

Dear **MR. DAVE HITESH BHOGILAL**,

Please find the confirmation for following request.

**Booking Date** : 09-02-2023

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

**Name of Diagnostic/Hospital** : Aashka Multispeciality Hospital

**Address of Diagnostic/Hospital** : Between Sargasan & Reliance Cross Road

**Contact Details** : 9879752777/7577500900

**City** : Gandhi Nagar

**State** : Gujarat

**Pincode** : 382315

**Appointment Date** : 11-03-2023

**Confirmation Status** : Confirmed

**Preferred Time** : 8:00am-8:30am

**Comment** : APPOINTMENT TIME 8:00AM

**Instructions to undergo Health Check:**

1. 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.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. 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:**

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. 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.




कृते बैंक ऑफ बरोडा / For Bank of Baroda  
शाखा प्रबंधक / Branch Manager  
सईज शाखा / SAJJ BR., DI. GANDHINAGAR

 **बैंक ऑफ बड़ौदा**  
**Bank of Baroda**

नाम **Hitesh Dave**  
Name

कर्मचारी कूट क्र. **81376**  
Employee Code No.

  
जारीकर्ता प्राधिकारी  
Issuing Authority



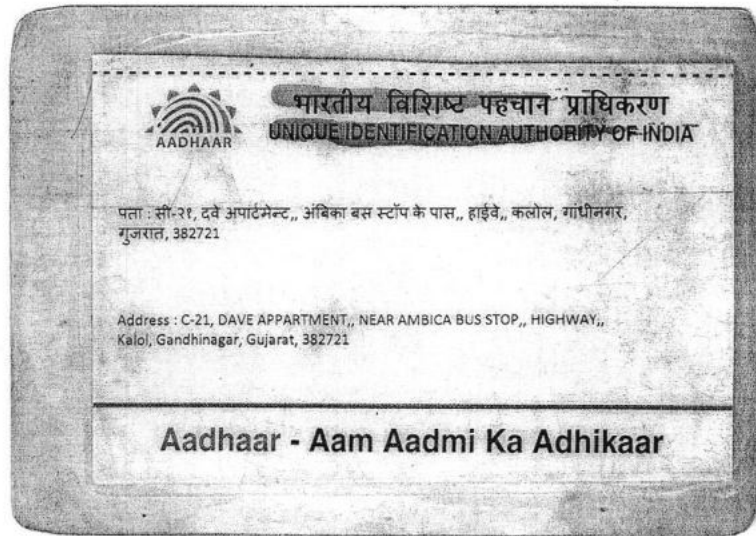
**H. B. Dave**  
धारक के हस्ताक्षर  
Signature of Holder

मिलने पर, निम्नलिखित को लौटाएं  
धरिष्ठ प्रबंधक ( सुरक्षा )  
बैंक ऑफ बड़ौदा, क्षेत्रीय कार्यालय, मेहसाणा क्षेत्र,  
देवस्य प्लाज़ा, राधनपुर हाईवे रोड,  
मेहसाणा - 384 002. गुजरात, भारत  
फोन : 91 2762 252549 फैक्स : 91 2762 253832

If found, please return to  
Senior Manager (Security)  
Bank of Baroda, Regional Office, Mehsana Region,  
Devasya Plaza, Radhanpur Highway Road,  
Mehsana - 384 002. Gujarat, India.  
Phone : 91 2762 252549 Fax : 91 2762 253832

रक्त समूह Blood Group : **O+**  
पहचान चिन्ह Identification Marks : .

