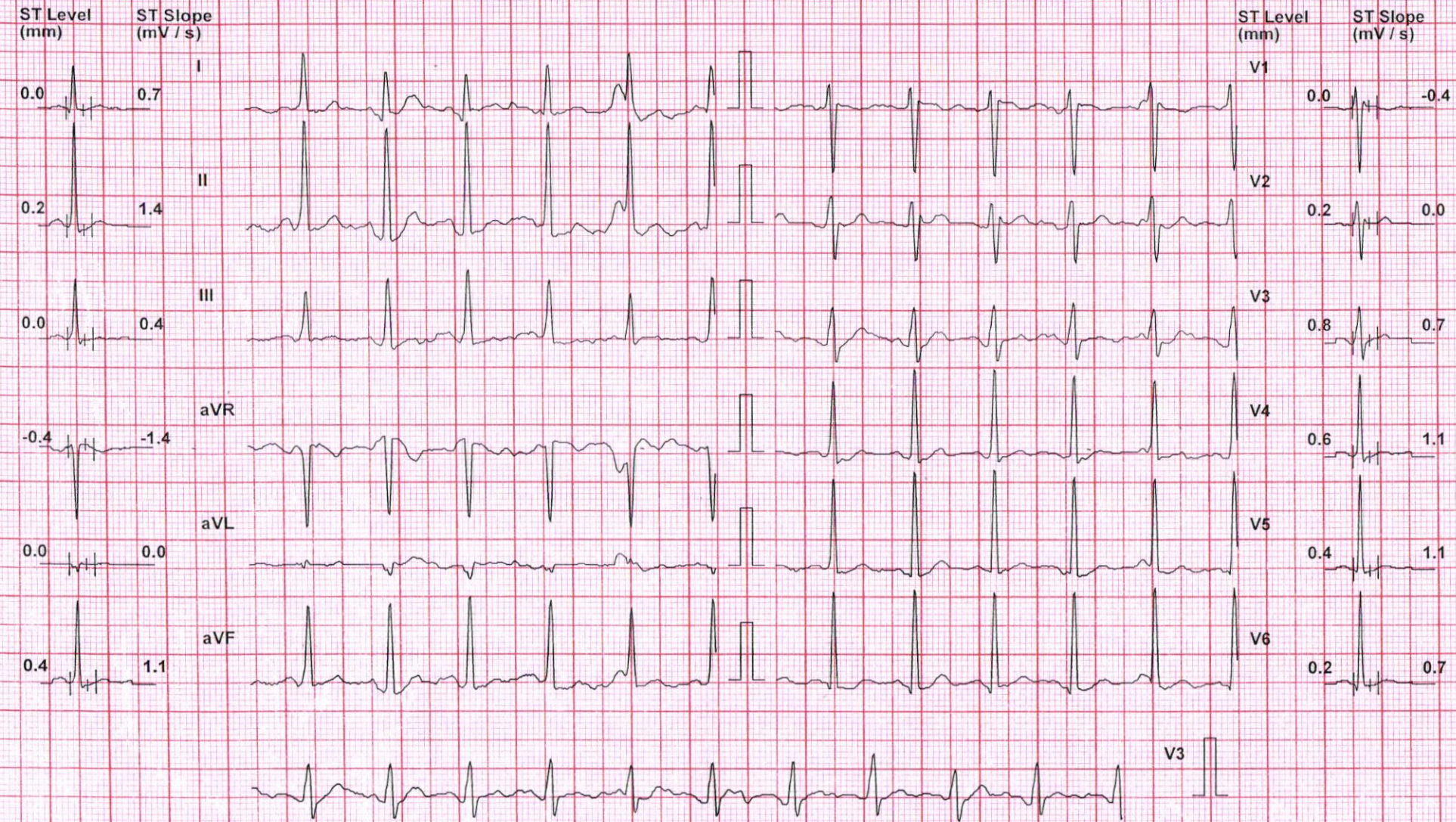


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time : 6 m 0 s

Stage Time : 3 m 0 s

HR: 121 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 151 bpm)

B.P: 130 / 90

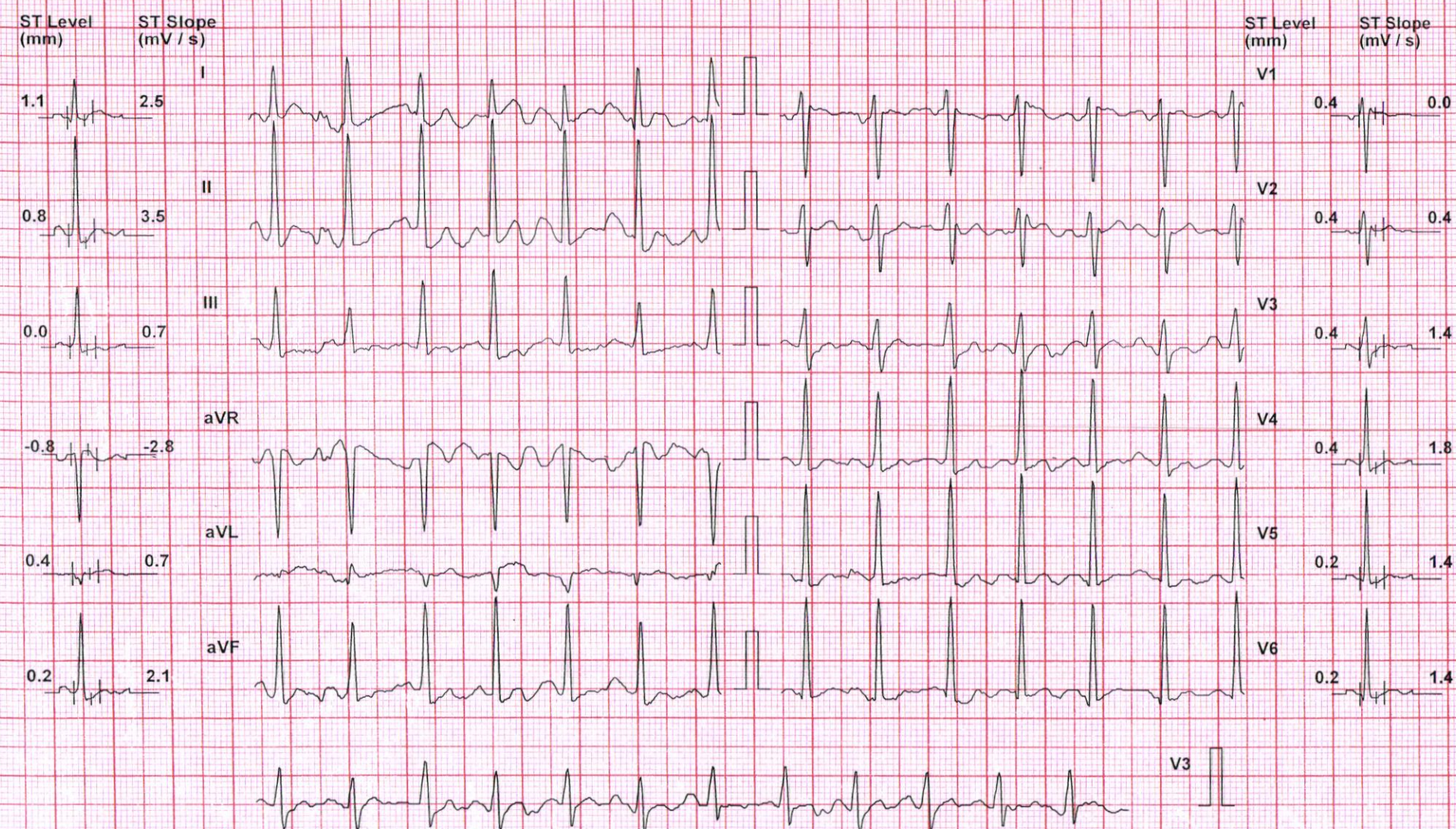


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time : 7 m 14 s

Stage Time : 1 m 14 s **HR:**

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 151 bpm)

