



LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. MANDAL REKHA
EC NO.	161318
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	BOKARO STEEL CITY
BIRTHDATE	21-09-1984
PROPOSED DATE OF HEALTH CHECKUP	31-03-2023
BOOKING REFERENCE NO.	22M161318100056856E

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 31-03-2023 till 31-03-2023 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 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))





 भारत सरकार
GOVERNMENT OF INDIA




रेखा आचार्या
Rekha Acharya
जन्म तिथि/ DOB: 21/09/1984
महिला / FEMALE



9251 5385 3444

मेरा आधार, मेरी पहचान

 भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता: W/O: रघु नाथ आचार्या, माँ
अम्बे मंदिर के पास, साहू
मार्केट, चाम, चाम, बोकारो,
झारखण्ड - 827013

Address:
W/O: Raghunath Acharya, Near
Maa Ambe mandir, Sahu Market,
Chas. Chas. Bokaro,
Jharkhand - 827013

9251 5385 3444

MERA AADHAAR, MERI PEHACHAN



PHC

नयनश्री नेत्रालय

(A Unit of Asarfi Hospital Limited)

Baramuri, Bishunpur Polytechnic, Dhanbad - 828 130 (Jharkhand)
7707013096, 7808368888 | www.asarfihospital.com, info@asarfihospital.com

PRESCRIPTION FOR GLASS

Reg No. 79033

Date: 08/09/24

Name: Rekha Manjal

Age: 39 Gender: M F

	RIGHT EYE				LEFT EYE			
	D SPH	D CYL	AXIS	VISION	D SPH	D CYL	AXIS	VISION
FOR DISTANCE VISION		<u>-1.00</u>	<u>-</u>	<u>6/6</u>		<u>-1.00</u>	<u>-</u>	<u>6/6</u>
ADD FOR NEAR VISION	<u>+0.75</u>	<u>-</u>	<u>-</u>	<u>M</u>	<u>+0.75</u>	<u>-</u>	<u>-</u>	<u>M</u>

Lens White / Photo Chromic / Tinted / Kryptok / Executive / Bifocal / CR-39

P.D/- m.m. For DV

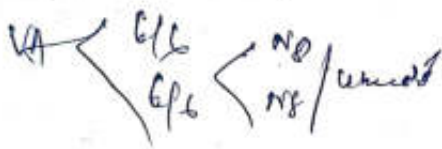
m.m. For NV

Remarks: Constant use / Distance use / near use



Refractionist [Signature]
AHL/D/079/13/October/23

4/07 Divat seen in (22)
= 014 km



Adm

① Alan

② R/A 002



Pt. treated at outside
@ 014 km ago, kept at not
enough
NOY - by outal/ved the
Hof Rystyr 08 @ 124.
PSC Ruffi nash

→ 24/03



असर्फी हॉस्पिटल
सबके लिए स्वास्थ्य

12 असर्फी हॉस्पिटल

OUT PATIENT DEPARTMENT

सबके लिए स्वास्थ्य

Mediwheel

Department of General Medicine

Regd. No. : MAR24-79033	Visit : OPD/80324/197383
Patient Name : MRS. REKHA MANDAL	Mobile : 8102466600
Age/Sex : 39 Y 5 M 0 D / Female	Date : 8-Mar-2024 2:56 pm
Address : SAHU MARKET, CHAS, Bokaro - 827013, JHARKHAND,	
Doctor : Dr. Pankaj Kumar MBBS, DNB (Medicine) Senior Consultant	OPD Timing : MON-SAT (10AM - 2PM & 6PM - 7PM)
	Referred By :

Allergies : none	Height : Ft	In Temp. : 97.3 F	SPO2 : 99 %
	Weight : 55 Kg	Pulse : 90	BPM B.P. : 140/80 mm/Hg

History and complaints :

Examination:

- dup 28y

Diagnosis:

CR 2145

Investigations:

Medicines Prescribed:

① once clb + low

① T. Xitar 10ml ① (m)

① T. Sedofen 150 ml ①

② Sp. AKR um Ewel

Follow up:

Days

Advice (Diet/ Lifestyle / Rehab)

Date :

Time :

Signature of Doctor

*This document is not valid for Medico-legal purposes.



© AHLJ/0085/4180/Jan/24

2) Cont used for ...

