

Dear MR. YADAV SURESH,

Please find the confirmation for following request.

Booking Date

: 04-11-2022

Package Name

: Medi-Wheel Metro Full Body Health Checkup Male Below 40

Diagnostic/Hospital Aashka Multispeciality Hospital

Diagnostic/Hospital: Between Sargasan & Reliance Cross Road

Contact Details

: 9879752777/7577500900

City

: Gandhi Nagar

State

: Gujarat

Pincode

: 382315

Appointment Date : 11-02-2023

Confirmation

: Confirmed

Status Preferred Time

: 8:00am-12:00pm

Comment

: APPOINTMENT TIME 8:30AM

Instructions to undergo Health Check:

Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

2. 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.

5. 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.



Email:wellness@mediwheel.in 011-41195959

Dear MR. YADAY SURESH,

Please find the confirmation for following request.

Booking Date : 04-11-2022

Package Name : Medi-Wheel Metro Full Body Health Checkup Male Below 40

Diagnostic/Hospital Asshka Multispeciality Hospital Name of

Address of

Diagnostic/Hospital Between Sargasan & Reliance Cross Road

Contact Details : 9879752777/7577500900

: Gandhi Nagar

: Gujarat

State

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Between Sargasan and Reliance Cross Roads Sargasan, Candhinagar - 382421. Gujarat, India Phone: 079 29750750, +91-7575006000 / 9000 Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



DR. PRAKASH D MAKWANA M.D. REG.NO.G-29078 MO.NO-9722116164

UHID:	Date: 11 02 2023	Time: 4102 PM
Patient Name: SURESH Age /Sex:39(8 M LMP:		eight: /eight:
story: C/C/O:	History:	
HEALTH CHECK	3 N	0
Allergy History: NKDA	Addiction:	
.utritional Screening: Well-Nourished / Mal	nourished / Obese	
Vitals & Examination: Temperature: APEBRILE		
Pulse: 78 MINUTE		
BP: 100/60 MM HG		
SP02: 99% ON ROOM A	MIR	
Provisional Diagnosis:		
the second section of the first second		

Advice:							€	
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Rx								
No	Dosage F		Name of drug BLOCK LETTERS	ONLY)	Dose	Route	Frequency	Duration
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150 – 50-200 –		300-350 - 350-400 -			Follow-up:			
00-250 – 50-300 –		400-450 -		9	Sign:	ρ.	D.MUKO	2021/4
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Between Sargasan and Reliance Cross Roads Sargasan, Candhinagar - 382421. Gujarat, India

Phone: (175 29750750, +91-7575006000 / 9000 · Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



DR.TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:		Date:	Time:	
ाtient Name: らい	resh Jadan	Ϥ ,	Age /Sex: 36 M Height: Weight:	
History:	Rombine	chen	- ur.	
Allergy History:		N		
Nutritional Screening	: Well-Nourished / Malr	nourished / Obes	se	
Examination:	Tar	613		
Diagnosis:				

No	Descen		Name of drug		1,5500 - 50		
	Dosage Form	(IN BL	OCK LETTERS ONLY)	Dose	Route	Frequency	Duration
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Other	r Advice:	N	S C A	S C	A		
othe	r Advice:	N	S C A	S C	A		
the			S C A	S C	A		
the		N	S C A	S C	A		
other		N	S C A	S C	A		
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Between Sargasan and Reliance Cross Roads Sargasan, Gandhinagar - 382421. Gujarat, India Phone: 079-29750750, +91-7575006000 / 9000 Emergency No.: +91-7575007707 / 9879752777 www.aashkahospitals.in



CIN: L85110GJ2012PLC072647

PATIENT NAME:SUI

PATIENT NAME:SURESH YADAV GENDER/AGE:Male / 35 Years DOCTOR: OPDNO:00223065

DATE:11/02/23

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears bulky in size (12 cm) and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.1 x 4.6 cms in size. Left kidney measures about 10.6 x 4.8 cms in size.

No evidence of suprarenal mass lesion is seen on either side. Aorta, IVC and para aortic region appears normal. No evidence of ascites is seen.

BLADDER: Bladder is minimally distended

PROSTATE: Prostate appears normal in size and shows normal parenchymal echoes. No evidence of pathological calcification or solid or cystic mass lesion is seen.

