



Customer Service <customerservice@adityalabs.com>

Health Check up Booking Confirmed Request(bobE8581),Package Code-PKG10000248, Beneficiary Code-25520

1 message

Mediwheel <santosh@policywheel.com>

25 February 2022 at 18:21

To: "customerservice@adityalabs.com" <customerservice@adityalabs.com>

Cc: Mediwheel CC <customercare@mediwheel.in>, Mediwheel CC <mediwheelwellness@gmail.com>



011-41195959

Email:wellness@mediwheel.in

Hi **Aditya Diagnostics And Research Laboratories,**Diagnostic/Hospital Location : **G-1,MIG 256-258,RD NO 4,CANRA BANK, City:Hyderabad**

We have received the confirmation for the following booking .

Beneficiary Name : PKG10000248**Beneficiary Name** : MR. MAHESH VANGARA**Member Age** : 33**Member Gender** : Male**Member Relation** : Employee**Package Name** : Mediwheel Metro Full Body Health Checkup Male Below 40**Location** : HYDERABAD, Telangana-500034**Contact Details** : 9553819315**Booking Date** : 23-02-2022**Appointment Date** : 26-02-2022**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.

We request you to facilitate the employee on priority.



बैंक ऑफ बड़ौदा
Bank of Baroda

एक क.
E.C. No.: 112921

नाम | वंगरा महेश

Name: Vangara Mahesh

धारक के हस्ताक्षर | Signature of Holder



जारी करने की तारीख
Date of Issue : 31-07-2021

जारीकर्ता प्राधिकारी
Issuing Authority

धरान पर खोने, चोरी या क्षति होने पर धारक इसके लिए जिम्मेदार होगा.

Holder will be held responsible against loss, theft or damage.

धरान पर खोने की सूचना तुरंत पुलिस एवं न्याय कार्यालय या बैंक की नजदीकी शाखा को दें.

Loss must be reported immediately to police and parent/nearest bank office.

पिस्तने पर - निम्नलिखित को लौटाएं
आंचलिक सुरक्षा अधिकारी
बैंक ऑफ बड़ौदा, आंचलिक कार्यालय
दो. नं. 3-4-289, कराम मंजिल, हैदराबाद,
हैदराबाद - 500 029.

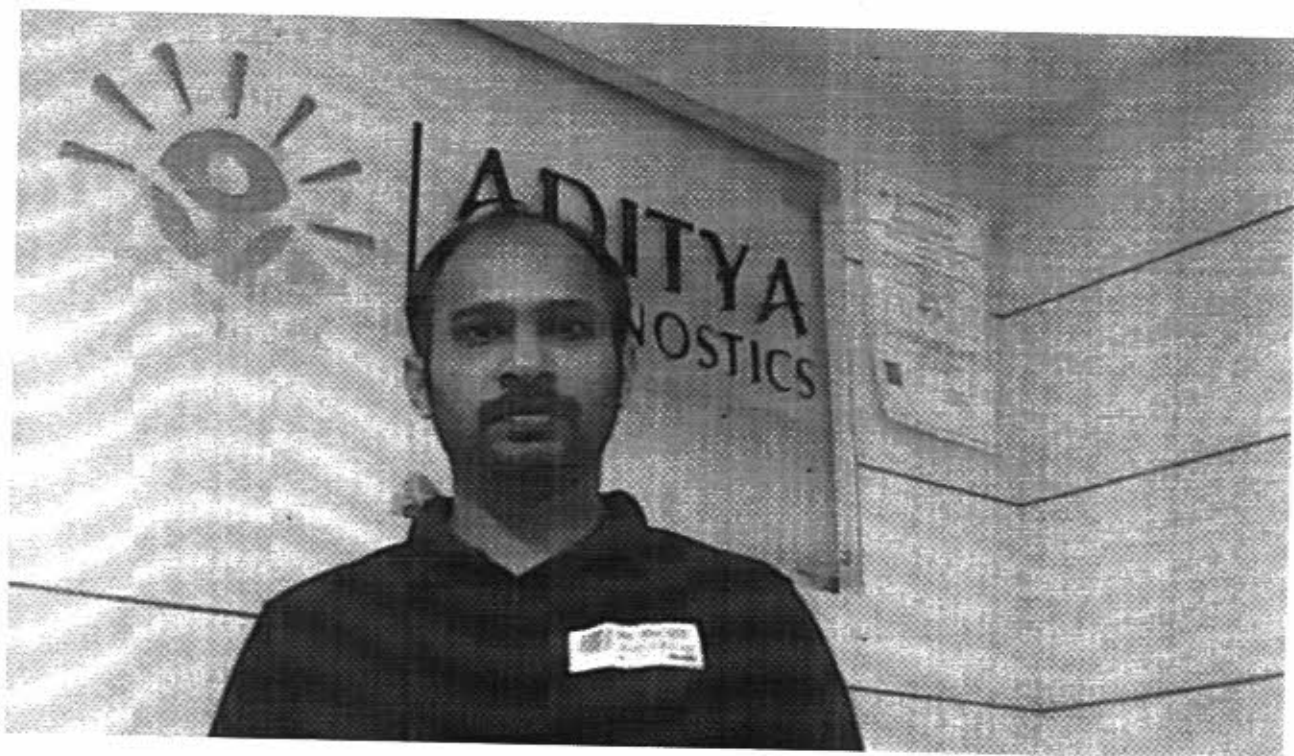
If found please return to:
Zonal Security Officer
Bank of Baroda - Zonal Office
Door No.3-4-289, Karam Manzil, Hyderabad,
Hyderabad - 500 029.