दि. Dt. \_\_\_\_\_  
क्र. No. \_\_\_\_\_




 भारत सरकार  
GOVERNMENT OF INDIA

 निताबेन हितेशकुमार दवे  
Nitaben Hiteshkumar Dave  
जन्म वर्ष / Year of Birth : 1968  
महिला / Female

2307 1855 0283 

**आधार - आम आदमी का अधिकार**

 भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता : सी-२१, दवे अपार्टमेंट,, अंबिका बस स्टॉप के पास,, हाईवे,, कलोल, गांधीनगर,  
गुजरात, 382721

Address : C-21, DAVE APARTMENT,, NEAR AMBICA BUS STOP,, HIGHWAY,,  
Kalol, Gandhinagar, Gujarat, 382721

**Aadhaar - Aam Aadmi Ka Adhikaar**

**Aashka Hospitals Ltd.**

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](http://www.aashkahospitals.in)  
CIN: L85110GJ2012PLC072647



**DR. UNNATI SHAH**  
**B.D.S. (DENTAL SURGEON)**  
**REG. NO. A-7742**  
**MO.NO- 9904596691**

<b>UHID:</b>	<b>Date:</b> 11/3/22	<b>Time:</b>
<b>Patient Name:</b> Hitesh B. Dave	<b>Age / Sex:</b> 53 M	<b>Height:</b> 169
		<b>Weight:</b> 69.6
<b>History:</b>		
<b>Examination:</b> calculus + stain + cervical abscess		
<b>Diagnosis:</b>		

Treatment:

Ad

Scaly

-1800

CI 2000

0 1 0  
-----  
0 0

-1200

1  
Dr. Unmet

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

UHD:		Date: 11/03/23	Time: 3:16 PM
Patient Name: NEETA		Height:	
Age / Sex: 54YR/F	LMP:	Weight:	
History:			
C/C/O:		History:	
⇒ ROUTINE HEALTH CHECKUP		⇒ K/C/O ⇒ HTN HYPOTHYROIDISM } ON Rx.	
Allergy History: NKDA		Addiction: —	
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Vitals & Examination:			
Temperature: AFEBRILE			
Pulse: 82 / MINUTE			
BP: 120/90 MMHG			
SPO2: 99%			
Provisional Diagnosis:			





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[www.aashkahospitals.in](http://www.aashkahospitals.in)  
CIN: L85110GJ2012PLC072647



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

<b>UHID:</b>	<b>Date:</b>	<b>Time:</b>
<b>Patient Name:</b> Hitesh B. Dave	<b>Age /Sex:</b> 53 / m	<b>Height:</b>
	<b>Weight:</b>	
<b>History:</b> op. Routine check up.		
<b>Allergy History:</b>		
<b>Nutritional Screening:</b> Well-Nourished / Malnourished / Obese		
<b>Examination:</b>  VM2 6/6 6/6		
<b>Diagnosis:</b>		



PATIENT NAME:HITESH BHOGILAL DAVE

GENDER/AGE:Male / 53 Years

DATE:11/03/23

DOCTOR:DR.HASIT JOSHI

OPDNO:O0323695

**2D-ECHO**

MITRAL VALVE : GRADE II MVP  
AORTIC VALVE : NORMAL  
TRICUSPID VALVE : TVP +  
PULMONARY VALVE : NORMAL  
AORTA : 34mm  
LEFT ATRIUM : 38mm  
LV Dd / Ds : 39/24mm EF 60%  
IVS / LVPW / D : 11/10mm  
IVS : INTACT  
IAS : INTACT  
RA : NORMAL  
RV : NORMAL  
PA : NORMAL  
PERICARDIUM : NORMAL  
VEL : PEAK MEAN  
M/S : Gradient mm Hg Gradient mm Hg  
MITRAL : 1.3/1.0m/s  
AORTIC : 1.4m/s  
PULMONARY : 1.2m/s  
COLOUR DOPPLER : MILD MR/TR  
RVSP : 30mmHg  
CONCLUSION : GRADE II MVP / TVP + ;  
MILD MR / TR;  
NORMAL LV SIZE / SYSTOLIC FUNCTION.



CARDIOLOGIST  
DR.HASIT JOSHI (9825012235)

**PATIENT NAME:**HITESH BHOGILAL DAVE

**GENDER/AGE:**Male / 53 Years

**DATE:**11/03/23

**DOCTOR:**

**OPDNO:**00323695

## 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 normal in size 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 9.6 x 4.2 cms in size.