COMMENT: Normal sonographic appearance of liver, GB; Pancreas, kidneys, para-aortic region, bladder and prostate, except bulky spleen.

RADIOLOGIST DR.MEHUL PATELIYA

Between Sargasan and Reliance Cross Roads Sargasan, Gandhinagar - 382421. Gujarat, India Phone: 079-29750750, +91-7575006000 / 9000 Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



PATIENT NAME:SURESH YADAV GENDER/AGE:Male / 35 Years DOCTOR:

OPDNO:O0223065

DATE:11/02/23

X-RAY CHEST PA

Both lung fields appear clear

No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.

Both hilar shadows and c.p.angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.

Impression: Normal Chest X ray examination

RADIOLOGIST
DR.MEHUL PATELIYA



Name : SURESH YADAV Sex/Age : Male / 35 Years Case ID : 30202200225

Ref.By : HOSPITAL Dis. At : Pt. ID : 2552854

Bill. Loc. ; Aashka hospital Pt. Loc ;

 Reg Date and Time
 : 11-Feb-2023 08:50
 Sample Type
 :
 Mobile No
 : 9466024505

 Sample Date and Time
 : 11-Feb-2023 08:50
 Sample Coll. By
 :
 Ref Id1
 : 00223065

Report Date and Time : Acc. Remarks : Normal Ref Id2 : 022238840

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Haemogram (CBC)			
RDW (RBC histogram)	19.10	%	11.00 - 16.00
Lipid Profile			
Cholesterol	85.74	mg/dL	110 - 200
HDL Cholesterol	38.9	mg/dL	48 - 77
LDL Cholesterol	34.31	mg/dL	65 - 100
Liver Function Test			
Bilirubin Total	1.08	mg/dL	0.2 - 1.0

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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Ref Id2

: O22238840

SURESH YADAV Sex/Age : Male / 35 Years Name Case ID : 30202200225

Ref.By : HOSPITAL Dis. At : Pt. ID : 2552854

Pt. Loc Bill. Loc. ; Aashka hospital

Acc. Remarks

Reg Date and Time : 11-Feb-2023 08:50 : Whole Blood EDTA Sample Type Mobile No : 9466024505

Sample Date and Time : 11-Feb-2023 08:50 Sample Coll. By Ref Id1 : O0223065 Normal Report Date and Time : 11-Feb-2023 09:11

TEST RESULTS UNIT BIOLOGICAL REF. INTERVAL REMARKS

HAEMOGRAM REPORT

HB AND INDICES				
Haemoglobin (Colorimetric)		13.7	G%	13.00 - 17.00
RBC (Electrical Impedance)		4.54	millions/cumm	4.50 - 5.50
PCV(Calc)		41.77	%	40.00 - 50.00
MCV (RBC histogram)		92.0	fL	83.00 - 101.00
MCH (Calc)		30.2	pg	27.00 - 32.00
MCHC (Calc)		32.8	gm/dL	31.50 - 34.50
RDW (RBC histogram)	Н	19.10	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	5960	/µL	4000.00 - 10000	0.00	
Neutrophil	[%] 62.0		CTED VALUES - 70.00	[Abs] 3695	EXPECTED VALUES /μL 2000.00 - 7000.00
Lymphocyte	27.0	% 20.00	- 40.00	1609	/µL 1000.00 - 3000.00
Eosinophil	5.0	% 1.00 -	6.00	298	/µL 20.00 - 500.00
Monocytes	5.0	% 2.00 -	10.00	298	/µL 200.00 - 1000.00
Basophil	1.0	% 0.00 -	2.00	60	/µL 0.00 - 100.00

PLATELET COUNT (Optical)

150000.00 - 410000.00 **Platelet Count** 178000 /µL

Neutrophil to Lymphocyte 2.30 0.78 - 3.53

Ratio (NLR)

SMEAR STUDY

RBC Morphology Normocytic Normochromic RBCs. **WBC Morphology** Total WBC count within normal limits. **Platelet** Platelets are adequate in number. Malarial Parasite not seen on smear. **Parasite**

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah M.D. (Pathologist)

Dr. Manoj Shah M.D. (Path. & Bact.)

