



Dept. of Pathology

(For Report Purpose Only)



PRN : 084645
 Patient Name : Mr. KUMAR PRASHANT,
 Age/Sex : 43Yr(s)/Male
 Company Name : BANK OF BARODA
 Referred By : Dr.HOSPITAL PATIENT

Lab No : 12274
 Req.No : 12274

Collection Date & Time : 24/02/2024 08:44 AM
 Reporting Date & Time : 24/02/2024 05:20 PM
 Print Date & Time : 24/02/2024 05:23 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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HAEMATOLOGY

HAEMOGRAM

HAEMOGLOBIN (Hb)	: 13.0	GM/DL	Male : 13.5 - 18.0 Female : 11.5 - 16.5
PCV	: 39.6	%	Male : 40 - 54 Female : 37 - 47
RBC COUNT	: 4.25	Million/cu mm	Male : 4.5 - 6.5 Female : 3.9 - 5.6
M.C.V	: 93.2	cu micron	76 - 96
M.C.H	: 30.6	pg	27 - 32
M.C.H.C	: 32.8	picograms	32 - 36
RDW-CV	: 12.7	%	11 - 16
WBC TOTAL COUNT	: 6200	/cumm	ADULT : 4000 - 11000 CHILD 1-7 DAYS : 8000 - 18000 CHILD 8-14 DAYS : 7800 - 16000 CHILD 1MONTH-<1YR : 4000 - 10000 150000 - 450000
PLATELET COUNT	: 203000	cumm	150000 - 450000
WBC DIFFERENTIAL COUNT			
NEUTROPHILS	: 63	%	ADULT : 40 - 70 CHILD : 20 - 40
ABSOLUTE NEUTROPHILS	: 3288	µL	2000 - 7000
LYMPHOCYTES	: 39	%	ADULT : 20 - 40 CHILD : 40 - 70
ABSOLUTE LYMPHOCYTES	: 2418	µL	1000 - 3000
EOSINOPHILS	: 05	%	01 - 04
ABSOLUTE EOSINOPHILS	: 310	µL	20 - 500
MONOCYTES	: 03	%	02 - 08
ABSOLUTE MONOCYTES	: 186	µL	200 - 1000
BASOPHILS	: 00	%	00 - 01
ABSOLUTE BASOPHILS	: 0	µL	0 - 100



Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412
 Pathologist



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PERIPHERAL BLOOD SMEAR

RBC MORPHOLOGY : Normocytic Normochromic
 WBC MORPHOLOGY : Within Normal Limits
 PLATELETS : Adequate, Giant Platelets +++.
 PARASITES : Not Detected

Method : Processed on 5 Part Fully Automated Blood Cell Counter - sysmex XS-800i.

ESR

ESR MM (AT The End of 1 Hr.) By : 12 mm/hr
 Westergren Method

Male : 0 - 15
 Female : 0 - 20

END OF REPORT



Shoyeb

Technician

Report Type By :- PEERZADE SHOYEB

Ajay A Gangshettiwar

Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412

Pathologist



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HAEMATOLOGY

BLOOD GROUP

BLOOD GROUP : "AB"
 RH FACTOR : POSITIVE

NOTE : This is for your information only.
 Kindly note that any blood or blood product transfusion or therapeutic intervention has to be done after confirmation of blood group by concerned authorities.
 In infants (< 6 months age), please repeat Blood Group after 6 months of age for confirmation.

END OF REPORT




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Dr. AJAY A GANGSHETTIWAR
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BIOCHEMISTRY

BSL-F & PP

Blood Sugar Level Fasting	: 128	MG/DL	60 - 110
Blood Sugar Level PP	: 183	MG/DL	70 - 140

RFT (RENAL FUNCTION TEST)

BIOCHEMICAL EXAMINATION

UREA (serum)	: 32	MG/DL	0 - 45
UREA NITROGEN (serum)	: 14.94	MG/DL	7 - 21
CREATININE (serum)	: 0.8	MG/DL	0.5 - 1.5
URIC ACID (serum)	: 8.0	MG/DL	Male : 3.5 - 7.2 Female : 2.6 - 6.0

SERUM ELECTROLYTES

SERUM SODIUM	: 139	mEq/L	136 - 149
SERUM POTASSIUM	: 4.2	mEq/L	3.8 - 5.2
SERUM CHLORIDE	: 102	mEq/L	98 - 107



Technician

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Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412
 Pathologist