Left kidney measures about 10.0 x 4.3 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 normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 240 cc.

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

Prostate volume measures about 24 cc.

**COMMENT:** Fecal loaded large bowel loops seen.

Normal sonographic appearance of liver, GB; Pancreas, spleen, kidneys, bladder and prostate.

  
**DR. SNEHAL PRAJAPATI**  
CONSULTANT RADIOLOGIST

Aashka Hospitals Ltd.

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www.aashkahospitals.in

CIN: L85110GJ2012PLC072647



**PATIENT NAME:HITESH BHOGILAL DAVE**

**GENDER/AGE:Male / 53 Years**

**DATE:11/03/23**

**DOCTOR:**

**OPDNO:00323695**

**X-RAY CHEST PA**

Both lung fields show increased broncho-vascular markings.

**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.

  
**DR. SNEHAL PRAJAPATI**  
**CONSULTANT RADIOLOGIST**



LABORATORY REPORT



Name : HITESH BHOGILAL DAVE	Sex/Age : Male / 53 Years	Case ID : 30302200263
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2607636
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 08:31	Sample Type :	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : O0323695
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O22239664

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Lipid Profile</b>			
Cholesterol	206.57	mg/dL	110 - 200
HDL Cholesterol	47.4	mg/dL	48 - 77
Chol/HDL	4.36		0 - 4.1
LDL Cholesterol	143.07	mg/dL	65 - 100
<b>Urine Examination</b>			
Protein	Present (+)		Negative

Abnormal Result(s) Summary End

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



## LABORATORY REPORT



Name : HITESH BHOGILAL DAVE	Sex/Age : Male / 53 Years	Case ID : 30302200263
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2607636
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Whole Blood EDTA	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : O0323695
Report Date and Time : 11-Mar-2023 09:12	Acc. Remarks : Normal	Ref Id2 : O22239664

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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### HAEMOGRAM REPORT

#### HB AND INDICES

Haemoglobin (Colorimetric)	14.8	G%	13.00 - 17.00
RBC (Electrical Impedance)	4.75	millions/cumm	4.50 - 5.50
PCV(Calc)	42.84	%	40.00 - 50.00
MCV (RBC histogram)	90.2	fL	83.00 - 101.00
MCH (Calc)	31.2	pg	27.00 - 32.00
MCHC (Calc)	34.5	gm/dL	31.50 - 34.50
RDW (RBC histogram)	15.20	%	11.00 - 16.00

#### TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	6180	/μL	4000.00 - 10000.00
	[ % ]		EXPECTED VALUES [ Abs ]
Neutrophil	49.0	%	40.00 - 70.00 3028 /μL
Lymphocyte	37.0	%	20.00 - 40.00 2287 /μL
Eosinophil	6.0	%	1.00 - 6.00 371 /μL
Monocytes	7.0	%	2.00 - 10.00 433 /μL
Basophil	1.0	%	0.00 - 2.00 62 /μL

#### PLATELET COUNT (Optical)

Platelet Count	215000	/μL	150000.00 - 410000.00
Neutrophil to Lymphocyte Ratio (NLR)	1.32		0.78 - 3.53

#### SMEAR STUDY

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

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

Dr. Shreya Shah  
M.D. (Pathologist)

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

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## LABORATORY REPORT



Name : HITESH BHOGILAL DAVE	Sex/Age : Male / 53 Years	Case ID : 30302200263
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2607636
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Whole Blood EDTA	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : O0323695
Report Date and Time : 11-Mar-2023 09:12	Acc. Remarks : Normal	Ref Id2 : O22239664

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

**Dr. Shreya Shah**  
M.D. (Pathologist)

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

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## LABORATORY REPORT



Name : HITESH BHOGILAL DAVE	Sex/Age : Male / 53 Years	Case ID : 30302200263
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2607636
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Whole Blood EDTA	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : O0323695
Report Date and Time : 11-Mar-2023 11:09	Acc. Remarks : Normal	Ref Id2 : O22239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	11	mm after 1hr 3 - 20		