B.P.:

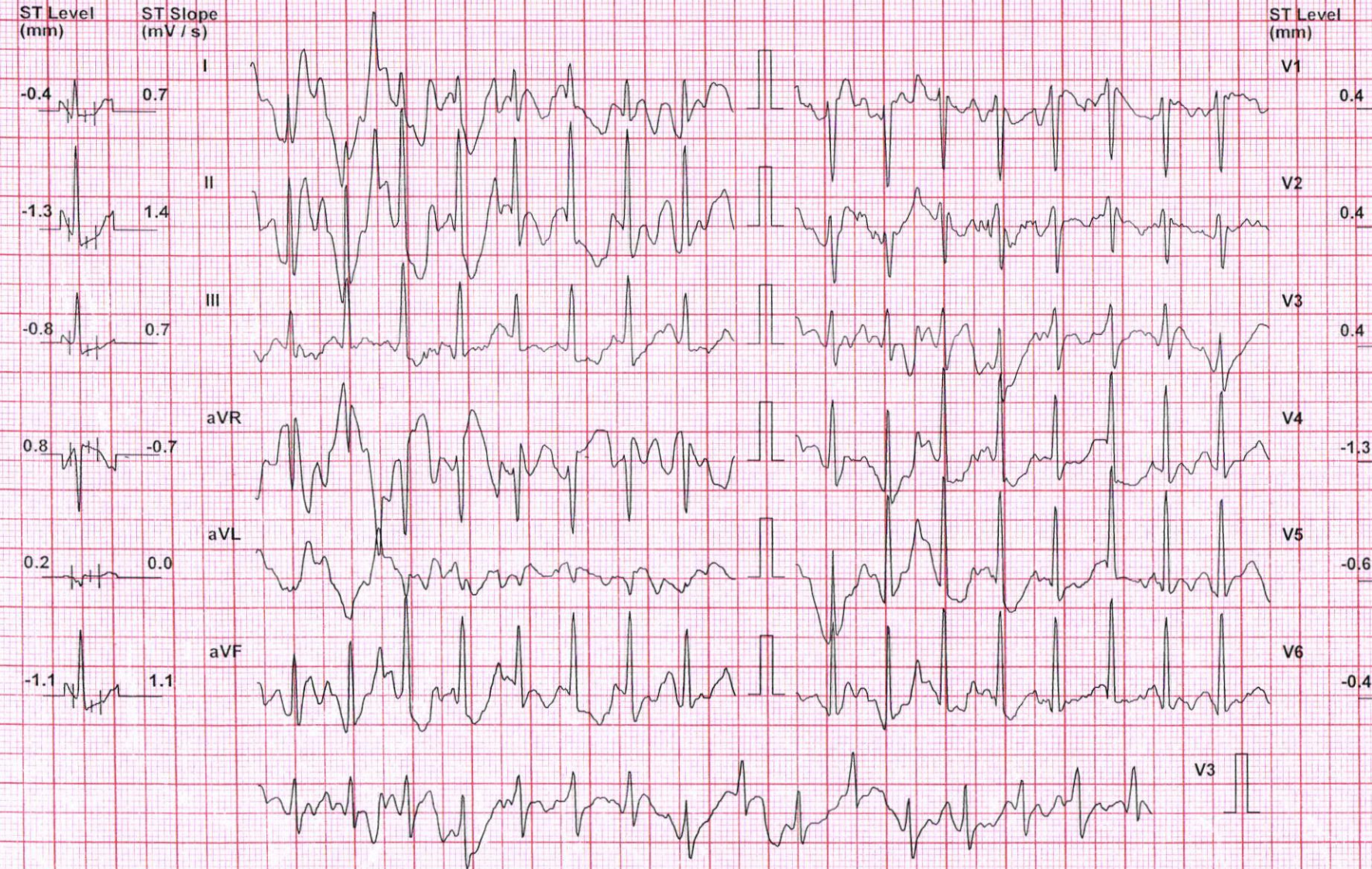


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time : 7 m 14 s

Stage Time : 1 m 1 s

HR: 115 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 0 mph

Grade: 0 %

(THR: 151 bpm)

B.P: 150 / 100

ST Level (mm) ST Slope (mV / s)

ST Level (mm) ST Slope (mV / s)

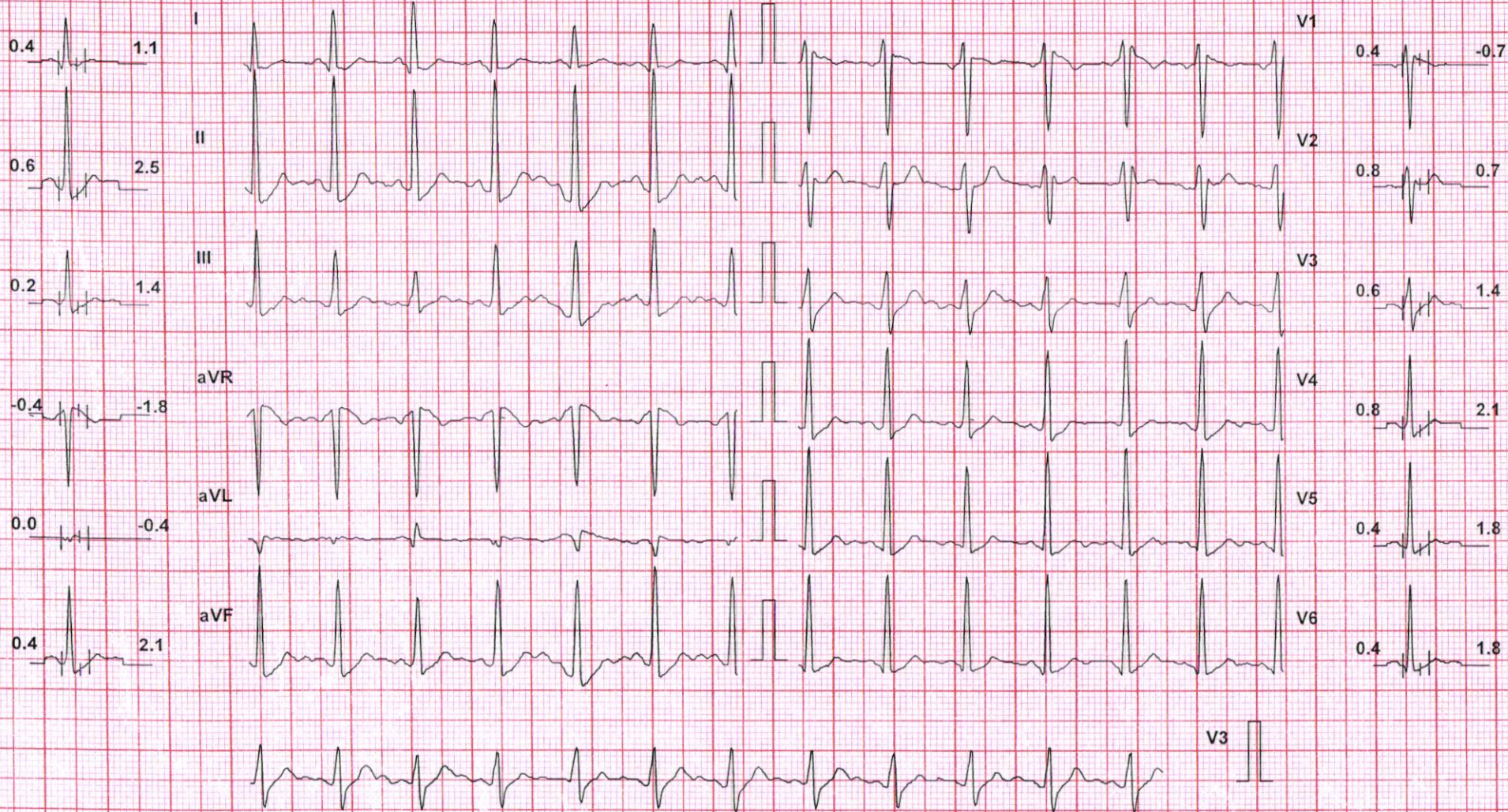


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time : 7 m 14 s

Stage Time : 1 m 0 s

HR: 93 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 151 bpm)