39 Years

mrs rekha mandal
Female

08-Mar-24 12:23:40

ASARFI INST. OF CARDIAC SCIENCES



Rate 79 . Sinus rhythm.....normal P axis, V-rate 50-99
 . Borderline T wave abnormalities.....T/QRS ratio < 1/20 or flat T

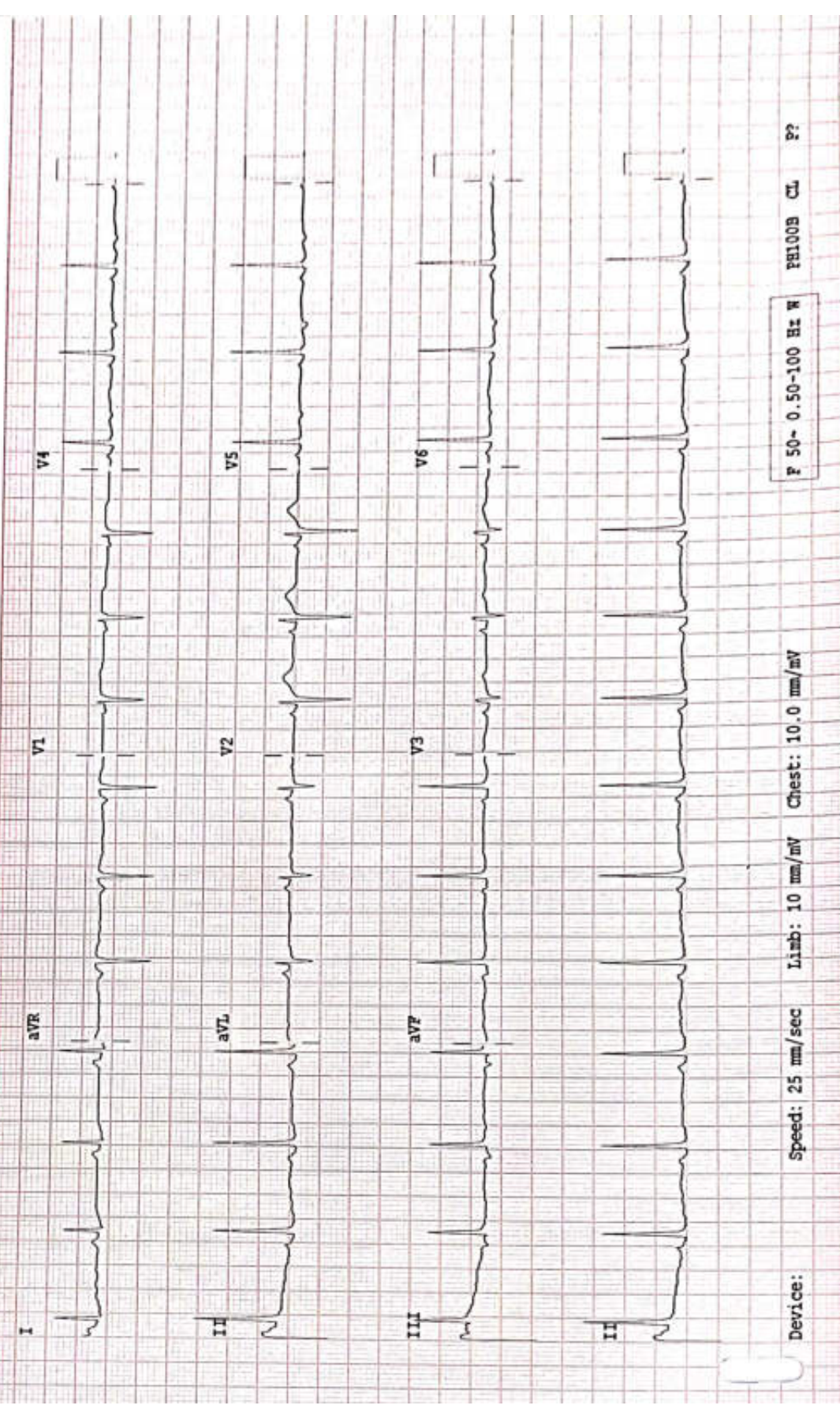
PR 133
 QRSD 68
 QT 333
 QTc 382

--AXIS--
 P 17
 QRS 68
 T 53

12 Lead; Standard Placement

- BORDERLINE ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

P 50- 0.50-100 Hz W F81009 CL P?