Sahyadri Speciality Labs

Email : labinfo@sahyadrihospitals.com www.sahyadrihospital.com



Patient : Mr. PRASHANT KUMAR MRN : 2898178
Age/Gender : 43 Years / Male Visit No : OP-1 Date: 24/02/2024
Consultant : - Sample Collected : 24/02/2024 12:43 PM
Location : OPD Sample Revd. in Lab : 24/02/2024 12:48 PM
Sponsor : AIMS Hospital & Research Center Reported On : 24/02/2024 02:45 PM
(In association with Olive Healthcare Services Pvt Ltd and AIMS Trust)
Collected At : SSL Labs Processed At : SSL Main Lab
Referring Doctor :



Bill No : 242429643 Status : Approved

Test Name	Test Value	Unit	Reference Interval	Method
GLYCOSYLATED Hb (HbA1c) (24022401756) <i>Sample Type - EDTA Whole Blood</i>				
Blood Glycosylated Hb (HbA1c)	6.4	%	Non-diabetic (Normal) : < 5.7 Pre-diabetes : > or = 5.7 to < 6.5 Diabetes : > or = 6.5	HPLC-NGSP

Note :

- The HbA1c test is used to monitor long term glucose control in patients with diabetes. It provides a retrospective index of the integrated plasma glucose values over an extended period 12 weeks of time and is not subject to the wide fluctuations observed when assaying blood glucose concentrations. It is a measure of the risk for the development of complications in diabetes mellitus.
- Patients with hemolytic disease or other conditions with shortened red blood cell survival exhibit a substantial reduction in HbA1c.

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

Sahyadri
Hospital

Asbene

Dr. Aditi Beke
MBBS,MD (Pathology)
Reg. No. : 2007/04/0707
Sahyadri Speciality Labs

Entered By : YOGESHT



Sahyadri Speciality Labs, Main Lab, Pune accredited by NABL vide Certificate No. MC-2048 Scope available on request



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BIOCHEMISTRY

CALCIUM

CALCIUM (serum)	: 9.9	MG/DL	8.4 - 10.4
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LFT (Liver function Test)

BILIRUBIN TOTAL (serum)	: 0.7	mg/dL	0.2 - 1.2
BILIRUBIN DIRECT (serum)	: 0.2	mg/dL	0.0 - 0.5
BILIRUBIN INDIRECT (serum)	: 0.50	mg/dL	0.1 - 1.0
S.G.O.T (serum)	: 20	U/L	0 - 35
S.G.P.T (serum)	: 31	U/L	0 - 45
ALKALINE PHOSPHATASE (serum)	: 65	U/L	Male : 53 - 128 Female : 42 - 98
PROTEINS TOTAL (serum)	: 7.6	g/dl	6.6 - 8.7
ALBUMIN (serum)	: 4.5	g/dl	3.5 - 5.0
GLOBULIN (serum)	: 3.10	g/dl	1.8 - 3.6
A/G RATIO	: 1.45		1:1 - 2:2



Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTIWAR
M.D.(Pathology) R.No.080412

Pathologist

For Free Home Collection Call : 9545200011



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BIOCHEMISTRY

LIPID PROFILE

CHOLESTEROL (serum)	: 140	MG/DL	Male : 120 - 240 Female : 110 - 230
TRIGLYCERIDE (serum)	: 128	MG/DL	0 - 150
HDL (serum)	: 40	MG/DL	Male : 42 - 79.5 Female : 42 - 79.5
LDL (serum)	: 82	MG/DL	0 - 130
VLDL (serum)	: 25.60	MG/DL	5 - 51
CHOLESTROL/HDL RATIO	: 3.50		Male : 1.0 - 5.0 Female : 1.0 - 4.5
LDL/HDL RATIO	: 2.05		Male : <= 3.6 Female : <= 3.2

NCEP Guidelines

	Desirable	Borderline	Undesirable
Total Cholesterol (mg/dl)	Below 200	200-240	Above 240
HDL Cholesterol (mg/dl)	Above 50	40-59	Below 40
Triglycerides (mg/dl)	Below 150	150-499	Above 500
LDL Cholesterol (mg/dl)	Below 130	130-160	Above 160

Suggested to repeat lipid profile with low fat diet for 2-3 days prior to day of test and abstinence from alcoholic beverages if applicable.
 Cholesterol & Triglycerides reprocessed , & confirmed.