रक्त गट | Blood Group : O +VB

सम्पर्क टेलिफोन नं.
Phone: 646-2327213. (0)

Identification Marks : A mole on the right cheek,
A mole on the right palm

ADITYA DIAGNOSTICS &
RESEARCH LABORATORIES
MIG-29
Kondapur, H. P. S. Colony,
Hyderabad - 500 077



ADITYA DIAGNOSTICS &
RESEARCH LABORATORIES
MIG-259-302, 1st Floor,
Road No: 4, MP Colony,
Hyderabad-500 072



Name : MR. MAHESH VANGARA
Age /Sex : 33 Y / M
Ref. By : BANK OF BARODA (MW)

Reg. No : O22-2833
Registration Date : 26-02-2022
Alt ID :

X-RAY CHEST PA VIEW

- Hilar regions are normal.
- Both C P angles are free.
- Domes of diaphragms are normal.
- Bony cage is normal
- Cardio thoracic ratio is normal.
- Lung - clear. No Evidence of any Signs of active Tuberculosis

IMPRESSION :

**** NORMAL STUDY**

DR. ABDUR
Radiologist



Name : MR. MAHESH VANGARA
Age /Sex : 33 Y / M
Ref. By : BANK OF BARODA (MW)

Reg. No : O22-2833
Registration Date : 26-02-2022
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Investigation

Result

Normal Ranges

HAEMOGRAM

Investigation

Result

Normal Range

Haemoglobin	15.5 gm%	Male : 14.0 - 18.0 gm % Female : 11.5 - 16.0 gm % Children : 12 - 14 gm%
R B C mil/cmm	5.2 mil/cmm	Male : 4.5 - 6.5 mil/cmm Female : 4.0 - 5.5 mil/cmm
Packed Cell volume (PCV)	44 %	Male : 40 - 54 % Female : 36 - 49 %
MCV	80 Cubic microns	76 - 96 Cubic microns
MCH	28 Picograms	27- 32 Picograms
MCHC	36 gm%	30 - 36 gm%
WBC (Total)	7,800 cells/cmm	4,000 - 11,000 cells/cmm

DIFFERENTIAL COUNT

Neutrophils (Polymorphs)	64 %	Adults : 40 - 75 % Children : 36- 50 %
Lymphocytes	30 %	Adults : 20 - 40 % Children : 36- 50 %
Eosinophils	04 %	1 - 6 %
Monocytes	02 %	2 - 10 %
Basophils	00 %	00 - 01 %
Platelet count	3,11,000 cells/cmm	1,50,000 - 4,00,000 cells/cmm
ESR 1st Hour	04 mm/hour	Male : 0 - 10 mm / hour Female : 0 - 14 mm / hour
Reticulocyte count	0.7 %	0.5 - 1.0 %