Printed On: 11-Feb-2023 14:30

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Name : SURESH YADAV		Sex/Age : Male / 35 Years	Case ID	30202200225
Ref.By : HOSPITAL		Dis. At :	Pt. ID	: 2552854
Bill. Loc. ; Aashka hospital			Pt. Loc	:
Reg Date and Time : 11-Feb-2023 08:50	Sample Type	: Whole Blood EDTA	Mobile No	: 9466024505
Sample Date and Time : 11-Feb-2023 08:50	Sample Coll. By	:	Ref Id1	: O0223065
Report Date and Time : 11-Feb-2023 09:11	Acc. Remarks	: Normal	Ref Id2	: O22238840

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah M.D. (Pathologist) Dr. Manoj Shah M.D. (Path. & Bact.) Page 3 of 13

Printed On: 11-Feb-2023 14:30

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LABORATORY REPORT : SURESH YADAV Sex/Age : Male / 35 Years 30202200225 Name Case ID Ref.By : HOSPITAL Pt. ID Dis. At : : 2552854 Bill. Loc. ; Aashka hospital Pt. Loc : 11-Feb-2023 08:50 Reg Date and Time Sample Type : Whole Blood EDTA Mobile No : 9466024505 Sample Date and Time : 11-Feb-2023 08:50 Sample Coll. By : Ref Id1 : O0223065 Report Date and Time : 11-Feb-2023 12:34 Acc. Remarks : Normal Ref Id2 : O22238840 **TEST RESULTS** UNIT **BIOLOGICAL REF RANGE** REMARKS

mm after 1hr 3 - 15

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

ESR

Dr. Shreya Shah

M.D. (Pathologist)

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Name ; SURESH YADAV Sex/Age ; Male / 35 Years Case ID ; 30202200225

Ref.By : HOSPITAL Dis. At : Pt. ID : 2552854

Bill. Loc. ; Aashka hospital Pt. Loc ;

Reg Date and Time : 11-Feb-2023 08:50 | Sample Type : Whole Blood EDTA | Mobile No : 9466024505

 Sample Date and Time
 : 11-Feb-2023 08:50
 Sample Coll. By
 :
 Ref Id1
 : 00223065

 Report Date and Time
 : 11-Feb-2023 09:01
 Acc. Remarks
 : Normal
 Ref Id2
 : 022238840

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

HAEMATOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology)
(Both Forward and Reverse Group)

ABO Type

В

Rh Type

POSITIVE

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

Shreya Shah Dr. Ma

M.D. (Pathologist)

Dr. Manoj Shah M.D. (Path. & Bact.) Page 5 of 13





Sex/Age : Male / 35 Years

30202200225 Case ID

Dis. At :

Normal

Pt. ID : 2552854

Pt. Loc

Bill. Loc. ; Aashka hospital Reg Date and Time : 11-Feb-2023 08:50

Sample Type : Spot Urine Mobile No : 9466024505

Sample Date and Time : 11-Feb-2023 08:50

: HOSPITAL

: SURESH YADAV

Sample Coll. By

Ref Id1 : O0223065

Report Date and Time : 11-Feb-2023 09:34

Acc. Remarks

Ref Id2 022238840

RESULTS

UNIT

BIOLOGICAL REF RANGE REMARKS

URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour

TEST

Name

Ref.By

Pale yellow

Transparency

Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity

1.025

1.005 - 1.030

pΗ

5.5

5 - 8

Leucocytes (ESTERASE)

Negative

Protein

Negative Negative

Negative

Glucose

Negative

Negative

Ketone Bodies Urine

Urobilinogen

Negative

Negative

Bilirubin

Negative Negative Negative Negative

Blood

Negative

Negative

Nitrite

Negative

Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte

Nil

Red Blood Cell

Nil

/HPF

/HPF

Nil

Epithelial Cell

Present +

Present(+)

Bacteria

Nil

/HPF

Nil

Yeast

Nil

/ul /ul

Nil

Nil

Cast Crystals

Nil Nil

/LPF /HPF Nil Nil

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Page 6 of 13



SURESH YADAV Name

Sex/Age : Male / 35 Years

Case ID : 30202200225

Ref.By

: HOSPITAL

Dis. At :