B.P: 130 / 90

ST Level (mm) ST Slope (mV / s)

ST Level (mm) ST Slope (mV / s)

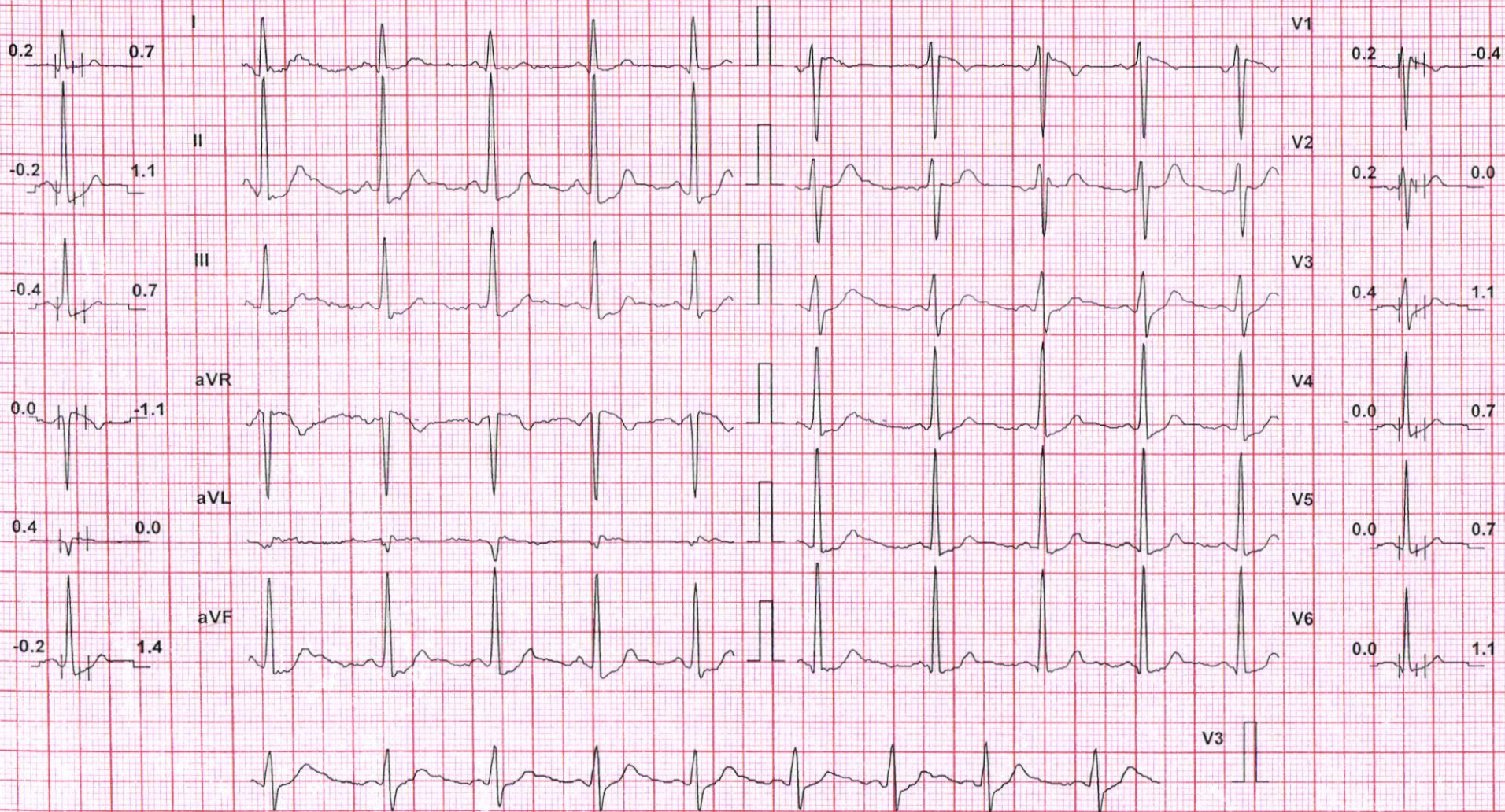


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

SEA BIRD MEDICARE CENTRE POWAI

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Exec Time : 7 m 14 s

Stage Time : 1 m 0 s

HR: 88 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 151 bpm)

B.P: 120 / 80

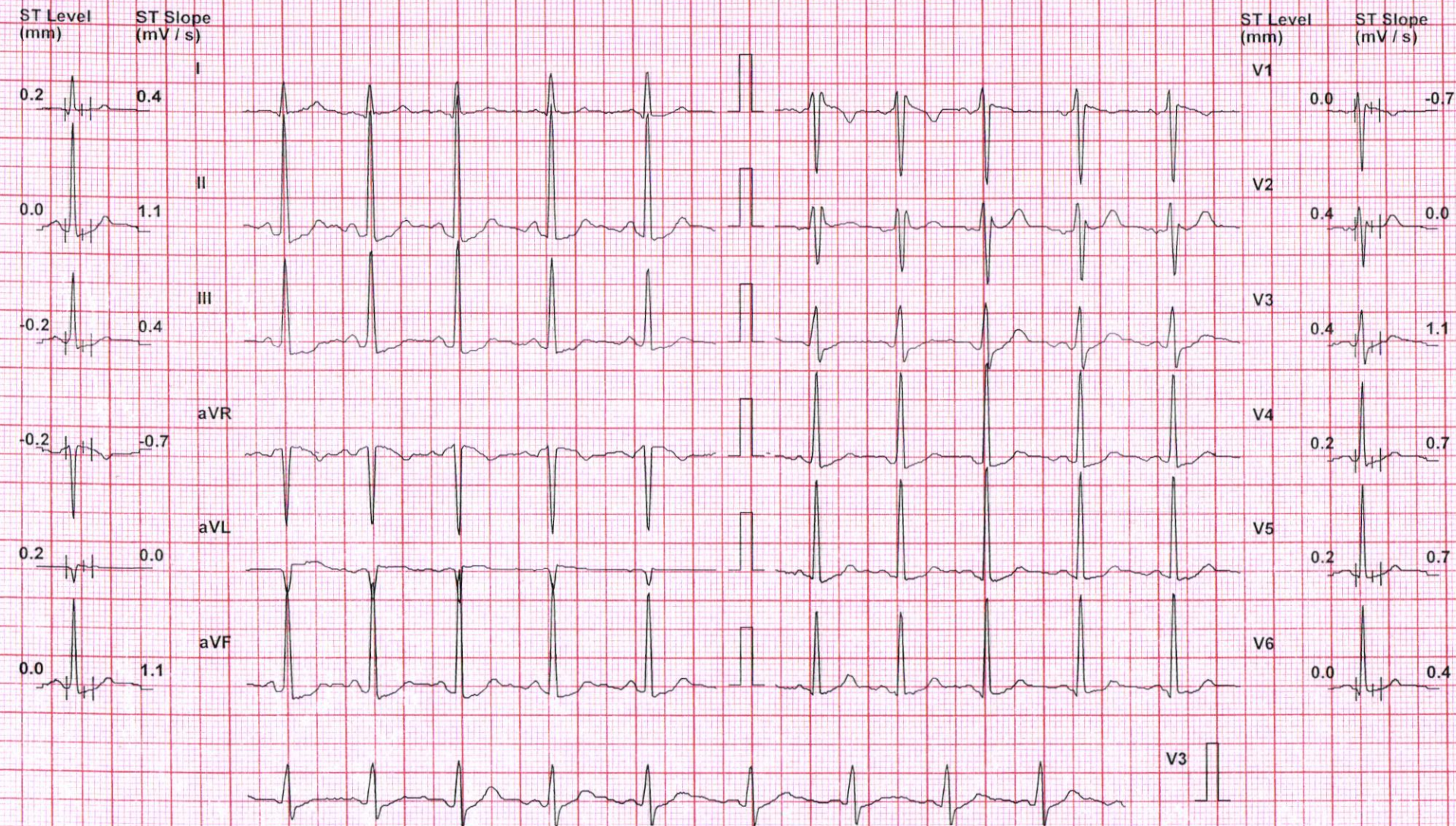


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

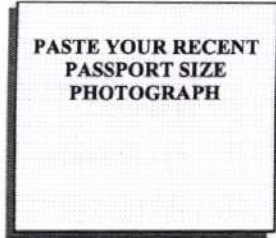
Post J = J + 60 ms

Schiller Spandan V 4.7

Annexure-2

Self-Health Declaration

(Please ✓ Mark Where Applicable)