PERIPHERAL SMEAR EXAMINATION

RBC's Morphology	Normocytic / Normochromic
WBC	With in normal limits
Plateletes	Adequate
Abnormal Cells	Nil

Method : Automated Cellcounter&Microscopy

Dr Rajani Gutta, PhD
Chief Biochemist

Verified By

Dr K. Mahesh Kumar MD
Consultant Pathologist



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Age /Sex : 33 Y /M
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Department of Biochemistry

Investigation

Result

Reference Range

Fasting Plasma Glucose *
Blood Sugar
Method GOD-POD

109 mg/dl

70 - 110 mg/dl

Post Prandial Glucose *
(Blood Sugar)
Method GOD-POD

136 mg/dl

70 - 160 mg/dl

*End of Report *

Dr Rajini G, PhD
Chief Biochemist

Dr K Mahesh Kumar, MD
Consultant Pathologist



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Department of Biochemistry

Investigation	Result	Reference Range
Blood Urea * Method GLDH	24 mg/dl	10 - 50 mg/dl
Blood Urea Nitrogen * Calculated	10.2 mg/dl	6 - 25.5 mg/dl
Serum Creatinine * Method Enzymatic	0.7 mg/dl	Male : 0.7 - 1.3 mg/dl Female : 0.6 - 1.1 mg/dl New Born 1 - 4 days : 0.3 - 1.0 mg/dl Infant (upto 1year) : 0.2 - 0.4 mg/dl Children : 0.3 - 0.7 mg/dl
Serum Uric Acid * Method:Uricase POD	7.0 mg/dl	Male : 3.5 - 7.2 mg/dl Female : 2.6 - 6.0 mg/dl

*End of Report *

Dr Rajini G, PhD
Chief Biochemist


Dr K Mahesh Kumar, MD
Consultant Pathologist



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Department of Biochemistry

Investigation	Result	Reference Range
Liver Function Tests		
Total Bilirubin (Method: Walter &Gerarde)	2.8 mg/dl	0.3 - 1.2 mg/dl
Direct Bilirubin (Conjugated) (Method: Walter &Gerarde)	1.1 mg/dl	0.0 - 0.2 mg/dl
Indirect Bilirubin (Unconjugated)	1.7 mg/dl	
Alkaline Phosphatase (Method: GSCC)	63 U/L	Male : 53 - 128 U/L Female : 42 - 98 U/L Children : 54 - 369 U/L
SGPT (Method: IFCC)	40 IU/L	UP TO 55 IU/L
SGOT (Method: IFCC)	19 IU/L	UP TO 55 IU/L
Total Proteins (Method: Biuret)	7.5 gm/dl	6.0 - 8.3 gm/dl
Albumin (Method: BCG)	4.3 gm/dl	3.5 - 5.2 gm/dl
Globulin (Method: Calculated)	3.2 gm/dl	
A/G Ratio	1.34	
Gamma GT IFCC Method	31 U/L	Male : 10 - 50 U/L Female : 7 - 35 U/L
Lab Incharge		

*End of Report *

Dr Rajini G, PhD
Chief Biochemist

Dr K. Mahesh Kumar, MD
Consultant Pathologist



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Department of Biochemistry

Investigation

Result

Reference Range

% HbA1c (Glycosylated Haemoglobin)
(Method: HPLC-NGSP Certified)

5.2 %

< 6.0 : Pre Diabetic
6-7 : Good Control
7-8 : Weak Control
> 8.0 : Poor Control

Intrepretation :

HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.

Mean Plasma Glucose mg/dl = (HbA1c x 35.6) - 77.3)

Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only .81 (1.0 would be a straight line, which has "perfect" correlation...) This means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control.