END OF REPORT

Technician

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ENDOCRINOLOGY

TFT (THYROID FUNCTION TEST)

T3-Total (Tri iodothyronine)	: 1.28	ng/mL	0.80 - 2.00
T4 - Total (Thyroxin)	: 9.30	µg/dL	5.1 - 14.1
Thyroid Stimulating Hormones (Ultra TSH)	: 2.12	µIU/mL	0.27 - 4.20

Method :- serum by ECLIA

NOTE:-

Three common ways in which there may be inadequate amounts of the thyroid hormone for normal metabolism. Primary hypothyroidism, in which there is a raised TSH & a low T3. This is due to failure of the thyroid gland, possibly due to autoantibody disease, possibly due to toxic stress or possibly due to iodine deficiency. The second, the most common cause of thyroid failure, occurs at the pituitary level. In this condition there is inadequate thyroid stimulating hormone (TSH) produced from the pituitary and so one tends to see low or normal TSH, low T4s and variable T3s. This condition is most common in many patients with chronic fatigue syndrome, where there is a general suppression of the hypothalamic-pituitary-adrenal axis. The third type of under-functioning is due to poor conversion of there are normal or possibly slightly raised levels of TSH, normal levels of T4 but low levels of thyroid problem routinely TSH, a Free T4 and a Free T3 are also advisable. Any patients who are taking T3 as part of their thyroid supplement need have their T3 levels monitored as well as T4. T3 is much more quickly metabolized than T4 and blood tests should be done between 4-6 hours after their morning dose.

The Guideline for pregnancy reference ranges for total T3, T4, Ultra TSH Level in pregnancy

	Total T3	Total T4	Ultra TSH
First Trimester	0.86 - 1.87	6.60 - 12.4	0.30 - 4.50
2nd Trimester	1.0 - 2.60	6.60 - 15.5	0.50 - 4.60
3rd Trimester	1.0 - 2.60	6.60 - 15.5	0.80 - 5.20

The guidelines for age related reference ranges for T3, T4, & Ultra TSH

	Total T3	Total T4	Ultra TSH
Cord Blood	0.30 - 0.70	1-3 day 6.2-19.9	Birth- 4 day: 1.0-36.9
New Born	0.75 - 2.60	1 Week 6.0-15.9	2-20 Week : 1.7-9.1
1-5 Years	1.0-2.60	1-12 Months 6.8 - 14.9	20 Week- 20 years 0.7 - 6.4
5-10 Years	0.90 - 2.40	1-3 Years 6.8-13.5	
10-15 Years	0.80 - 2.10	3-10 Years 5.5-12.8	

END OF REPORT

Technician

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CLINICAL PATHOLOGY

URINE ROUTINE

PHYSICAL EXAMINATION

QUANTITY : 20 ML
 COLOUR : PALE YELLOW
 APPEARANCE : CLEAR
 REACTION : ACIDIC
 SPECIFIC GRAVITY : 1.020

CHEMICAL EXAMINATION

PROTEIN : ABSENT
 SUGAR : ABSENT
 KETONES : ABSENT
 BILE SALTS : ABSENT
 BILE PIGMENTS : ABSENT
 UROBILINOGEN : NORMAL


MICROSCOPIC EXAMINATION

PUS CELLS : 1-2 /hpf
 RBC CELLS : ABSENT /hpf
 EPITHELIAL CELLS : 1-2 /hpf
 CASTS : ABSENT /hpf
 CRYSTALS : ABSENT
 OTHER FINDINGS : ABSENT
 BACTERIA : ABSENT

END OF REPORT


 Technician

Report Type By :- PEERZADE SHOYEB


 Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412


 Pathologist

ID : 2402240004

Name :
Sex :

Divisions:

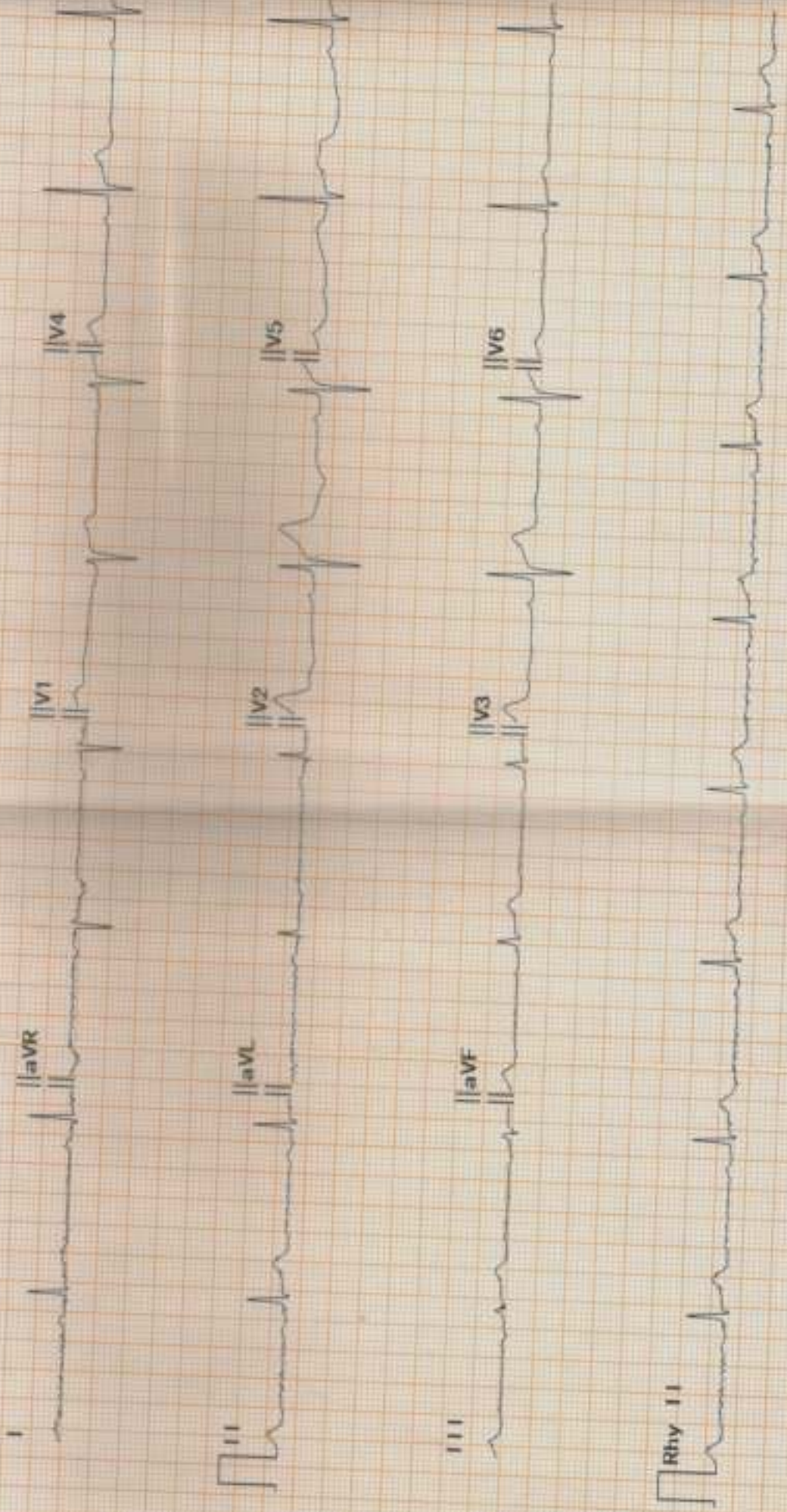
HR 51 bpm
P Dur/PR int 103/204ms
QRS Dur 89 ms
QT/QTc int 375/346 ms
P/QRS/T axis 8/41/70

Date/Time: 2024-02-24 13:33
Age :
BP :
Bed No. :
RV5/SV1 amp 1.248/0.809mV
RV5+SV1 amp 2.057mV
RV6/SV2 amp 1.074/0.930mV

Hospital :
Height : cm
Weight : kg
Hospital No. :
Minnesota Code 8-8-3
9-4-1 (V3)

Diagnosis Info
811: Sinus Bradycar

Normal ECG



Diagnosis for reference, ask your doctor to confirm
AUTO PRINT 3X4+IR 51bpm 10 mm/mV 0.50Hz-25Hz AC 50Hz 25 mm/sec

Confirmed By: _____

2D ECHO / COLOUR DOPPLER

NAME : MR.KUMAR PRASHANT
REF BY : HOSPITAL PATIENT.

43Yrs/M

OPD
24-Feb-24

M - Mode values

Doppler Values

AORTIC ROOT (mm)	33	TAPSE (mm)	
LEFT ATRIUM (mm)	36	PULMONARY PG (mmHg)	4
RV (mm)		AORTIC VEL (m/sec)	1.1
LVID - D (mm)	43	PG (mmHg)	5
LVID - S (mm)	24	MITRAL E VEL (m/sec)	0.7
IVS - D (mm)	11	A VEL (m/sec)	0.9
LVPW -D (mm)	11	TRICUSPID VEL. (m/sec)	
EJECTION FRACTION (%)	60%	PG (mmHg)	

REPORT

Normal LV size & wall thickness.
No regional wall motion abnormality
Normal LV systolic function , LVEF 60%
Normal sized other cardiac chambers.