RADIOLOGY REPORT

Patient Name :	MRS.REKHA MANDAL	Patient ID :	79033
Modality :	DX	Sex :	F
Age :	39Y	Study :	CHEST PA
Reff. Dr. :	DR.SELF	Study Date :	08-03-2024

RADIOGRAPH OF THE CHEST PA VIEW

FINDINGS:

- Both the lung fields are clear.
Both the costophrenic angles are clear.
Hilar shadows appear normal.
Cardiothoracic ratio is within normal limits.
Hemidiaphragms are normal in position and contour.
Trachea is in the midline.
Bony thorax under view is unremarkable.

IMPRESSION:

Radiograph chest does not reveal any significant abnormality.

Barkha Keswani

Dr. Barkha Keswani

DNB, (Radio diagnosis)

Reg. No: 2004/02/0648

Date 08-03-2024 Time 15-47-43

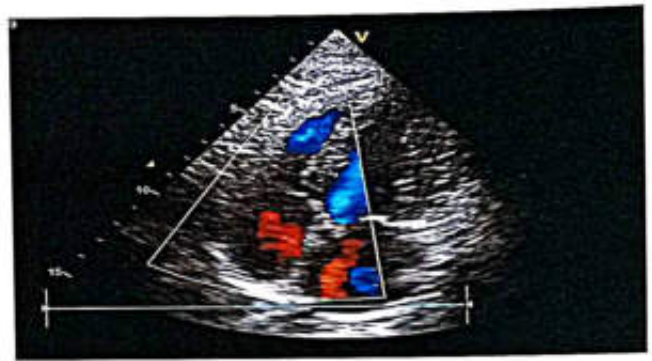
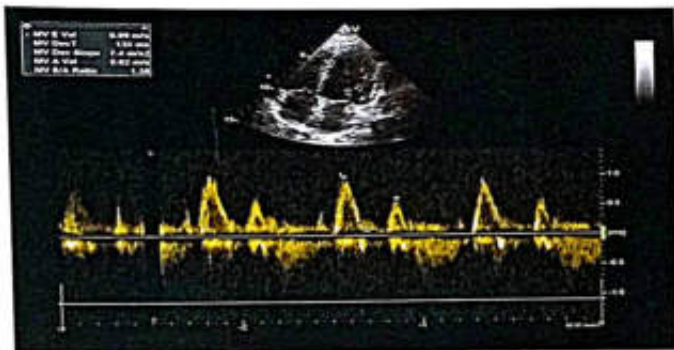
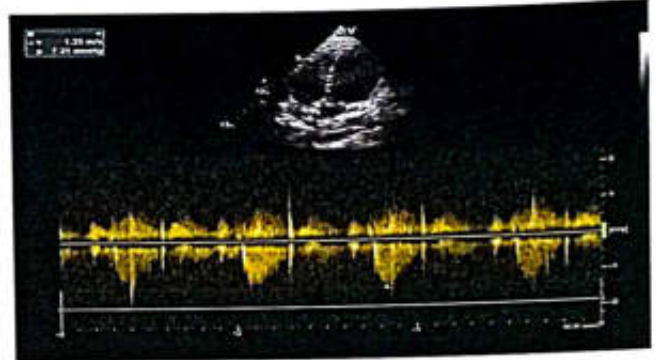
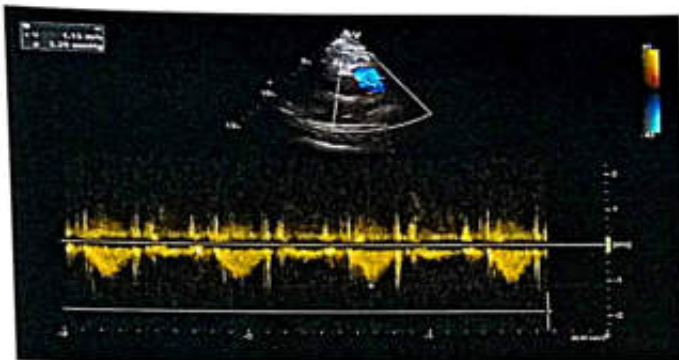
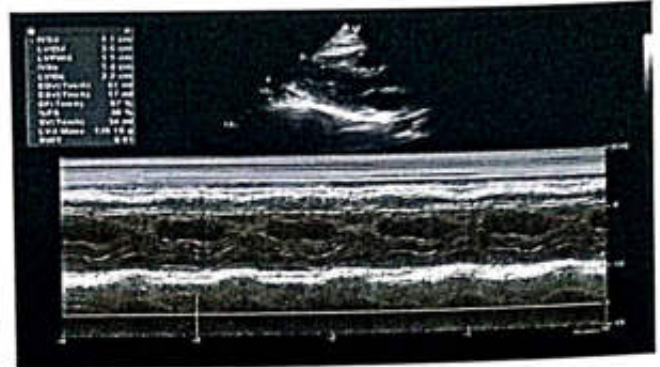


Disclaimer: - It is an online interpretation of medical imaging based on clinical data. All modern machines/ procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patient's identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose.