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

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*Manoj Shah*

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

**Dr. Shreya Shah**  
M.D. (Pathologist)

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LABORATORY REPORT



Name : **HITESH BHOGILAL DAVE** Sex/Age : **Male / 53 Years** Case ID : **30302200263**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2607636**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Whole Blood EDTA	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : 00323695
Report Date and Time : 11-Mar-2023 08:53	Acc. Remarks : Normal	Ref Id2 : 022239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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**HAEMATOLOGY INVESTIGATIONS**

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

ABO Type	A
Rh Type	POSITIVE

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

**Dr. Shreya Shah**  
M.D. (Pathologist)

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

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## LABORATORY REPORT



Name : **HITESH BHOGILAL DAVE** Sex/Age : **Male / 53 Years** Case ID : **30302200263**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2607636**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Spot Urine	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : 00323695
Report Date and Time : 11-Mar-2023 09:04	Acc. Remarks : Normal	Ref Id2 : 022239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour : **Pale yellow**  
 Transparency : **Clear**

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.015	1.005 - 1.030
pH	6.50	5 - 8
Leucocytes (ESTERASE)	Negative	Negative
Protein	Present (+)	Negative
Glucose	Negative	Negative
Ketone Bodies Urine	Negative	Negative
Urobilinogen	Negative	Negative
Bilirubin	Negative	Negative
Blood	Negative	Negative
Nitrite	Negative	Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

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

**Dr. Shreya Shah**  
 M.D. (Pathologist)

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## LABORATORY REPORT



Name : **HITESH BHOGILAL DAVE** Sex/Age : **Male / 53 Years** Case ID : **30302200263**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2607636**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : **11-Mar-2023 08:31** Sample Type : **Spot Urine** Mobile No : **9427459490**  
 Sample Date and Time : **11-Mar-2023 08:31** Sample Coll. By : Ref Id1 : **O0323695**  
 Report Date and Time : **11-Mar-2023 09:04** Acc. Remarks : **Normal** Ref Id2 : **O22239664**

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
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/Notifications				
			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. Shreya Shah**  
M.D. (Pathologist)

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**Neuberg Supratech Reference Laboratories Private Limited**

“KEDAR” Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

Phone : 079-40408181 / 61618181 | Email : contact@supratechlabs.com | Website : www.neubergsupratech.com



LABORATORY REPORT



Name : HITESH BHOGILAL DAVE      Sex/Age : Male / 53 Years      Case ID : 30302200263  
 Ref.By : HOSPITAL      Dis. At :      Pt. ID : 2607636  
 Bill. Loc. : Aashka hospital      Pt. Loc :

Reg Date and Time : 11-Mar-2023 08:31      Sample Type : Plasma Fluoride F, Plasma Fluoride PP      Mobile No : 9427459490  
 Sample Date and Time : 11-Mar-2023 08:31      Sample Coll. By :      Ref Id1 : 00323695  
 Report Date and Time : 11-Mar-2023 14:44      Acc. Remarks : Normal      Ref Id2 : 022239664  
 TEST      RESULTS      UNIT      BIOLOGICAL REF RANGE      REMARKS

BIOCHEMICAL INVESTIGATIONS

Biochemical Investigations by Dimension EXL (Siemens)

Plasma Glucose - F	97.49	mg/dL	70.0 - 100
Plasma Glucose - PP	110	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.  
 <100 mg/dL : Normal level  
 100-<126 mg/dL: Impaired fasting glucoseer guidelines  
 >=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

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

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

**Dr. Shreya Shah**  
M.D. (Pathologist)

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## LABORATORY REPORT



Name : HITESH BHOGILAL DAVE Sex/Age : Male / 53 Years Case ID : 30302200263  
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2607636  
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Mar-2023 08:31 Sample Type : Serum Mobile No : 9427459490  
 Sample Date and Time : 11-Mar-2023 08:31 Sample Coll. By : Ref Id1 : O0323695  
 Report Date and Time : 11-Mar-2023 10:44 Acc. Remarks : Normal Ref Id2 : O22239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Lipid Profile