1 PERSONAL DETAILS:

Name: Sandeep First Name NARAYAN Middle Name PARAB. Surname

Address: N.G. 8/4, 2/5, Shree Hanuman Hos. Soc.
Hanuman Nagar (A), Park side, Vikhroli (W).

City: Mumbai Pin: 400079.

Birth Place: _____ Birth Date: 04/01/1982 Religion: Hindu.
(dd/mm/yyyy)

Post applied for: _____ Marital Status: Married / Unmarried Gender: M / F

2 PREVIOUS EMPLOYMENT: Yes / No If yes specify

Name	Nature of work	Duration
i)		
ii)		
iii)		

3 NAME OF FAMILY DOCTOR:

Address: _____

Contact Details: _____

4 PERSONAL HABITS:

- i) Smoking
- ii) Tobacco chewing
- iii) Alcohol
- iv) Any other

5 MEDICAL HISTORY:

i) **ANY DISABILITY:** Yes / No If yes specify with disability %

ii) **PERSONAL HISTORY:**

Are you in good health and capable of full work

Have you ever suffered from job related disease or injury?

Have you ever been discharged or rejected on medical grounds?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>

Types of Previous Occupation (Pl. describe in brief about company, nature of work, duration in years)

iii) Have you ever suffered from any of the following (Answer Yes or No. if yes, give details)

Y	N		Y	N	
	<input checked="" type="checkbox"/>	Hypertension		<input checked="" type="checkbox"/>	Hepatitis-B
	<input checked="" type="checkbox"/>	Diabetes		<input checked="" type="checkbox"/>	Cancer
	<input checked="" type="checkbox"/>	Heart disease		<input checked="" type="checkbox"/>	Stroke
	<input checked="" type="checkbox"/>	Kidney diseases		<input checked="" type="checkbox"/>	Bronchitis
	<input checked="" type="checkbox"/>	Tuberculosis		<input checked="" type="checkbox"/>	Any allergy
	<input checked="" type="checkbox"/>	Chronic lung disease (e.g. Pleurisy Pneumonia etc.)		<input checked="" type="checkbox"/>	Any chronic ear or hearing problem (e.g. sinusitis, rhinitis otitis etc.)
	<input checked="" type="checkbox"/>	Epilepsy, Fits, Fainting or Dizziness		<input checked="" type="checkbox"/>	Mental disorder of any kind
	<input checked="" type="checkbox"/>	Any major operation or injury		<input checked="" type="checkbox"/>	Any other illness

Details of the above if "Yes")

(For female candidates only)

Are you pregnant at present? Y N

Date of L.M.P. _____

iv) Immunization:

	Yes	No
Tetanus Toxoid	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hepatitis B	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Others	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- consiheld - 3 doses

6 FAMILY HISTORY:

Has anyone of your parents suffered from any of the following: Yes / No

(If yes, Please ✓ Mark Where Applicable)

	Father	Mother
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>
Heart Disease	<input type="checkbox"/>	<input type="checkbox"/>
Cancer	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
Tuberculosis	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>
Any other Disease	<input type="checkbox"/>	<input type="checkbox"/>

	IF LIVING		IF DEAD	
	AGE	HEALTH (Good, Bad, Fair)	AGE AT DEATH	CAUSE OF DEATH
Father	82	Good		
Mother	72	Good		
Spouse	38	Good		
Children-1	12 ♂	Good		
Children -2				

7 I declare that the above statements are true and complete to the best of my knowledge and belief. In case this information is found to be false by the company, then the company reserves the right to terminate my services without giving any notice. I agree that the results of this medical examination in general terms may be revealed to the company if required. I also fully understand that in case I am declared medically unfit due to any reason, I shall not be entitled for the employment in the company. However, the decision taken by recruitment committee about my medical fitness will be final and binding to me.

Date: 14/9/2024


 (Signature of Candidate)

MER- MEDICAL EXAMINATION REPORT

Date of Examination	14/9/2024		
NAME	Sandesh N. Parab.		
AGE	42	Gender	M.
HEIGHT(cm)	184	WEIGHT (kg)	80kg
B.P.	110/80 MMHG		
ECCG	NONE / TMT Negative		
X Ray	NONE		
Vision Checkup	Color Vision : N Far Vision Ratio : 6/6 - N Near Vision Ratio : N/6 - N		
Present Ailments	-		
Details of Past ailments (If Any)	-		
Comments / Advice	She / He is Physically Fit		

Dr. Mrinalini Singh
 Consultant Physician
 MBBS, DNB, MRCP (UK), EDIC
 Reg. No. 2019/02/0392



Signature with Stamp of Medical Examiner

Dr. Mrinalini Singh
 Consultant Physician
 MBBS, DNB, MRCP (UK), EDIC
 Reg. No. 2019/02/0392

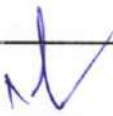
CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Sandeep Parsh on 14/9/2024

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> • Currently Unfit. Review after _____ recommended 	
<ul style="list-style-type: none"> • Unfit 	


Dr. Mrinalini Singh
Consultant Physician
MBBS, DNB, MRCP (UK), EDIC
Reg. No. 2019/02/0392

Dr. _____
Medical Officer
The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes

Apollo Clinic
 Apollo Clinic
 Apollo Clinic
 Apollo Clinic

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA

SANDEEP NARAYAN PARAB
NARAYAN SHREEDHAR PARAB

04/01/1982
Permanent Account Number
ANJPP4750E

Signature

2011229005



भारतीय विशिष्ट ओळख प्राधिकरण
भारत सरकार
Unique Identification Authority of India
Government of India

नोंदविण्याचा क्रमांक / Enrollment No 1104/20109/04672

To,
संदीप नारायण परब
Sandeep Narayan Parab
S/O Narayan Parab
near sai baba mandir , park site N.G. 814 2/5, shree
hanuman soc. hanuman nagar A
Vikhroli West
Mumbai(Sub Urban)
Maharashtra 400079
9821546038

Ref: 34 / 15E / 67261 / 67830 / P



UE466900120IN

भारत निवडणूक आयोग
ओळखपत्र
ELECTION COMMISSION OF INDIA
IDENTITY CARD
HCF2746337

मतदाराचे नांव : संदीप नारायण परब
Elector's Name : Sandeep Narayan Parab
वडीलांचे नांव : नारायण परब
Father's Name : Narayan Parab
लिंग / Sex : पुरुष / Male
जन्म तारीख / Date of Birth : 04/01/1982

Sandeep

आपला आधार क्रमांक / Your Aadhaar No. :

2745 9122 9132

आधार – सामान्य माणसाचा अधिकार



भारत सरकार
GOVERNMENT OF INDIA
संदीप नारायण परब
Sandeep Narayan Parab
जन्म वर्ष / Year of Birth : 1982
पुरुष / Male

2745 9122 9132

आधार – सामान्य माणसाचा अधिकार



SEA BIRD MEDICARE CENTRE

Report ID : **SPM14914340** Reg. : **14-Sep-2024**
Patient Name : **Mr. SANDEEP PARAB** Report Date : **16-Sep-2024**
Rank : Company Name : **M/S. APOLLO HEALTH AND LIFESTYLE**
Ref By : **DR.PARAG ARVIND PRADHAN** Age/Sex : **42 Year / Male**

CHEST X RAY REPORT

X-Ray No : 5381

Investigation : Chest PA View.