*End of Report *

Dr Rajini G, PhD
Chief Biochemist

Dr K Mahesh Kumar, MD
Consultant Pathologist



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<u>Investigation</u>	<u>Result</u>	<u>Normal Ranges</u>
Trilodothyronine Total (TT3)	1.81 ng/mL	0.60 - 1.81 ng/mL
Thyroxine - Total (TT4)	13.38 mg/dL	3.5 - 12.6 mg/dL
Thyroid Stimulating Hormone(TSH) Method: C.L.I.A	0.78 μ IU/ml	0.35 - 5.50 μ IU/ml

Interpretation

Primary malfunction of the thyroid gland may result in excessive (hyper) or below normal (hypo) release of T3 or T4. In addition, as thyroid function is directly affected by TSH. Diagnostically, T3 concentration is more sensitive to certain thyroid conditions than T4. While T4 levels are a sensitive (and superior) indicator of hypothyroidism, T3 blood levels better define hyperthyroidism. Because T3 concentration in serum changes faster and more markedly than T4, the T3 level is also an excellent indicator of the ability of the thyroid to respond to both stimulatory and suppressive tests. Under conditions of strong thyroid stimulation, the T3 level offers a good.

It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.


Dr Rajami Gutha, PhD
Chief Biochemist


Verified By


Dr K Mahesh Kumar MD
Consultant Pathologist



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Investigation

Result

Complete Urine Examination

Investigation

Result

PHYSICAL EXAMINATION

Colour : Pale Yellow
Apperance : Clear
Reaction : Acidic
Specific Gravity : 1.025

CHEMICAL EXAMINATION

Albumin : Nil
Glucose : Nil

MICROSCOPIC EXAMINATION

Pus Cells : 1 - 2 /HPF
Epithelial Cells : 2 - 3 /HPF
RBC : Nil /HPF
Crystals : Nil
Casts : Nil
Bacteria : Nil
Others : Nil

End of report

Dr K Mahesh Kumar, MD
Consultant Pathologist

Verified by

Dr Rajani Gutha
Chief Biochemist

ADITYA DIAGNOSTICS & RESEARCH LABS ECG REPORT

ID : 1500	Years	Male	cm	kg	mmHg	Race/Unknown	Room No.:	Department:	Exam Room:	Medication:
HR : 96	bpm	✓								
P : 90	ms	✓								
PR : 151	ms	✓								
QRS : 77	ms	✓								
QT/QTc : 323/408	ms	✓								
P/QRS/T : 68/77/41	°	✓								
RV5/SV1 : 1.393/1.370	mV	✓								