<b>Cholesterol</b> <i>Colorimetric, CHOD-POD</i>	H	206.57	mg/dL	110 - 200
<b>HDL Cholesterol</b>	L	47.4	mg/dL	48 - 77
<b>Triglyceride</b> <i>Colorimetric-Arsenazo Method</i>		80.5	mg/dL	40 - 200
<b>VLDL</b> <i>Calculated</i>		16.10	mg/dL	10 - 40
<b>Chol/HDL</b> <i>Calculated</i>	H	4.36		0 - 4.1
<b>LDL Cholesterol</b> <i>Calculated</i>	H	143.07	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 assesment
- 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 interperation 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)

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**Neuberg Supratech Reference Laboratories Private Limited**

“KEDAR” Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

Phone : 079-40408181 / 61618181 | Email : contact@supratechlabs.com | Website : www.neubergsupratech.com



## LABORATORY REPORT



Name : HITESH BHOGILAL DAVE Sex/Age : Male / 53 Years Case ID : 30302200263  
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2607636  
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Mar-2023 08:31 Sample Type : Serum Mobile No : 9427459490  
 Sample Date and Time : 11-Mar-2023 08:31 Sample Coll. By : Ref Id1 : O0323695  
 Report Date and Time : 11-Mar-2023 11:39 Acc. Remarks : Normal Ref Id2 : O22239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Liver Function Test

S.G.P.T.	17.59	U/L	0 - 41	
S.G.O.T.	18.47	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	80.4	U/L	46 - 116	
Gamma Glutamyl Transferase	25.99	U/L	8 - 61	
Proteins (Total)	6.80	gm/dL	6.4 - 8.2	
Albumin	4.53	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.27	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	2.0		1.0 - 2.1	
Bilirubin Total	0.79	mg/dL	0.2 - 1.0	
Bilirubin Conjugated <i>Diazotized Sulfanilic Acid Method</i>	0.19	mg/dL	0 - 0.20	
Bilirubin Unconjugated <i>Calculated</i>	0.60	mg/dL	0 - 0.8	

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

*Shah*

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

Dr. Shreya Shah  
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## LABORATORY REPORT



Name : HITESH BHOGILAL DAVE Sex/Age : Male / 53 Years Case ID : 30302200263  
Ref.By : HOSPITAL Dis. At : Pt. ID : 2607636  
Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Mar-2023 08:31 Sample Type : Serum Mobile No : 9427459490  
Sample Date and Time : 11-Mar-2023 08:31 Sample Coll. By : Ref Id1 : 00323695  
Report Date and Time : 11-Mar-2023 11:39 Acc. Remarks : Normal Ref Id2 : 022239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>BUN (Blood Urea Nitrogen)</b> <i>GLDH</i>	7.8	mg/dL	6.00 - 20.00	
<b>Creatinine</b>	0.90	mg/dL	0.50 - 1.50	
<b>Uric Acid</b>	5.01	mg/dL	3.5 - 7.2	

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

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## LABORATORY REPORT



Name : **HITESH BHOGILAL DAVE** Sex/Age : **Male / 53 Years** Case ID : **30302200263**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2607636**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Whole Blood EDTA	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : O0323695
Report Date and Time : 11-Mar-2023 10:05	Acc. Remarks : Normal	Ref Id2 : O22239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Glycated Haemoglobin Estimation</b>				

<b>HbA1C</b>	<b>5.68</b>		% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
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<b>Estimated Avg Glucose (3 Mths)</b> <i>Calculated</i>	<b>116.32</b>	<b>mg/dL</b>
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Please Note change in reference range as per ADA 2021 guidelines.