Bony thoracic cage is normal.

Cardiac silhouette appears normal in size and configuration.

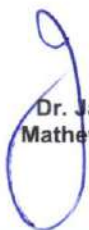
Both lungs shows equal translucency and normal vasculature.

Both Hemidiaphragm visualised normal.

No evidence of any active parenchymal lesion seen.

Impression :

Normal Chest X-Ray.


Dr. Jacob
Mathew MD

Proudly... Caring For You

HO- Sea Bird Medicare Centre (ISO 9001:2015): A-101-102, Heritage Plaza, Teli Cross Lane, Andheri East (Nr. Station), Mumbai- 69. Tel: 022- 46032704

Powai: 022-25701053 / 25704157

Kochi: 0484- 2322022 / 4032022

Website: www.seabirdhf.com | Email: seabird@seabirdhf.com

CONDITIONS OF REPORTING

SEA BIRD MEDICARE CENTRE (DIVISION OF SEA BIRD MEDICARE PVT LTD)

1. Individual Laboratory Investigation should not be considered as conclusive and should be used along with other relevant clinical examination to achieve the final diagnosis. The reported results are for the information of the referring doctors only.
2. The test results relate only to the item/ items in our laboratory.
3. The values of a laboratory investigation are dependent on the quality of sample as well as the assay procedure used.
4. For test performed on specimens received from other locations (within and outside Mumbai), it is presumed that the specimen belongs to the patient named or identified, such verification having been carried out at the point of generation of the said specimen(s).
5. Electronic images in the report are created by electronic processing. Sea Bird Medicare Centre makes no expressed or implied warranties or representations with respects to it and takes no responsibility for the authenticity, quality and size of the image, affected possibly due to a computer virus or other contamination.
6. Sea Bird Medicare centre confirms that all tests have been carried out with reasonable care, clinical safety and technical integrity
 - A. However due to certain factors such as reagent inconsistency, machine breakdown etc. beyond its control which could affect the testing, it does not make any representation or give any warranty about the accuracy of the reported results.
 - B. The test results are to be used for help in diagnosing/treating medical disease & not for forensic applications. Hence these results cannot be used for medico-legal purpose
7. Since Sea Bird Medicare Centre does not verify the identify or the details of the customer except in case of certain tests, it cannot be held responsible for any misrepresentation or misuse.
8. Partial reproduction of this report is not valid and should not be resorted to.
9. Any-query from referring doctor pertaining to this report should be directed to Sea Bird Medicare Centre.
10. All dispute / claims concerning to this report are subject to Mumbai jurisdiction only.

A. SEA BIRD MEDICARE CENTRE

Corporate Office: B-401, Heritage Plaza, Teli Cross Lane, Andheri East (Nr Station) Mumbai 400069
Central Laboratory: 102-103-104 Gateway Plaza, Central Avenue Road, Hiranandani Gardens Powai, Mumbai 400076, India

B. Enquiry and Home Visit Booking
022 25701053 / 9324924370 or
admin@seabirdhf.com

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SEABIRD MEDICARE CENTRE

102-104, Gateway Plaza, Central Avenue Road, Hiranandani Gardens, Powai, Mumbai-4

Patient: SANDEEP PARAB

Refd. By: APOLLO

Pred. Eqns: RECORDERS

Date : 14-Sep-2024 09:39 AM

Age : 42 Yrs

Height : 182 Cms

Weight : 80 Kgs

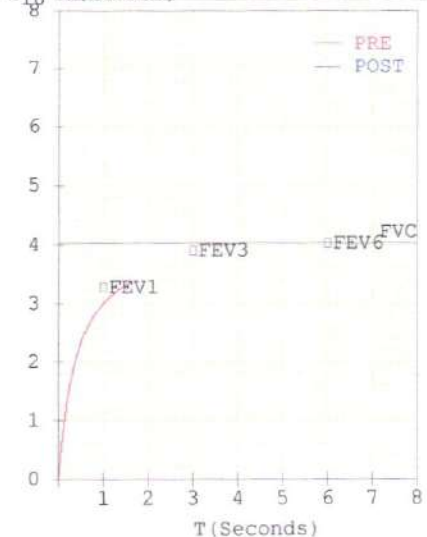
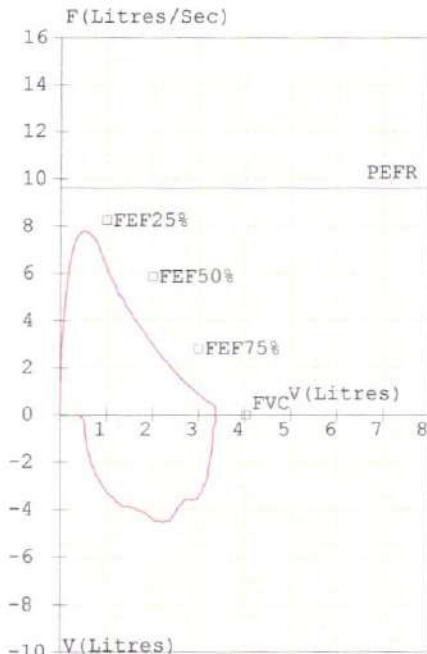
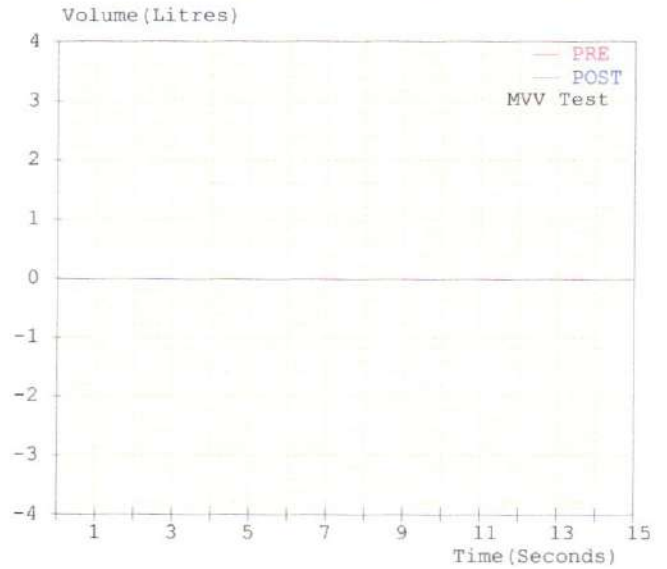
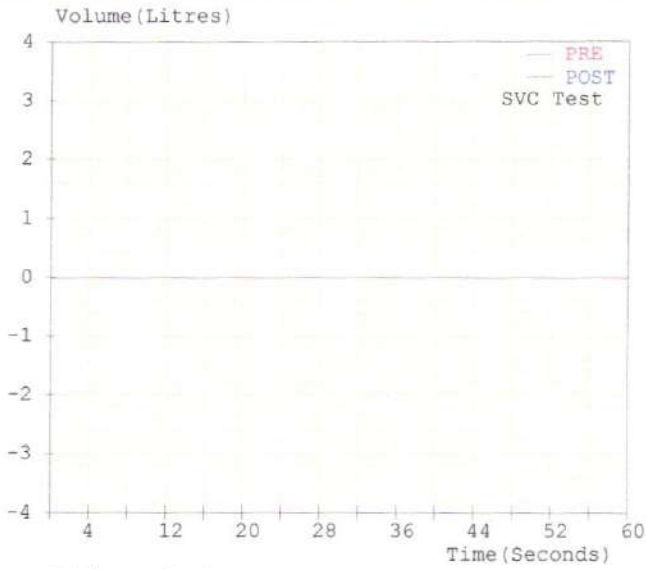
ID : 1348