Pliable mitral valve., No Mitral regurgitation.
Altered mitral diastolic flows.

Trileaflet aortic valve. No aortic stenosis / regurgitation.

Normal Tricuspid & pulmonary valve. No tricuspid regurgitation ,
PA pressure = 20 mmHg - normal

Intact IAS & IVS
No PDA, coarctation of aorta.
No clots , vegetations , pericardial effusion noted.

IMPRESSION :

Grade I LV diastolic dysfunction.
No regional wall motion abnormality.
Normal biventricular function , LVEF 60%
Normal PA pressure.


DR. RAJDATT DEORE
MD,DM-CARDIOLOGIST
MMC 2005/03/1520



Dept. of Radiology

(For Report Purpose Only)

AiMS
Hospital & Research Center

REQ. DATE : 24-FEB-2024
NAME : MR. KUMAR PRASHANT,
PATIENT CODE : 084645
REFERRAL BY : Dr. HOSPITAL PATIENT

REP. DATE : 24-FEB-2024, Redefined

AGE/SEX : 43 YR(S) / MALE

USG ABDOMEN AND PELVIS (MALE)

OBSERVATION :

Liver : Is normal in size , shape & bright in echotexture. No focal lesion / IHBR dilatation.

CBD & PV : Normal in caliber.

G.B. : Moderately distended, Normal.

Spleen : Is normal in size , shape & echotexture. No focal lesion.

Pancreas : Normal in size, shape & echotexture.

Both kidneys are normal in size, shape & echotexture, CMD maintained. No calculus/ hydronephrosis / hydroureter on either side.

Right kidney measures : 10 x 4.2 cm.

Left kidney measures : 9.8 x 4.5 cm.

Urinary bladder : Moderately distended, normal.

Prostate : is normal in size, shape and echotexture. No focal lesion seen.


No demonstrable small bowel / RIF pathology.

No ascites / lymphadenopathy.

IMPRESSION :

Grade I fatty liver

- Kindly correlate clinically.


Dr. SAURABH PATIL
(MBBS, MD(RADIOLOGY))

Tabular Summary

PRASHANT, KUMAR
 Patient ID 18871
 24.02.2024
 13:14:39

43yrs
 Meds:

Test Reason: Screening for CAD
 Medical History: none

Ref. MD: Ordering MD:
 Technician: Test Type: Treadmill Stress Test
 Comment:

BRUCE: Total Exercise Time 09:06
 Max HR: 146 bpm 82% of max predicted 177 bpm HR at rest: 67
 Max BP: 140/90 mmHg Max RPP: 18720 mmHg*bpm
 Maximum Workload: 10.30 METS
 Max ST: -0.12 mV, 0.00 mV/s in III; EXERCISE STAGE 1 01:29
 Arrhythmia: A:16, V(BIG:), PVC:3, PSVC:1
 Reasons for Termination: Target heart rate achieved

Summary: Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall Impression: Normal stress test.

Conclusion: GOOD EFFORT TOLERANCE
 ACHIEVED THR
 NORMAL BP RESPONSE

NO SIGNIFICANT ST-T CHANGES NOTED FOR THE GIVEN WORKLOAD

STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

DR. RAJDATT DEORE
 MD, DM - CARDIOLOGIST
 MMC 2005/03/1520

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (/min)	ST Level (III mV)	Comment
PRETEST	SUPINE	00:02	0.00	0.00	1.0	67			0	-0.04	
	STANDING	00:03	0.00	0.00	1.0	65			0	-0.03	
	HYPERV.	00:15	0.50	0.00	1.0	67			0	-0.04	
EXERCISE	STAGE 1	03:00	1.70	10.00	4.6	106	120/80	12720	0	-0.05	
	STAGE 2	03:00	2.50	12.00	7.0	125	130/80	16250	0	-0.01	
	STAGE 3	03:00	3.40	14.00	10.1	144	130/80	18720	0	-0.01	
	STAGE 4	00:06	4.20	16.00	10.3	144			0	-0.03	
RECOVERY		02:58	0.00	0.00	1.0	81	140/90	11340	0	-0.01	