**Interpretation :**

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)

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## LABORATORY REPORT



Name : HITESH BHOGILAL DAVE      Sex/Age : Male / 53 Years      Case ID : 30302200263  
 Ref.By : HOSPITAL      Dis. At :      Pt. ID : 2607636  
 Bill. Loc. : Aashka hospital      Pt. Loc :

Reg Date and Time : 11-Mar-2023 08:31      Sample Type : Serum      Mobile No : 9427459490  
 Sample Date and Time : 11-Mar-2023 08:31      Sample Coll. By :      Ref Id1 : O0323695  
 Report Date and Time : 11-Mar-2023 09:51      Acc. Remarks : Normal      Ref Id2 : O22239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### Thyroid Function Test

Triiodothyronine (T3)	123.40	ng/dL	40 - 181	
Thyroxine (T4) <small>CMA</small>	6.9	ng/dL	4.6 - 10.5	
TSH <small>CMA</small>	1.915	μIU/mL	0.4 - 4.2	

### INTERPRETATIONS

- 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 & incipient 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 suppressed 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 Pregnancy

First trimester  
 Second trimester  
 Third trimester

### Reference range (microIU/ml)

0.24 - 2.00  
 0.43-2.2  
 0.8-2.5

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

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Name : HITESH BHOGILAL DAVE	Sex/Age : Male / 53 Years	Case ID : 30302200263
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Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Serum	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : O0323695
Report Date and Time : 11-Mar-2023 09:51	Acc. Remarks : Normal	Ref Id2 : O22239664

**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 triiodothyronine (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 hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

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

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Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Serum	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : O0323695
Report Date and Time : 11-Mar-2023 09:51	Acc. Remarks : Normal	Ref Id2 : O22239664

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Prostate Specific Antigen</b> <small>CMA</small>	<b>0.6100</b>	ng/mL	0.00 - 4.00	

**INTERPRETATIONS:**

Useful for Evaluating patients with documented prostate problems in whom multiple prostate-specific antigen tests may be necessary per year. Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment. Prostate-specific antigen (PSA) values are reported with the 95th percentile limits by decade of age. These reference limits include men with benign prostatic hyperplasia. They exclude all cases with proven cancer. PSA values exceeding the age-specific limits are suspicious for prostate disease, but further testing, such as prostate biopsy, is needed to diagnose prostate pathology. Values >0.2 ng/mL are considered evidence of biochemical recurrence of cancer in men after prostatectomy

**CAUTIONS:**

Serum markers are not specific for malignancy, and values may vary by method. When age is not supplied, the results cannot be flagged as high or low. Digital rectal examination generally does not increase normal prostate-specific antigen (PSA) values. However, cystoscopy, urethral instrumentation, and prostate biopsy may increase PSA levels. 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

- If total PSA is above cut off value (between 4 to 20 ng/ml) free PSA should be advised to differentiate benign prostatic hyperplasia from prostatic malignancy.
- Free PSA levels above 20 to 25 % of total PSA are more likely to be associated with BPH.
- Prostate biopsy is required for the diagnosis of cancer. **Tumor marker results obtained can vary due to differences in assay methods and reagent specificity. Patient results determined by assays using different manufacturers for methods may not be comparable.**

**RELATIONSHIP BETWEEN PROBABILITY OF PROSTATE MALIGNANCY & FREE PSA% TO TOTAL PSA**

..... Free PSA % to total PSA	0-10%	10-15%	15-20%	20-25%	>25%.
fr Probability of malignancy	56%.	28%	20%	16%	8%

**DILUTION PROTOCOL:**

At our lab with kit, manual dilution protocol has been validated for PSA up to 1:20 dilution and result up to 2000 NG/ML. After above dilution, it will be done manually and because of Ag-Ab reaction curve it may be erroneous if diluted after validated dilution.  
\* Test results, interpretation & notes are meant for Medical Personal only.