ASARFI INSTITUTE OF CARDIAC SCIENCES

Name : MRS REKHA MANDAL
Patient Id : 79033

Date : 08/03/2024



REPORT

ECHOCARDIOGRAPHY REPORT

Name: MRS REKHA MANDAL

Age: 39

Sex: Female

Date: 08/03/2024

2D & M-MODE MEASUREMENTS

LA Diam	2.9 cm
Ao Diam	3.1 cm
IVSd	1.1 cm
LVIDd	3.5 cm
LVPWd	1.1 cm
IVSs	1.4 cm
LVIDs	2.2 cm

2D & M-MODE CALCULATIONS

EDV(Teich)	51 ml
ESV(Teich)	17 ml
EF(Teich)	67 %
%FS	36 %
SV(Teich)	34 ml
LVd Mass	126.18 g
RWT	0.61

MITRAL VALVE

MV E Vel	0.99 m/s
MV DecT	133 ms
MV Dec Slope	7.4 m/s ²
MV A Vel	0.62 m/s
MV E/A Ratio	1.58

AORTIC VALVE

AV Vmax	1.35 m/s
AV maxPG	7.31 mmHg

TRICUSPID VALVE

PULMONARY VALVE

PV Vmax	1.15 m/s
PV maxPG	5.29 mmHg

COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-60%)
- NORMAL MITRAL INFLOW PATTERN
- NO MR, AR, NO TR, NO PAH
- IAS, IVS INTACT
- NO CLOT, PE
- IVC NORMAL

IMPRESSION:

- NORMAL ECHO STUDY

DR. S.H. CHAVAN
(CONSULTANT CARDIOLOGIST)

TECH. SIG



Asarfi Hospital Limited

©AHL/D/0069/4180/November/23

Regd Office : Baramuri, P.O.-Bishunpur Polytechnic, Dhanbad - 828130 CIN : U85110JH2005PLC011673
Ph.: 9234302735, 9234651512, 9234681514 Email : info@asarfihospital.com / www.asarfihospital.com


RADIOLOGY REPORT

Reg. No.	79033	Ref. Dr.	SELF
Name	MRS. REKHA MANDAL	Study	USG WHOLE ABDOMEN
Age & Sex	39Y /F	Reporting Date	08.03.2024

USG WHOLE ABDOMEN

- LIVER** : Liver is normal in size & shape. It appears bright in echotexture. No obvious focal lesion is seen. IHBR are not dilated.
- GALL BLADDER** : GB is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- CBD** : CBD is normal in course & caliber.
- PV** : PV is normal in course & caliber.
- PANCREAS** : Pancreas is normal in size, shape & echotexture. Peripancreatic soft tissues appear normal. MPD is not dilated.
- SPLEEN** : Spleen is normal in shape, size & echotexture. It measures 7.9cm in size.
- KIDNEYS** : The right kidney measures 10.7 x 3.5cm. The left kidney measures 11.2 x 4.2cm. Both kidneys are normal in shape, size & position. The pelvicalyceal system is normal. Corticomedullary differentiation is maintained. No focal lesion is seen. ✓
- URINARY BLADDER** : Urinary bladder is well distended. Multiple internal echoes are seen in the lumen. The wall thickness is normal.
- UTERUS** : Uterus is normal in size, shape & echotexture. It measures 10.4 x 2.6 x 4.3cm. Endometrium is central and measures 5.3mm.
- OVARIES** : The right ovary measures 2.5 x 1.1cm. The left ovary measures 2.2 x 1.1cm. Both ovaries are normal in shape, size & position.
- OTHERS** : No ascites or retroperitoneal lymphadenopathy is seen.
- IMPRESSION** :
- Grade I diffuse fatty infiltration of liver.
 - Multiple internal echoes in the urinary bladder. Correlate with urine examination to rule out cystitis.