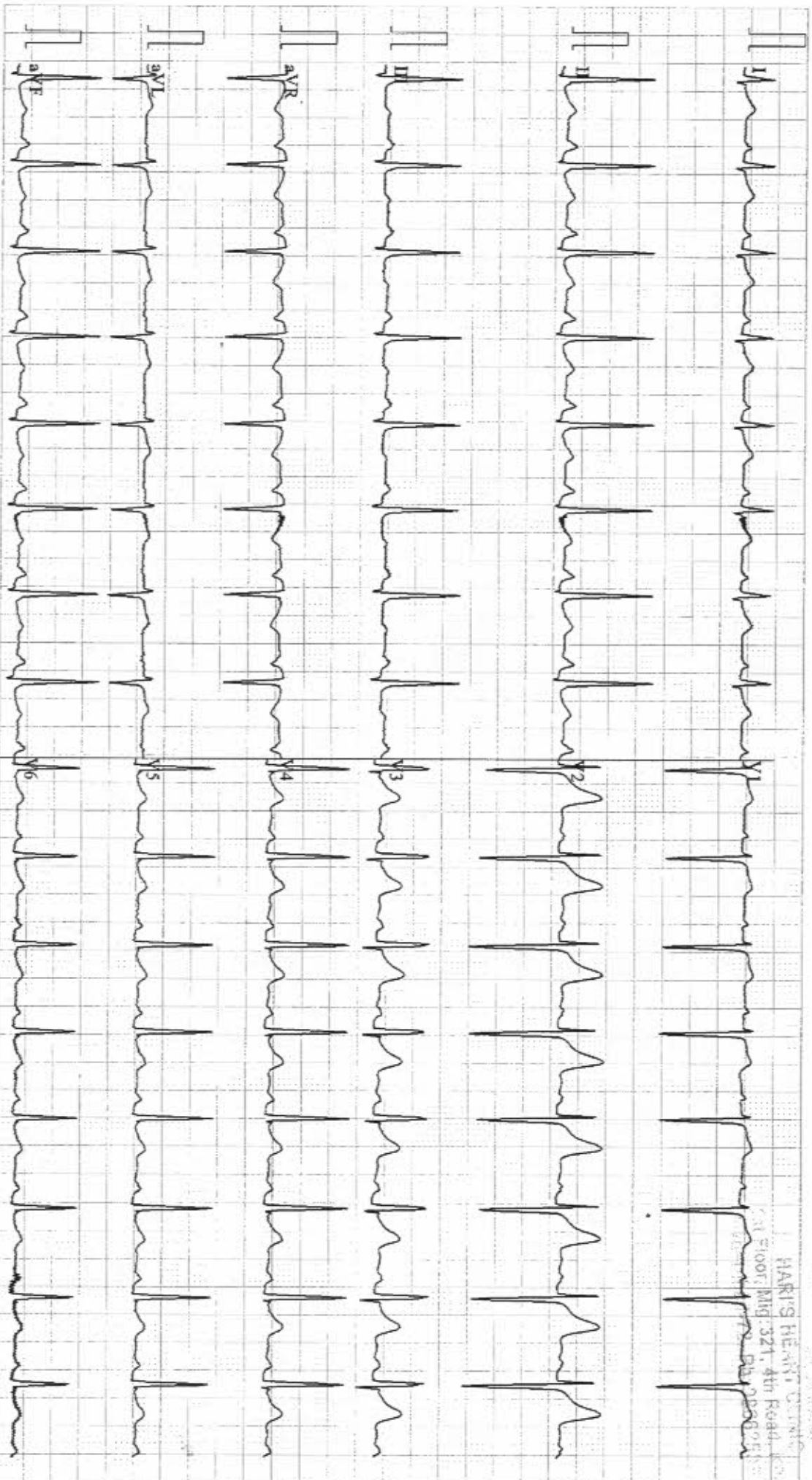
Diagnosis Information:
 Sinus Rhythm
 Normal ECG

O22-2833
 MR MAHESH VANGARA M/33 Y
 Aditya Diagnostics 26-02-2022

Technician :
 Ref-Phys. :
 Report Confirmed by:

NSR

HS



HARISH HEAVY CONSULTANTS
 1st Floor, Mig: 321, 4th Road,
 Aditya Diagnostics



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Ultrasound Scan Abdomen

- Liver** Size (124 mm), Shape, contour and echotexture normal. No localized or diffused mass lesions are seen. Intrahepatic vascular system, Portal vein, C.B.D and biliary radicals are normal
- Gall Bladder** Size, shape and wall thickness are normal. No calculus or no mass lesions are seen.
- Spleen** Size : 80 mm, Shape and echotexture normal, No abnormal calcifications seen.
- Pancreas** Head, body and tail echotexture are normal. Pancreatic duct normal. No mass or cystic lesions seen. No calcifications are seen,
- Kidneys** Right kidney Measures : 83 X 35 mm
Left kidney Measures : 85 X 44 mm
Peri renal areas normal, Renal capsule normal, Cortical thickness, Cortical echopattern and corticomedullary differentiation are normal.
Pelvicalyceal system normal. No calculus or no mass lesions are seen.
- Urinary Bladder** Well distended, Normal wall thickness. No evidence of calculi. No focal lesions.
- Prostate** Slightly Increased in Size : 34 X 41 X 35 mm Echotexture normal. No calcification seen. Volume - 25 cc.
- Others** Aorta and IVC are normal. No lymphadenopathy. No ascitis.
- Impression** * *BODERLINE PROSTATOMEGALY.*