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

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

*Shah*

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## LABORATORY REPORT



Name : HITESH BHOGILAL DAVE	Sex/Age : Male / 53 Years	Case ID : 30302200263
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2607636
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 08:31	Sample Type : Serum	Mobile No : 9427459490
Sample Date and Time : 11-Mar-2023 08:31	Sample Coll. By :	Ref Id1 : O0323695
Report Date and Time : 11-Mar-2023 09:51	Acc. Remarks : Normal	Ref Id2 : O22239664

# 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)

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Dave, ~~XXXX~~  
Hrish Dave

Contrast 226 166 05  
11.03.2023 9:11:36 AM  
AASHKA HOSPITAL LTD.  
SARGASAN  
GANDHINAGAR

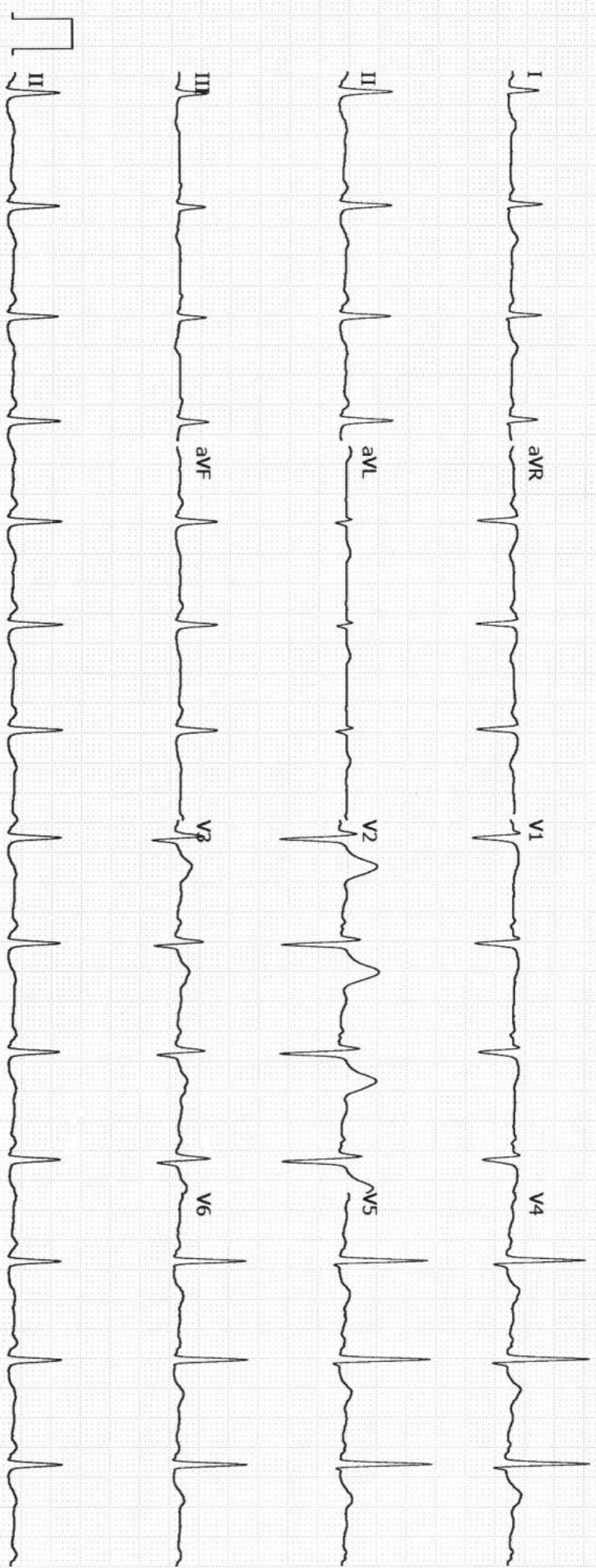
Location: 1  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Room: LOT D 942 #

85 bpm  
-- / -- mmHg

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

Normal sinus rhythm  
Normal ECG  
QRS : 86 ms  
QT / QTcBaz : 360 / 428 ms  
PR : 124 ms  
P : 94 ms  
RR / PP : 706 / 705 ms  
P / QRS / T : 57 / 62 / 33 degrees



GE MAC2000 1.1 12SL™ V241 25 mm/s 10 mm/mV ADS 0.56-2.0 Hz 50 Hz Unconfirmed 4x2.5x3\_25\_R1 1/1