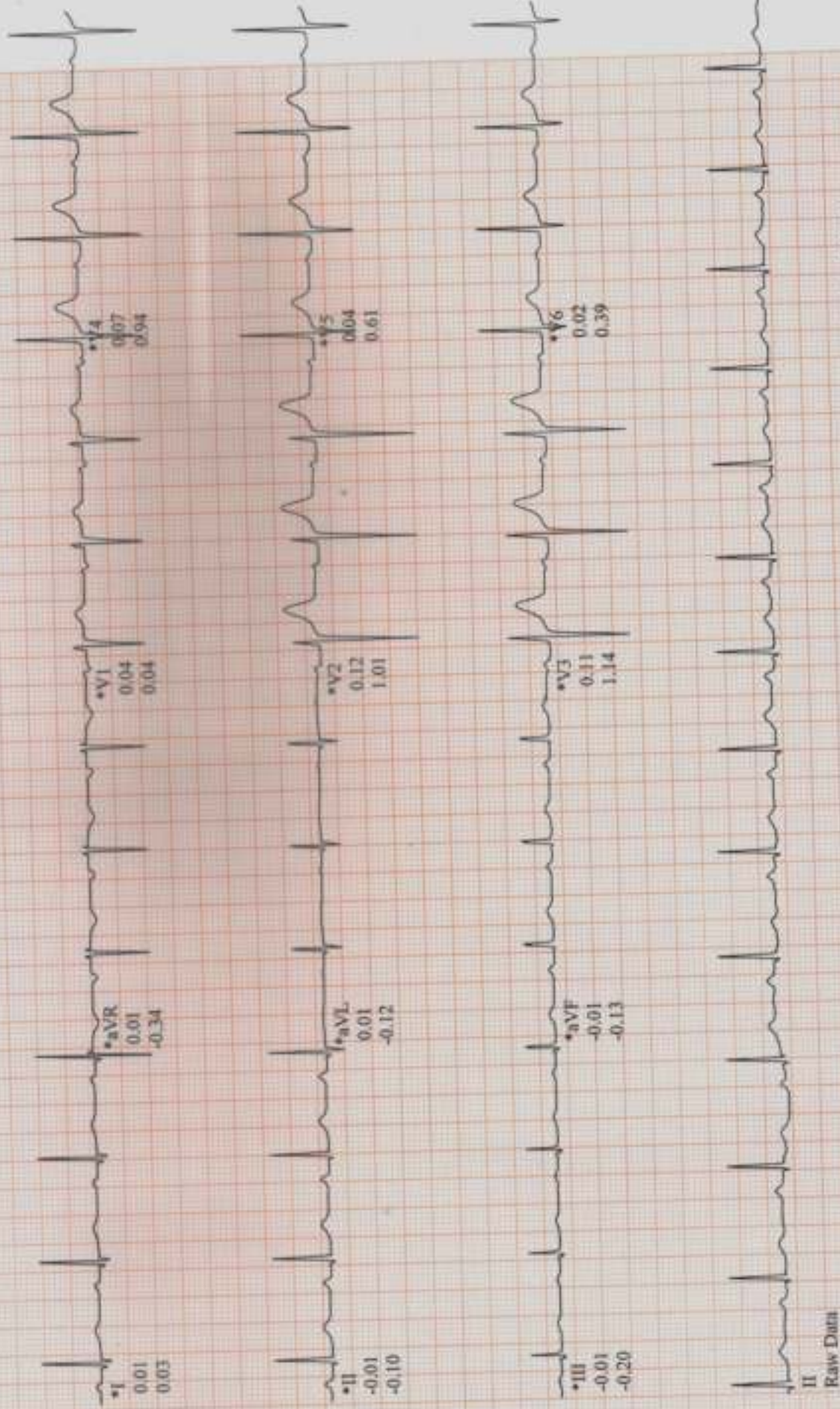
PRASHANT KUMAR
Patient ID 18871
24.02.2024
13:26:54

81 bpm

RECOVERY
#1
02:50

0.0 mph
0.0 %

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



II
Raw Data

*Computer Synthesized Rhythms



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	PRASHANT KUMAR
DATE OF BIRTH	23-10-1980
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	24-02-2024
BOOKING REFERENCE NO.	23M63988100087736S
SPOUSE DETAILS	
EMPLOYEE NAME	MS. SINHA GARIMA
EMPLOYEE EC NO.	63988
EMPLOYEE DESIGNATION	DY REGIONAL HEAD
EMPLOYEE PLACE OF WORK	PUNE,RO PUNE CITY
EMPLOYEE BIRTHDATE	03-10-1984

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 **05-02-2024** 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))