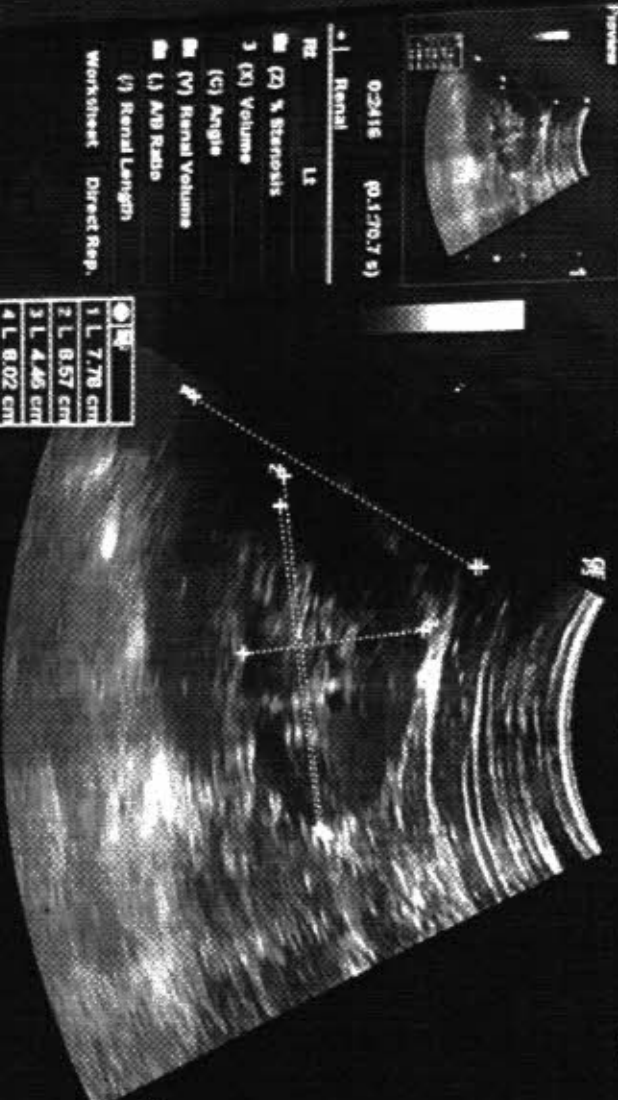
DR ABDUR
Consultant Radiologist



ADITYA DIAGNOSTICS MAHESH,
26/02/22 18:42:03 ADM 2545474

MI 1.0 T1s 0.1 4C
Renal

B CH1
0-Freq 6.0 MHz
Gn 42
EVA 171
Map 1400
D 14.0 cm
DR 75
FR 34 Hz
AO 100 %



1 L	7.78 cm
2 L	8.57 cm
3 L	4.46 cm
4 L	8.02 cm
d	2.80 cm
L	0.00 cm

- 02418 (0.170,7 s)
- Renal
- RT
- LT
- (Q) % Stenosis
- 3 (X) Volume
- (C) Angle
- (V) Renal Volume
- (L) A/B Ratio
- (f) Renal Length
- Worksheet Direct Rep.

Mode
26/02/22 18:44:42

Frequency
Virtual Curves
Sweep/Line
Cine/Still
Dynamic Range
Gray Map
SBI 40
Rotation
Focus Position
Focus Number