Gender : Male

Smoker : No

Eth. Corr: 100

Temp :



Spirometry Results

Parameter	Pred	M.Pre	%Pred	M.Post	%Pred	%Imp
FVC (L)	04.02	03.37	084	----	----	----
FEV1 (L)	03.27	03.01	092	----	----	----
FEV1/FVC (%)	81.34	89.32	110	----	----	----
FEF25-75 (L/s)	04.08	03.41	084	----	----	----
PEFR (L/s)	09.63	07.81	081	----	----	----
FIVC (L)	----	02.93	----	----	----	----
FEV.5 (L)	----	02.33	----	----	----	----
FEV3 (L)	03.90	03.37	086	----	----	----
PIFR (L/s)	----	04.51	----	----	----	----
FEF75-85 (L/s)	----	01.33	----	----	----	----
FEF.2-1.2 (L/s)	07.37	06.79	092	----	----	----
FEF 25% (L/s)	08.26	06.98	085	----	----	----
FEF 50% (L/s)	05.87	03.88	066	----	----	----
FEF 75% (L/s)	02.81	01.75	062	----	----	----
FEV.5/FVC (%)	----	69.14	----	----	----	----
FEV3/FVC (%)	97.01	100.00	103	----	----	----
FET (Sec)	----	01.65	----	----	----	----
ExptTime (Sec)	----	00.05	----	----	----	----
Lung Age (Yrs)	042	045	107	----	----	----
FEV6 (L)	04.02	----	----	----	----	----
FIF 25% (L/s)	----	03.19	----	----	----	----
FIF 50% (L/s)	----	04.46	----	----	----	----
FIF 75% (L/s)	----	03.93	----	----	----	----
SVC (L)	----	----	----	----	----	----
ERV (L)	01.47	----	----	----	----	----
IRV (L)	----	----	----	----	----	----
VE (L/min)	----	----	----	----	----	----
Rf (l/min)	----	----	----	----	----	----
Ti (sec)	----	----	----	----	----	----
Te (sec)	----	----	----	----	----	----
VT (L)	----	----	----	----	----	----
VT/Ti	----	----	----	----	----	----
Ti/Ttot	----	----	----	----	----	----
IC (L)	----	----	----	----	----	----
MVV (L/min)	146	----	----	----	----	----
MRf (l/min)	----	----	----	----	----	----
MVT (L)	----	----	----	----	----	----

Pre Medication Report Indicates

Spirometry within normal limits as (FEV1/FVC)%Pred >95 and FVC%Pred >8

Dr. Mrinalini Singh
 Consultant Physician
 MBS, DNB, MRCP (UK), EDIC
 Reg. No. 2019/02/0392

DR MRINALINI



PID NO. : CIA0888

Name : SANDEEP PARAB

Sex / Age : Male / 42 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

Reg. Date

14-Sep-2024 / 9:09 am

Coll Date

14-Sep-2024 / 9:14 am

Report Date

14-Sep-2024 / 4:39 pm

REPORT

BIOCHEMISTRY

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Sr. Calcium (Serum, BAPTA)	9.89	mg/dl	8.6 - 10.0

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

----- End of Report -----

Dhanawade

Pritam Dhanawade
Lab Technician

Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No. 2006031680



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Reg. Date

14-Sep-2024 / 9:09 am

Coll Date

14-Sep-2024 / 9:14 am

Report Date

14-Sep-2024 / 4:52 pm

REPORT

BLOOD GLUCOSE

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Blood Glucose (Fasting), plasma (Plasma, Method- Hexokinase) Interpretation: NORMAL : 70 - 100 mg/dl Pre-Diabetic : 100 - 125 mg/dl Diabetic : >125 mg/dl (ON MORE THAN ONE OCCASION) Reference : American diabetes association guidelines 2022	99.20	mg/dl	70.00 - 100.00 mg/dl
Urine Glucose (Fasting)	Absent		Absent
Urine Ketones (Fasting)	Absent		Absent
Blood Glucose (PP) plasma (Plasma, Method- Hexokinase) Interpretation: Non-Diabetic : 70 - 140 mg/dl Pre-Diabetic : 140 - 199 mg/dl Diabetic : >200 mg/dl (ON MORE THAN ONE OCCASION) Reference : American diabetes association guidelines 2022	117.55	mg/dl	70.00 - 140.00
Urine Glucose (PP)	Absent		Absent
Urine Ketones (PP)	Absent		Absent

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

Dhanawade

Pritam Dhanawade
Lab Technician



Ritesh Kharche

DR. RITESH KHARCHE
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Sex / Age : Male / 42 Years

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REPORT

BLOOD GLUCOSE

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
-------------	---------------	--------------	--------------------------------------

----- End of Report -----

Dhanawade

Pritam Dhanawade
Lab Technician



Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No. 2006031680

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PID NO. : CIA0888

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Sex / Age : Male / 42 Years

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Reg. Date

14-Sep-2024 / 9:09 am

Coll Date

14-Sep-2024 / 9:14 am

Report Date

14-Sep-2024 / 4:38 pm

REPORT

Blood Group

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
BLOOD GROUP			
ABO Group	"A"		
RH (D)	Positive		

Method : Cell (Forward) grouping by Manual Slide Method.
Sample: Whole Blood (EDTA)

----- End of Report -----

LATHA SONAWANE
Lab Technician



DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No.2006031680

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Powai: 022-25701053 / 25704157
Kochi: 0484- 2322022 / 4032022

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Reference :

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Reg. Date

14-Sep-2024 / 9:09 am

Coll Date

14-Sep-2024 / 9:14 am

Report Date

14-Sep-2024 / 4:39 pm

REPORT

Complete Blood Count

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Hemoglobin	14.1	gm/dl	13.0 - 17.0
RED BLOOD CELLS			
R.B.C. Count	5.28	million / cumm	4.5 - 5.5
HCT	43	%	40 - 50
MCV	81.5	fL	83 - 101
MCH	26.6	pg	27 - 32
MCHC	32.7	gm / dl	31.5 - 34.5
RDW (CV)	14.4	%	11.6 - 14.0
Total W.B.C. Count	5630	/cu.mm.	4000 - 10000
DIFFERENTIAL COUNT			
Neutrophils	56	%	40 - 80
Lymphocytes	35	%	20 - 40
Eosinophils	04	%	1 - 6

Dhanawade

Pritam Dhanawade
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REPORT

Complete Blood Count

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
Monocytes	05	%	2 - 10
Basophils	00	%	0 - 1
Platelet Count	199000	/cumm	150000 - 410000

MORPHOLOGY

RBC Morphology Predominantly Normocytic and Normochromic.

WBC Morphology Normal Morphology.

Platelets on Smear Adequate on smear

(EDTA Whole Blood - Tests done Automated Three part cell counter (RBC, WBC, Platelets count by impedance, Haemoglobin by colorimetric Cyanmeth free method. Rest are calculated parameters. Microscopy and DLC is done manually by the Pathologist.)