Pt. ID

: 2552854

Bill. Loc. ; Aashka hospital

: 11-Feb-2023 08:50

: Spot Urine

Mobile No : 9466024505

Pt. Loc

Reg Date and Time

Sample Type Sample Coll. By

Ref Id1

: O0223065

Sample Date and Time : 11-Feb-2023 08:50 Report Date and Time : 11-Feb-2023 09:34

Acc. Remarks Normal Ref Id2

: O22238840

Parameter	Unit	Expected value		Resu	lt/Notation	15	312.28.0
HEAVE THE REAL PROPERTY.			Trace	+	++	+++	++++
рН		4.6-8.0	47-4-12-12		10.5		
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value		Result	/Notification	ons	
		er i transporte de la companya de la	Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)		Negative		-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	•	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-		-	-

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

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Name : SURESH YAD	AV		Sex/Age :	Male / 35 Y	ears Case ID : 30202200225
Ref.By : HOSPITAL			Dis. At :		Pt. ID : 2552854
Bill. Loc. ; Aashka hospita	ıl				Pt. Loc :
Reg Date and Time :	11-Feb-2023 08:50	Sample Type		Fluoride F,Plasr PP,Serum	ma Mobile No : 9466024505
Sample Date and Time :	11-Feb-2023 08:50	Sample Coll. B	у :		Ref ld1 : 00223065
Report Date and Time	11-Feb-2023 12:34 RESU		· Normal UNIT	BIOLOGICAL	Ref Id2 · O22238840 REF RANGE REMARKS
			••••	D1020010712	THE TOUTOE TREMPUTATIO
Plasma Glucose - F	99.35		mg/dL	70.0 - 100	
Plasma Glucose - PP	100.2	6	mg/dL	70.0 - 140.0	
BUN (Blood Urea Nitroge	n) 6.5		mg/dL	6.00 - 20.00	
Creatinine	0.74		mg/dL	0.50 - 1.50	
Uric Acid	6.98		mg/dL	3.5 - 7.2	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah M.D. (Pathologist) Page 8 of 13





: SURESH YADAV

Name

LABORATORY REPORT

Ref.By : HOSPITAL Dis. At : Pt. ID : 2552854

Bill. Loc. ; Aashka hospital Pt. Loc ;

Reg Date and Time : 11-Feb-2023 08:50 | Sample Type : Serum | Mobile No : 9466024505

 Sample Date and Time
 : 11-Feb-2023 08:50
 Sample Coll. By
 :
 Ref Id1
 : 00223065

 Report Date and Time
 : 11-Feb-2023 12:32
 Acc. Remarks
 : Normal
 Ref Id2
 : 022238840

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol	L	85.74	mg/dL	110 - 200	
HDL Cholesterol	L	38.9	mg/dL	48 - 77	
Triglyceride		62.66	mg/dL	40 - 200	
VLDL Calculated		12.53	mg/dL	10 - 40	
Chol/HDL Calculated		2.20		0 - 4.1	
LDL Cholesterol Calculated	L	34.31	mg/dL	65 - 100	

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal<100	Desirable<200	Low<40	Normal<150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	*	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
 - Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpreation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- · LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah M.D. (Pathologist) Page 9 of 13





: SURESH YADAV Name Sex/Age : Male / 35 Years

Case ID 30202200225

Ref.By : HOSPITAL Dis. At : Pt. ID : 2552854

Bill. Loc. : Aashka hospital Pt. Loc

Mobile No : 9466024505

Reg Date and Time : 11-Feb-2023 08:50 Sample Type : Serum

Ref Id1

Sample Date and Time : 11-Feb-2023 08:50 | Sample Coll. By : Report Date and Time : 11-Feb-2023 12:33 Acc. Remarks