ADITYA DIAGNOSTICS MAHESH,
 26/10/22 18:41:54 ADM 2545424

Preview



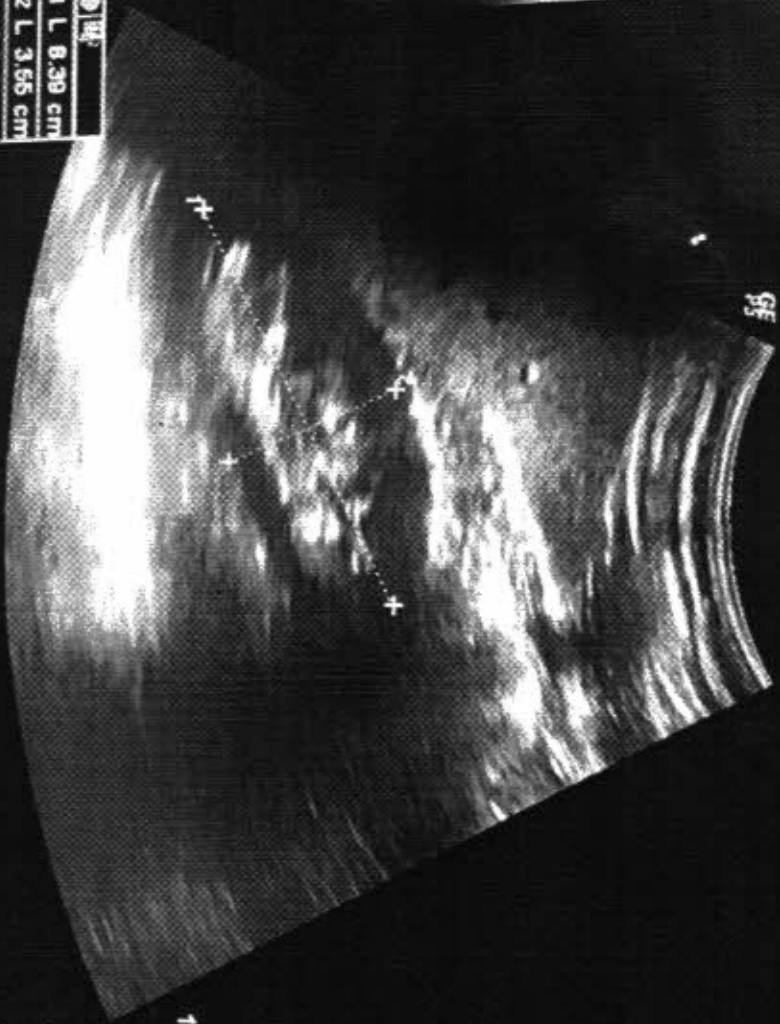
02416 (0.170.7 s)

Renal

Lt

- (Z) % Stenosis
 - (X) Volume
 - (c) Angle
 - (V) Renal Volume
 - (I) A/B Ratio
 - (V) Renal Length
- Worksheet Direct Rep.

1 L	8.39 cm
2 L	3.55 cm
d	9.40 cm
L	0.00 cm



MI 1.0 TIS 0.1 4C
 Renal

B CHI
 0-Frq 5.0 MHz
 Gn 42
 E/A 111
 Map HD0
 D 14.0 cm
 DR 75
 FR 34 Hz
 AO 100 %

B Made
 Virtual Corrax
 Frequency
 CrossSection
 Dynamic Range
 SRI HD
 Rotation
 Focus Position
 Focus Number
 Menu



Patient Name : MAHESH
Age/Gender: MALE

Date :26/02/2022

INDICATIONS:-

MITRAL VALVE	: Normal		
AORTIC VALVE	:Normal		
TRICUSPID VALVE	: Normal		
PULMONARY VALVE	:Normal		
LEFT VENTRICLE	: No RWMA		
	EDD :3.4cm	ESD :2.0 cm	EF : 72 %
	IVS : 1.30 cm	PW :0.94 cm	FS : 40 %
LEFT ATRIUM	: 3.1cm		
AORTA	:2.9cm		
RIGHT ATRIUM	:Normal		
RIGHT VENTRICLE	:Normal		
PULMONARY ARTERY	: Normal		
IVS	: Intact		
IAS	: Intact		
PERICARDIUM	: Normal		
IVC/SVC	:Normal		
OTHER			

DOPPLER :-

MITRAL FLOW	: E - 1.0 m/s A - 0.6 m/s
PJV	: 0.8m/s
AJV	: 0.9 m/s
TRICUSPID FLOW	: m/s

COLOUR FLOW :

NO MR/ NO AR / NO TR / NO PAH

CONCLUSION :--

NO RWMA
GOOD LV SYSTOLIC FUNCTION
NORMAL LV FILLING PATTREN
NORMAL SIZE CARDIAC CHAMBERS
NO MR / NO AR / NO TR / NO PAH
NO LA / LV CLOTS
NO PERICARDIAL EFFUSION

Dr. V. HARI RAM
 M.D. (CARD)
HARI'S HEART CLINIC
 1st Floor, K.P.H.B. Road, KPHB,
 Hyderabad-72. Ph: 9866253010
CARDIOLOGIST