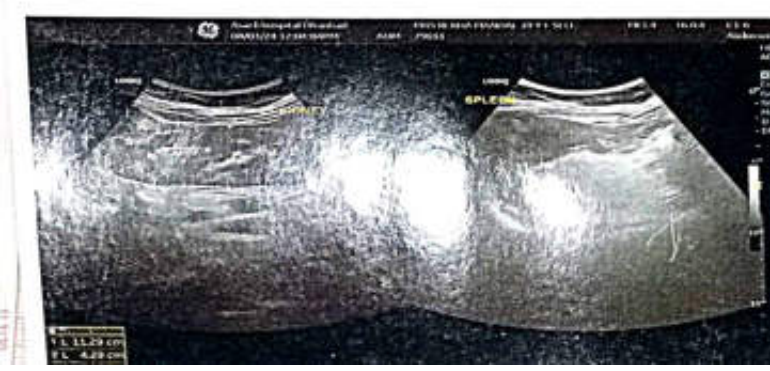
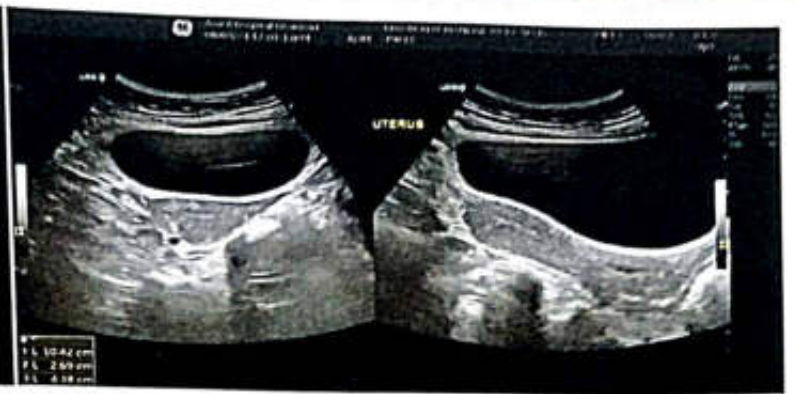
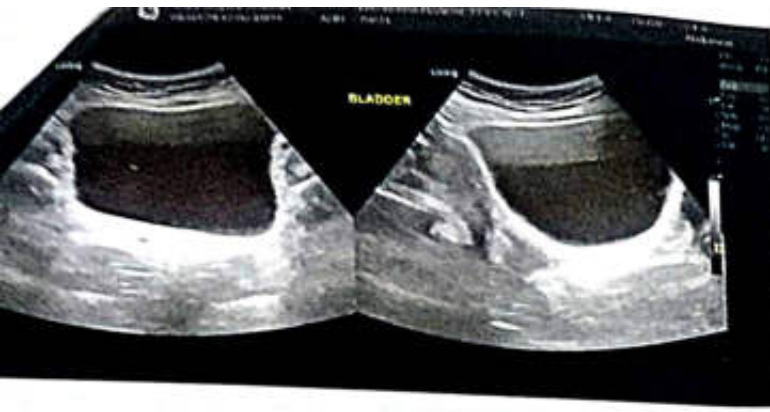



Dr. VAISHALI PATEL
MBBS, DNB (Radio-diagnosis)
Consultant Radiologist

©AHL/D/0069/4180/December/23

24 HOUR EMERGENCY

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"





FINAL REPORT



Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y 5 M 0 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel

Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:38
Reporting Time : 08-03-2024 13:33:27
Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
Biochemistry				
Creatinine, Serum				
Method: Enzymatic			Machine Name: XL640	
Creatinine, Serum	0.5	L	mg/dl	0.6-1.4
Uric Acid, Serum				
Method: Enzymatic			Machine Name: XL640	
Uric Acid, Serum	5.0		mg/dl	3.4-7.0
Blood Urea Nitrogen (BUN)				
Method: Calculated			Machine Name: XL640	
Blood Urea Nitrogen (BUN)	7.3		mg/dl	07-21
Fasting Blood Glucose, Plasma				
Method: GOD-POD			Machine Name: XL640	
Fasting Blood Glucose, Plasma	91.0		mg/dl	70-110
LIPID PROFILE, SERUM				
Method: Spectrophotometry			Machine Name: XL640	
Triglycerides (Enzymatic)	114.0		mg/dl	Normal: <150 Borderline-high: 150-199 High risk 200-499 Very high risk >500
Cholesterol, Total (CHOD/PAP)	217.0		mg/dl	<200 No risk 200-239 Moderate risk >240 High risk
VLDL Cholesterol (Calculated)	22.8		mg/dl	0-30
HDL Cholesterol (Enzymatic)	51.0	L	mg/dl	<40 High Risk ; >60 No Risk



DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting
(1) This document is not valid for medico-legal purposes. (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test results are representative at the point of generation of the said specimen(s) / Sample(s). (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/diluted/leaky etc.) (b) incorrect not valid for medico-legal purposes. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email-labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



FINAL REPORT

Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y 5 M 0 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:39
Reporting Time : 10-03-2024 11:22:41
Publish Time : 11-03-2024 10:46 am

Test Name	Result	Flag	Unit	Reference Range
LDL Cholesterol (Calculated)	143.2	H	mg/dl	Optimum:<100 Above optimum: <130; Moderate risk:130-159; High risk:>160
Cholesterol Total : HDL Ratio (Calculated)	4.25		mg/dl	1.2-6.0
GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD				
<i>Method : HPLC / Nephelometry</i>				
HbA1C	5.0		%	4.4-6.2
Estimated average glucose (eAG)	96.8		mg/dl	
Glucose, PP				
<i>Method : GOD-POD</i>				
Glucose, PP	102.0		mg/dl	70-140



DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample(s) (2) Laboratory investigations are only for facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate, (haemolysed/clotted/germic etc.) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email-labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



FINAL REPORT

Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y 5 M 0 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:38
Reporting Time : 08-03-2024 13:33:27
Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
LDL Cholesterol (Calculated)	143.2	H	mg/dl	Optimum:<100 Above optimum: <130; Moderate risk:130-159; High risk:>160 1.2-6.0
Cholesterol Total : HDL Ratio (Calculated)	4.25		mg/dl	1.2-6.0
GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD				
Method : HPLC / Nephelometry				
HbA1C	5.0		%	4.4-6.2
Estimated average glucose (eAG)	96.8		mg/dl	

Machine Name: BIO-RAD, D-10 / MISPA



DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

(1) The report is generated on the basis of the patient named or identified and the verification of the particulars have been carried out by the patient. (2) The results are representative at the point of generation of the said specimen(s) Sample(s). (3) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (4) Test results are not valid for medico legal Purposes. (5) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Incomplete specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (6) The Result of the Test May vary from lab and also from time to time for the same patient. (7) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (8) In case of queries or unexpected test results please call at +91 9297862252. Email-labasarfi@gmail.com

Page 2 of 3

24 HOUR EMERGENCY

© AHL/D/0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



FINAL REPORT

Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y 5 M 0 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:38
Reporting Time : 08-03-2024 13:33:27
Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
Liver Function Test (LFT) <i>Method: Spectrophotometry</i>				
Bilirubin Total (Diazo)	0.6		mg/dl	0.3-1.2
Bilirubin Direct (Diazo)	0.2		mg/dl	0.00-0.2
Bilirubin Indirect (Calculated)	0.4		mg/dl	0.00-1.0
SGPT (IFCC without PDP)	30.0		U/L	7-50
SGOT (IFCC without PDP)	28.0		U/L	5-45
Alkaline Phosphate (PNP AMP Kinetic)	275.0		U/L	70-306
GGT (Enzymatic)	20.0		U/L	0-55
Protein Total (Biuret)	7.5		g/dl	6.4-8.3
Albumin (BCG)	4.3		g/dl	3.5-5.2
Globulin (Calculated)	3.2		g/dl	2.3-3.5
A : G Ratio (Calculated)	1.34			0.8-2.0

Machine Name: XL-640



DR N N SINGH
MD. (PATHOLOGY)

Condition of Laboratory Testing & Reporting
(1) The report is for the use of the patient's doctor only. It is not to be used for any other purpose. (2) Laboratory investigations are only for diagnostic purposes and should be clinically correlated. (3) Results are representative at the point of generation of the said specimen(s). (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Hemolysed/clotted/serum etc. (c) Incorrect specimen type for requested test. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862232. Email: labasarfi@gmail.com

24 HOUR EMERGENCY

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"

**ASARFI HOSPITAL LABORATORY**

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Bhanbad 828 130

Ph. No.: 7808368888, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282



MC-8939

FINAL REPORT

Name : MRS. REKHA MANDAL
 Reg. No. : MAR24-79033
 Age / Sex : 39 Y 5 M 0 D / Female
 Doctor : Self-Walkin
 Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
 Receiving Time : 08-03-2024 10:38:38
 Reporting Time : 08-03-2024 13:33:27
 Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
-----------	--------	------	------	-----------------