----- End of Report -----

Dhanawade

Pritam Dhanawade
Lab Technician



Page 6 of 18

Ritesh Kharche

DR. RITESH KHARCHE
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Pathologist
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105-107 Gateway Plaza, Central Avenue, Hiranandani
Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani
Gardens, Powai, Mumbai-400076

Reg. Date

14-Sep-2024 / 9:09 am

Coll Date

14-Sep-2024 / 9:14 am

Report Date

14-Sep-2024 / 4:39 pm

REPORT

Erythrocyte Sedimentation Rate (ESR)

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
E.S.R	07	mm at 1hr	0 - 15

Method: Westergren,
Sample: Whole Blood (EDTA)

----- End of Report -----

Dhanawade

Pritam Dhanawade
Lab Technician



Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No.2006031680

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Powai: 022-25701053 / 25704157
Kochi: 0484- 2322022 / 4032022

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admin@seabirdhf.com

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PID NO. : CIA0888

Name : SANDEEP PARAB

Sex / Age : Male / 42 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

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Reg. Date

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Coll Date

14-Sep-2024 / 9:14 am

Report Date

14-Sep-2024 / 4:42 pm

REPORT

Glycosylated Haemoglobin (HbA1c)

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
HbA1c Pre-Diabetic : 5.7 - 6.4 % Diabetic : > = 6.5 (EDTA Whole Blood, Turbidimetric)	5.96	%	4 - 5.69
Mean Blood Glucose (MBG)	134.88	mg/dl	

Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association guideline 2022, for diagnosis of diabetes using a cut-off points of 6.5 %.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- 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.
- To estimate the eAG from the HbA1C value, the following equation is used : $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.
 - Heterozygous state detected.
- In known diabetic patients, following values can be considered as a guide for monitoring the glycemic control.
 - Excellent Control - 6 to 7 %
 - Fair to Good Control - 7 to 8 %
 - Unsatisfactory Control - 8 to 10 %
 - and Poor Control - More than 10 %
- Test done on Mispal i3 Automated Cartridge Based Specific Protein Analyser.

----- End of Report -----

Pritam Dhanawade

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DR. Ritesh Kharche

DR. RITESH KHARCHE
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MMC Reg No.2006031680



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Sex / Age : Male / 42 Years

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14-Sep-2024 / 4:42 pm

REPORT

LIPID PROFILE

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Total Cholesterol Serum, Method: CHOD-PAP	163.31	mg/dl	CHILD Desirable - Less than : 170 CHILD Borderline High : 170 - 199 CHILD High - More than : 200 ADULT Desirable - Less than : 200 ADULT Borderline High : 200 - 239 ADULT High - More than : 240
Triglycerides Serum, Method: GPO-PAP	61.05	mg/dl	NORMAL : <150 Borderline High : 150 - 199 High : 200 - 499 Very High : >500
HDL Cholesterol-Direct Serum, Method: Cholesterol-esterase-Direct	44.11	mg/dl	Desirable - Above : 60 Borderline Risk : 40 - 59 Undesirable - Below : 40
LDL Cholesterol Calculated	106.99	mg/dl	Desirable - Below : 130 Borderline Risk : 130 - 159 Undesirable - Above : 160
VLDL-Cholesterol Calculated	12.21	mg/dl	5 - 51
T.CHOL/HDLC Ratio Calculated	3.70		Acceptable for Male : < 5.00 Acceptable for Female : <4.50

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REPORT

LIPID PROFILE

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
LDLC/HDLC Ratio Calculated	2.43		Acceptable for Males : < 3.60 Acceptable for Females : < 3.20

NOTE:

- 1) Biological Reference Intervals are as per ATP III, NCEP Guidelines and National Lipid Association (NLA) 2014 Recommendations.
- 2) Tests done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.
- 3) The LDL-Cholesterol is calculated by the Friedewald equation which provides a reliable LDL-Cholesterol value estimate when triglyceride levels are below 400 mg/dL. A direct measurement is advised if the triglyceride levels are >400mg/dL.

----- End of Report -----

Pritam Dhanawade
Lab Technician

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No.2006031680



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REPORT

LIVER FUNCTION TEST

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
S.G.O.T. (Serum, Method-IFCC / UV without P5P)	18.39	U/L	0 - 40
Sr. Alkaline Phosphatase (Serum, Kinetic Method by IFCC)	45	U/L	40 - 129
S.G.P.T. (Serum, Method- IFCC / UV without P5P)	22.56	U/L	0 - 41
GGT (Serum, Method- IFCC Method)	18.47	U/L	8 - 61
Bilirubin (Total) (Serum, Method-Diazo- End point)	0.81	mg/dl	0.0 - 1.20
Bilirubin (Direct) (Serum, Method-Diazo-End point)	0.19	mg/dl	0.0 - 0.40
Bilirubin (Indirect) Calculated	0.62	mg/dl	0.0 - 0.90
Total Proteins (serum, Method-Biuret)	7	g/dl	6.6 - 8.7
Albumin (Serum, Method-Bromocresol Green)	4.2	g/dl	3.5 - 5.2
Globulin Calculated	2.80	g/dl	1.90 - 3.70
A/G ratio Calculated	1.50		

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

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REPORT

LIVER FUNCTION TEST

Test

Result

Units

BIOLOGICAL REFERENCE INTERVAL

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REPORT

Prostate-Specific Antigen Test

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
TOTAL PSA Serum, Method-ELFA	0.83	ng/ml	Please refer to 'NOTES' below.

METHOD: Two-step enzyme immunoassay sandwich method with a final fluorescent detection (ELFA) on MINI VIDAS automated immunoassay system.

NOTES:

REFERENCE RANGE AS PER AGE:

Age	PSA Concentration
<40 Years	0.21 to 1.72 ng/ml
40-49	0.27 to 2.19 ng/ml
50-59	0.27 to 3.42 ng/ml
60-69	0.22 to 6.16 ng/ml
>60	0.21 to 6.77 ng/ml

INTERPRETATION: PSA is used as a tumor marker to screen for and to monitor prostate cancer. Elevated levels of PSA are associated with prostate cancer, but they may also be seen with prostatitis and benign prostatic hyperplasia. PSA levels tend to increase in all men as they age. If prostate cancer is diagnosed, the total PSA test may be used as a monitoring tool to help determine the effectiveness of treatment. It may also be ordered at regular intervals after treatment to detect recurrence of the cancer. Concentrations of total PSA between 4.0 ng/ml and 10.0 ng/ml are often referred to as the gray zone. It is in this range that the free PSA is the most useful. When men in the gray zone have decreased levels of free PSA, they have a higher probability of prostate cancer; when they have elevated levels of free PSA, the risk is diminished. The ratio of free to total PSA can help the doctor decide whether or not a prostate biopsy should be performed.

----- End of Report -----

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PID NO. : CIA0888

Name : SANDEEP PARAB

Sex / Age : Male / 42 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

Sample Collected At :

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Gardens, Powai, Mumbai-400076

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Reg. Date

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REPORT

RENAL PROFILE

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Blood Urea Serum, Method-Urease	20.36	mg/dl	16.6- 48.5 mg/dl
Blood Urea Nitrogen Serum, Method-Urease	9.51	mg/dl	06 - 20 mg/dl
Creatinine Serum, Method-Kinetic Jaffes	0.99	mg/dL	0.62 - 1.17 mg/dl
Uric Acid Serum, Method: Uricase-POD	6.11	mg/dl	3.4 - 7.0

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

----- End of Report -----

Dhanawade

Pritam Dhanawade
Lab Technician



Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No. 2006031680

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REPORT

THYROID FUNCTION TEST

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
TSH	1.78	µIU/ml	0.25-5 µIU/ml
T3	1.95	nmol/l	0.92-2.33 nmol/l
T4	96.12	nmol/l	60-120 nmol/l

The assay principle combines an enzyme immunoassay competition method with a final fluorescent detection (ELFA).

INTERPRETATION

TSH : A high TSH result often means an under active thyroid gland that is not responding adequately to the stimulation of TSH due to some type of acute or chronic thyroid dysfunction. A high TSH value can also occur when someone with a known thyroid disorder or who has had their thyroid gland removed is receiving too little thyroid hormone medication. A low TSH result can indicate an over active thyroid gland (hyperthyroidism) or excessive amounts of thyroid hormone medication in those who are being treated for an under active (or removed) thyroid gland. An abnormal TSH test result is usually followed by additional testing to investigate the cause of the increase or decrease.

T3: Triiodothyronine T3 contributes significantly to the maintenance of the euthyroid state, and the total T3 concentration has a role in screening for thyroid disease in conjunction with other tests. T3 alone cannot diagnose hypothyroidism, but it may be more sensitive than thyroxine (T4) for hyperthyroidism.