Ref Id2 : O22238840

: O0223065

TEST RESULTS · Normal

BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

UNIT

Liver Function Test

Liver i unction rest						
S.G.P.T.		32.61	U/L	0 - 41		
S.G.O.T.		27.10	U/L	15 - 37		
Alkaline Phosphatase		90.51	U/L	40 - 130		
Gamma Glutamyl Transferase		16.82	U/L	8 - 61		
Proteins (Total)		7.71	gm/dL	6.4 - 8.2		
Albumin		4.65	gm/dL	3.4 - 5		
Globulin Calculated		3.06	gm/dL	2 - 4.1		
A/G Ratio Calculated		1.5		1.0 - 2.1		
Bilirubin Total	Н	1.08	mg/dL	0.2 - 1.0		
Bilirubin Conjugated		0.44	mg/dL			
Bilirubin Unconjugated Calculated		0.64	mg/dL	0 - 0.8		

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah M.D. (Pathologist)

Printed On: 11-Feb-2023 14:30

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: SURESH YADAV Name

Sex/Age: Male / 35 Years

Case ID 30202200225

Ref.By : HOSPITAL

Dis. At :

Pt. ID : 2552854

Bill. Loc. ; Aashka hospital

Pt. Loc

Reg Date and Time

: 11-Feb-2023 08:50

Sample Type · Whole Blood EDTA

Mobile No : 9466024505

Sample Date and Time : 11-Feb-2023 08:50 Sample Coll. By

Ref Id1

: O0223065

Report Date and Time : 11-Feb-2023 10:49 Acc. Remarks

: Normal

Ref Id2

: O22238840

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

Glycated Haemoglobin Estimation

HbA1C

4.66

% of total Hb <5.7: Normal

5.7-6.4: Prediabetes

>=6.5: Diabetes

Estimated Avg Glucose (3 Mths)

87.04

mg/dL

Please Note change in reference range as per ADA 2021 guidelines.

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.

Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.

Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.

Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.

In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.

The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes,

risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah

M.D. (Pathologist)

Page 11 of 13

Printed On: 11-Feb-2023 14:30

ACCREDITED



	ı	ABORATORY	REPORT			
Name : SURESH YA	DAV		Sex/Age	: Male / 35 Years	Case ID	: 30202200225
Ref.By : HOSPITAL			Dis. At	:	Pt. ID	: 2552854
Bill. Loc. ; Aashka hosp	ital				Pt. Loc	:
Reg Date and Time	: 11-Feb-2023 08:50	Sample Type	: Serum		Mobile No	: 9466024505
Sample Date and Time	: 11-Feb-2023 08:50	Sample Coll. By	<i>i</i> :		Ref ld1	: O0223065
Report Date and Time	: 11-Feb-2023 10:12	Acc. Remarks	: Normal		Ref Id2	: O22238840
TEST	RESU	LTS	UNIT	BIOLOGICAL REF	RANGE	REMARKS
		Thyroid Fu	unction T	est		
Triiodothyronine (T3)	92.01		ng/dL	70 - 204		
Thyroxine (T4)	8.2		ng/dL	4.6 - 10.5		
TSH CMIA INTERPRETATIONS	2.413		μIU/mL	0.4 - 4.2		

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 μIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 μIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipent hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a supressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone.

Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in Pregnacy

First trimester Second trimester Third trimester Reference range (microIU/mI)

0.24 - 2.00 0.43-2.2 0.8-2.5

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah

M.D. (Pathologist)

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Name : SURESH YADAV Sex/Age : Male / 35 Years Case ID : 30202200225

Ref.By : HOSPITAL Dis. At : Pt. ID : 2552854

Bill. Loc. ; Aashka hospital Pt. Loc

Reg Date and Time : 11-Feb-2023 08:50 Sample Type : Serum Mobile No : 9466024505

Sample Date and Time : 11-Feb-2023 08:50 Sample Coll. By : Ref Id1 : 00223065

Report Date and Time : 11-Feb-2023 10:12 Acc. Remarks : Normal Ref Id2 : O22238840

Interpretation Note:

Ultra sensitive-thyroid–stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests: T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormons vary according trimesper in pregnancy.