Clinical Pathology

DR N N SINGH
 MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting
 (1) All specimens for the test(s) should be properly labeled according to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test results are not valid for medico-legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/diluted/peptic etc.) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email: labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Bahad 828 130
Ph. No.: 7808368888, 927808368888, 927808368888



FINAL REPORT

Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y S M O D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:38
Reporting Time : 08-03-2024 13:33:27
Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
Routine Urine Examination; Urine				
<i>Method</i> : Microscopic		<i>Machine Name</i> : Microscope		
Leukocytes	NEGATIVE			
Appearance	CLEAR			
Colour	STRAW			
Volume	30		ml.	
Protiens	NEGATIVE			
Glucose	NEGATIVE			
PH	6.0			
Specific Gravity	1.010			
Bilirubin	NEGATIVE			
Ketone Bodies	NEGATIVE			
Bile Salts	XX			
Bile Pigments	XX			
Nitrite	NEGATIVE			
Pus Cells	2-3		/hpf.	
Epithelial Cells	1-2		/hpf.	
R.B.C.	NIL		/hpf.	
Casts	NOT SEEN			



DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting
 This document is not valid for Medico-Legal purposes. The patient named or identified and the verification of the particulars have been carried out. (1) It is presumed that the tests performed are of the specimen(s). (2) Laboratory investigations are only to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are representative at the point of generation of the said specimen(s)/ Sample(s). (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/impure etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May Vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282. Email: labassarfi@gmail.com

24 HOUR EMERGENCY

© AHLDI0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



MC-5939

FINAL REPORT

Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y 5 M 0 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:38
Reporting Time : 08-03-2024 13:33:27
Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
Crystals	NOT SEEN		/hpf.	
others	NOT SEEN			
Protein:Creatinine Ratio; Urine				
<i>Method</i> : Immunoturbidimetry, Spectrophotomet				
Protein	115.0		mg/L	
Creatinine	36.8		mg/dl	
PCR	3.13		mg/g	0-0.5



DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

(1) It is the responsibility of the patient or the person ordering to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/diluted/panic etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297962282, Email-labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



MC-0939

FINAL REPORT

Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y 5 M 0 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:38
Reporting Time : 08-03-2024 13:33:27
Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
-----------	--------	------	------	-----------------

Haematology

BLOOD GROUP, ABO & RH TYPING

Method: Agglutination

ABO GROUP	O	.		0-0
RH TYPING	POSITIVE	.		0-0

ESR (Erythrocyte Sedimentaion Rate)

Method: Westergren

ESR	20	H	mm/hr	0-10
-----	----	---	-------	------

Machine Name: VES-MATIC 20



DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

(1) This report is for informational purposes only. It is not intended to be used for legal purposes. (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are representative at the point of generation of the said specimen(s) sample(s). (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate, (haemolysed/clotted/peptic etc.) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282. Email-labasarfi@gmail.com

24 HOUR EMERGENCY

© AHLD/0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Bhanbad 828 130

Ph. No.: 7808368888, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282, 9297862282



FINAL REPORT

Name : MRS. REKHA MANDAL
 Reg. No. : MAR24-79033
 Age / Sex : 39 Y 5 M 0 D / Female
 Doctor : Self-Walkin
 Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
 Receiving Time : 08-03-2024 10:38:38
 Reporting Time : 08-03-2024 13:33:27
 Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
Nature of Material: EDTA Blood Sample				
Complete Blood Count (CBC)				
Method: Electronical Impedence				
<i>Machine Name: Sysmex 6 part</i>				
Hemoglobin (Photometry)	11.1	L	g/dl	13-18
PCV (Calculated)	36.2	L	%	40-50
MCH (Calculated)	29.4		Pg	27-31
MCHC (Calculated)	30.7	L	g/dl	31.5-35.5
Red Cell Distribution Width (RDW) (Electrical Impedence)	15.3	H	%	11.6-14
Total Leukocyte Count (TLC) (Electrical Impedence)	6,800		/cu-mm	4000-11000
RBC Count (Electrical Impedence)	3.77	L	million/mm3	4.5-5.5
Mean Carpuscular Volume (MCV) (Electrical Impedence)	96.0		fL	83-101
Platelet Count (Electrical impedance)	1.40	L	lakhs/cumm	1.5-4.5
Neutrophils (VCS Technology)	57		%	55-75
Lymphocytes (VCS Technology)	35	H	%	15-30
Eosinophils (VCS Technology)	03		%	1-6
Monocytes (VCS Technology)	05		%	2-10
Basophils (VCS Technology)	00		%	0-1