T4: Thyroxine accounts for at least 90% of circulating protein-bound iodine. While >99.9% of T4 is protein-bound, primarily to thyroglobulin (TBG), it is the free fraction that is biologically active. In most patients the total T4 level is a good indicator of thyroid status, however it can sometimes be inadequate, and diagnostic efficiency may be improved by use of a total T4 test in conjunction with other tests.

----- End of Report -----

Pritam Dhanawade

Pritam Dhanawade
Lab Technician

DR. Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No. 2006031680



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REPORT

URINE ANALYSIS

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
<u>PHYSICAL EXAMINATION</u>			
Colour	Pale Yellow		Pale Yellow
Quantity	30 ml	ml	20 - 50
Appearance	Clear		Clear
Reaction (pH)	5.0		5.0 - 9.0
Specific Gravity	1.020		1.000 - 1.030
<u>CHEMICAL EXAMINATION</u>			
Proteins	Absent		Absent
Sugar	Absent		Absent
Ketone Bodies	Absent		Absent
Bilirubin	Absent		Absent
Nitrite	Absent		Absent
Urobilinogen	Normal	mg/dl	Normal (0.1 - 1.0 mg/dl)

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Powai: 022-25701053 / 25704157

Kochi: 0484- 2322022 / 4032022



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URINE ANALYSIS

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Occult Blood	Absent		Absent
<u>MICROSCOPIC EXAMINATION</u>			
Pus Cells	2 - 3 / hpf		2 - 3 / hpf
Red Blood Cells	Absent		Absent
Epithelial cells	1 - 2 / hpf		2 - 3 / hpf
Casts	Absent		Absent
Crystals	Absent		Absent
Other Findings	Absent		

METHOD:

Physical Examination : Visual Strip Method.

Chemical Examination : Billirubin(Azo-coupling), Blood(Peroxidase), Glucose(Specific glucose-oxidase/peroxidase reaction), Ketone(Rothera's test), Leukocytes(Reflectance Photometer(Leucocyte esterase)), Nitrite(Diazotization), pH(Double Indicator), Protein(Protein Error of Indicators), Specific Gravity(Refractometric method), Urobilinogen(Ehrlich).

Microscopy Examination : Automation/Manual Microscopy.

----- End of Report -----

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VITAMIN D TOTAL 25-OH (D2 + D3)

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
VITAMIN D TOTAL Serum, Method-ELFA	17.0	ng/ml	Interpretation mentioned below

METHOD: Enzyme immunoassay competition method with a final fluorescent detection (ELFA) on MINI VIDAS automated immunoassay system.

INTERPRETATION:

Deficiency: <20 ng/ml

Insufficiency: 20-29 ng/ml

Sufficiency: 30-100 ng/ml

Toxicity: >100 ng/ml

-Levels <20 ng/ml may be associated with more severe abnormalities and can lead to inadequate mineralization of newly formed osteoid resulting in rickets in children and osteomalacia in adults.

-Patients who present with hypercalcemia, hyperphosphatemia and low PTH may suffer either from ectopic, unregulated conversion of 25-OH-VitD to 1,25(OH)₂-VitD as an occur in granulomatous diseases, particularly sarcoidosis or from nutritionally- induced hypervitaminosis D. Serum 1,25 (OH)₂-VitD level will be high in both groups, but only patients with hypervitaminosis D will have serum 25-OH-VitD concentrations of >100 ng/ml.

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SEA BIRD MEDICARE CENTRE POWAI

ECCG

SANDEEP PARAB (42 M)

ID: 2862

Date: 14-Sep-24

Time: 11:01:50 AM BP: 110/80 mmHg

Chart Speed: 25 mm/sec

Filter: 35 Hz

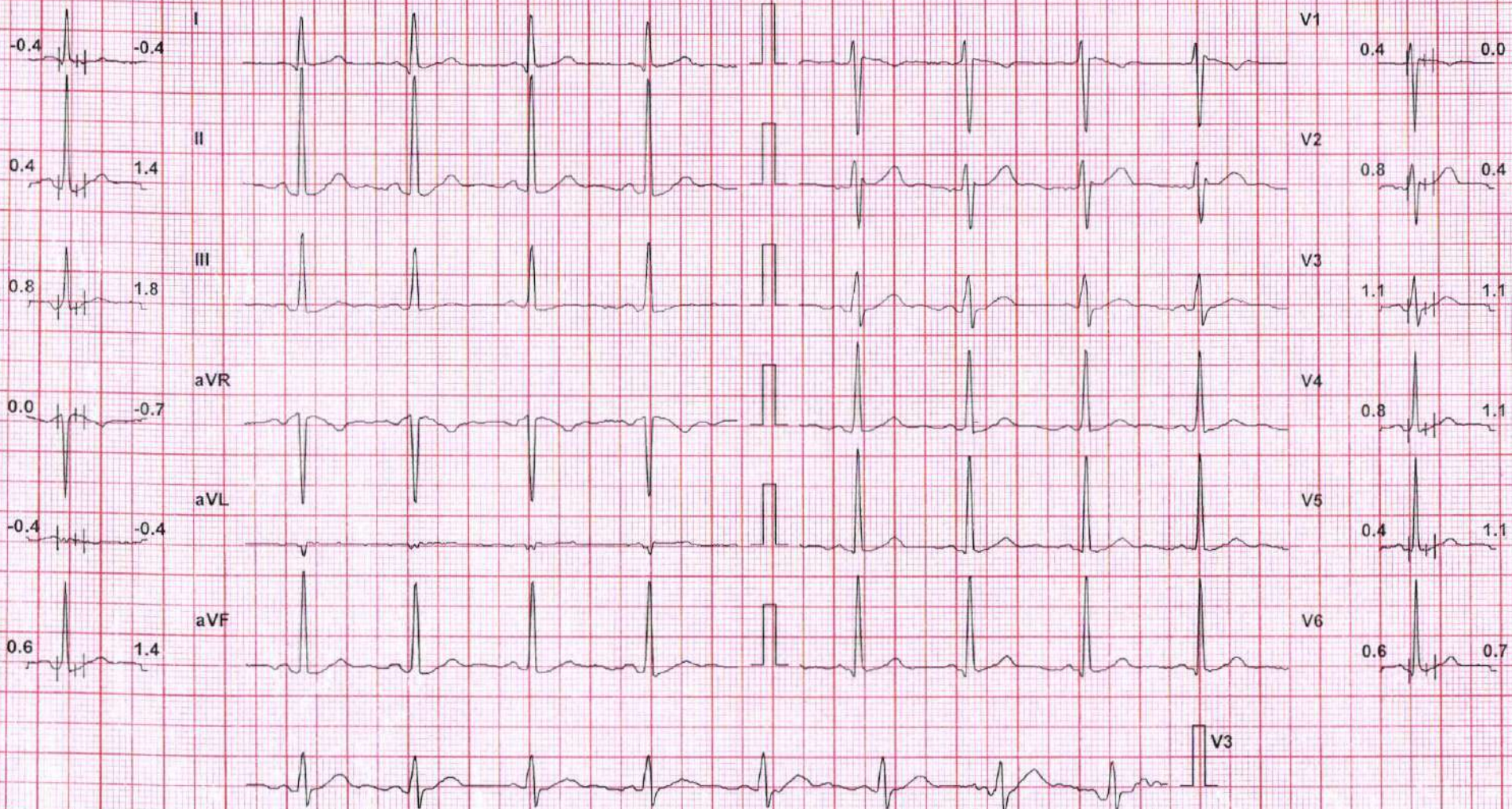
Mains Filt: ON

Amp: 10 mm

HR: 80 bpm

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)



Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms

Interpretation:

NSR

Dr. Mrinalini Singh
 Consultant Physician
 MBBS, DNB, MRCP (UK), EDIC
 Reg. No. 2019/02/0392