TSH ref range in Pregnacy Reference range (microIU/ml)

 First triemester
 0.24 - 2.00

 Second triemester
 0.43-22

 Third triemester
 0.8-2.5

	Т3	T4	TSH	
Normal Thyroid function	N	N	N	
Primary Hyperthyroidism	1	1	4	
Secondary Hyperthyroidism	↑	1	^	
Grave's Thyroiditis	1	^	^	
T3 Thyrotoxicosis	^	N	N/↓	
Primary Hypothyroidism	4	V	^	
Secondary Hypothyroidism	4	1	J	
Subclinical Hypothyroidism	N	N	^	
Patient on treatment	N	N/↑	4	

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

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.) Dr. Shreya Shah

M.D. (Pathologist)

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CIN: L85110GJ2012PLC072647

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PATIENT NAME:SURESH YADAV GENDER/AGE:Male / 35 Years DOCTOR:DR.HASIT JOSHI OPDNO:00223065

DATE:11/02/23

2D-ECHO

MITRAL VALVE

: MILD MVP

AORTIC VALVE

: NORMAL

TRICUSPID VALVE

: NORMAL

PULMONARY VALVE

: NORMAL

AORTA

: 30mm

LEFT ATRIUM

TTIDIO

: 32mm

LV Dd / Ds

: 37/25mm

EF 60%

IVS / LVPW / D

: 10/9mm

IVS

: INTACT

IAS

: INTACT

RA

: NORMAL

RV

: NORMAL

PA

: NORMAL

PERICARDIUM

: NORMAL

VEL

PEAK

MEAN

M/S

Gradient mm Hg

Gradient mm Hg

MITRAL

: 1/0.7 m/s

AORTIC

: 1.0m/s

.....

PULMONARY

: 0.8m/s

COLOUR DOPPLER

: MILD MR/TR

RVSP

: 26mmHg

CONCLUSION

: MILD MVP / MILD MR;

NORMAL LV SIZE / SYSTOLIC FUNCTION.

CARDIOLOGIST

DR.HASIT JOSHI (9825012235)

Yadav, Suresh Ħ GE MAC2000 QRS: QT / QTcBaz: PR: P : RR / PP: P / QRS / T: Technician: Ordering Ph: Referring Ph: Attending Ph: 1.1 49 / 51 / 40 degrees Contrast 226 166 05 74 ms 366 / 380 ms 158 ms 94 ms 920 / 923 ms 12SL™ v241 aVR aVL 11.02.2023 10:03:42 AM AASHKA HOSPITAL LTD. SARGASAN GANDHINAGAR Normal Sinus rhythm Normal ECG 25 mm/s 10 mm/mV \$ 5 ≤ ADS Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3: 0.56-20 Hz 50 Hz Room: 4x2.5x3_25_R1 Unconfirmed -- / -- mmHg 65 bpm 1/1

AASHKA HOSPITAL . LTD. SARGASAN GANDHINAGAR Station Telephone:

DOB: 19.07.1987

Referring Physician: --

Attending Physician: DR.SANKET MATHUKIYA

Age: 35yrs

Gender: Male

Race: Indian

Technician: --

EXERCISE STRESS TEST REPORT

Patient Name: YADAV, SURESH Patient ID: 00223065

Height: 179 cm Weight: 69.5 kg

Study Date: 11.02.2023

Test Type: --Protocol: BRUCE

Medications:

Medical History:

Reason for Exercise Test:

Medical History:

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:27	0.00	0.00	78	110/80	
STANDING HYPERV. WARM-UP	STANDING	00:03	0.00	0.00	78		
	HYPERV.	00:02	0.00	0.00	78		
	WARM-UP	01:19	1.00	0.00	98		
S' S'	STAGE 1	03:00	1.70	10.00	123	150/90	
	STAGE 2	03:00	2.50	12.00	142	180/100	
	STAGE 3	03:00	3.40	14.00	173	190/100	
	STAGE 4	00:54	4.20	16.00	187		
RECOVERY		04:40	0.00	0.00	112	160/96	

The patient exercised according to the BRUCE for 9:53 min:s, achieving a work level of Max. METS: 13.00. The resting heart rate of 80 bpm rose to a maximal heart rate of 187 bpm. This value represents 101 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/80 mmHg, rose to a maximum blood pressure of 194/100 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.

Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - exaggerated response.

Chest Pain: none. Arrhythmias: none. ST Changes: none.

Overall impression: Normal stress test.

Conclusions

STRESS TEST FOR INDUCIBLE ISCHAEMIA IS NEGATIVE

Physician

Technician