[Signature]
 DR N N SINGH
 MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting
 (1) The laboratory is not responsible for any delay in reporting to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/leptic etc) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email: lab.asarfi@gmail.com

24 HOUR EMERGENCY

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Ebarbad 828 130

Ph. No : 7808368888, 92782234681514



FINAL REPORT

Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y S M O D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:38
Reporting Time : 08-03-2024 13:33:27
Publish Time : 08-03-2024 2:37 pm

Test Name	Result	Flag	Unit	Reference Range
Immunology and Serology				
THYROID PROFILE, TOTAL, SERUM				
Method: ECLIA				
Machine Name: Vitros ECI				
T3, Total	1.69		ng/ml	0.8-2.0
T4, Total	17.2	H	µg/dL	5.10-14.10
TSH (Ultrasensitive)	1.24		mIU/mL	0.27-4.2



DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

(1) The report is valid only if the specimen is properly labeled and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) These results are not valid for medico legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Hemolyzed/clotted/leaky etc. (c) Incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862262. Email-labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuti, Bishunpur Polytechnic, Dhanbad 826 130

Ph. No.: 7808368888, 9297862262, 9297862262, 9681514



FINAL REPORT



Name : MRS. REKHA MANDAL
 Reg. No. : MAR24-79033
 Age / Sex : 39 Y 5 M 0 D / Female
 Doctor : Self-Walkin
 Pat. Type : Mediwheel

Collection Time : 08-03-2024 10:37:35
 Receiving Time : 08-03-2024 10:38:39
 Reporting Time : 10-03-2024 11:22:41
 Publish Time : 11-03-2024 10:45 am

Test Name	Result	Flag	Unit	Reference Range
Culture & Sensitivity (Urine)				
Method: vitek 2 compact				
Organism Isolated	Escherichia coli			Machine Name: vitek 2 compact
Amikacin	++++			
Cefixime	R			
Colistin	++			
Ciprofloxacin	R			
Ceftazidime	+++			
Chloramphenicol	++++			
Ceftriaxone	R			
Co-Trimixazole	R			
Cefepime	R			
Cefoperazone	+			
Cefotaxime	+			
Cefuroxime	R			
Doxycycline	++			
Fosfomycin	++++			
Gentamycin	++++			
Imipenem	++++			



DR N N SINGH
MD (PATHOLOGY)

Conditions of Laboratory Testing & Reporting
 (1) It is presumed that the test(s) performed are for the purpose(s) specified in the request form. (2) Laboratory investigations are only to facilitate in arriving at diagnosis and should be clinically correlated. (3) Results are not valid for medico-legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Specimen received is haemolysed/clotted/leaky etc. (c) Incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab to lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862262, Email-labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Dhanbad 828 130
Ph. No : 7808368888, 9297862282, 9297862282, 9681514



MC-5939

FINAL REPORT

Name : MRS. REKHA MANDAL
Reg. No. : MAR24-79033
Age / Sex : 39 Y S M O D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 08-03-2024 10:37:35
Receiving Time : 08-03-2024 10:38:39
Reporting Time : 10-03-2024 11:22:41
Publish Time : 11-03-2024 10:45 am

Test Name	Result	Flag	Unit	Reference Range
Levofloxacin	+	.	.	.
Meropenem	++++	.	.	.
Minocycline	R	.	.	.
Nitrofurantoin	+++	.	.	.
Norfloxacin	R	.	.	.
Piperacillin/Tazobactam	++++	.	.	.
Tobramycin	++	.	.	.
Tetracycline	R	.	.	.
Tigecycline	++++	.	.	.
Azithromycin	R	.	.	.

Note : Amoxicillin clavulanic acid : + Ticarcillin : R Ertapenem : +++++

Note:
In view of developing antibiotics resistance in india. It is advisalbe to use anitbiotics belonging to Group B & C only if the patient is resistant to antibiotics.

* Insturment used Bact/Alert 3D 60 & vitek 2 compact.



DR N N SINGH
MD (PATHOLOGY)

Disclaimer: This report is not valid for Medico-Legal purposes.

(1) It is presumed that the test(s) performed are on the specimen(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) Sample(s). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate, (haemolysed/clotted/leptic, etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email: labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0065/4197/Jan/24

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"