



MANIPAL HOSPITAL GHAZIABAD

NH-24 HAPUR ROAD, NEAR LANDCRAFT GOLF LINKS, GHAZIABAD-201002

### BILL OF SUPPLY

PAYOR: Arcofemi Healthcare Limited 2022-20

Hosp No. :MH010665703 Episode No:H18000000074 Name

:MR NARENDRA SINGH

Age/Sex :48 Y / Male

:H NO L 54 , SANJAY NAGAR GHAZIABAD GHAZIABAD 201001 Address

Phone :9953884082

GSTIN : 09AACCC2943F1ZU Bill No. :MGD22OCR0000436

Episode Dt :24/12/2022

Bill Date :24/12/2022 10:17AM Doctor :HEALTH CHECK MGD Dept.

:HC SERVICE MGD

PAN No :AACCC2943F

Amount		TaxAmt	Tax%	Price	Unit		cs	Particular	#
2350.00	4-,			2350.00	ID 1	(MALE) M	MEDIWHEELS	BOVE 40YRS IC APPT	1 2
2350.00	:	Total				* 200 800 100 800 800 100 000 000	10 mil 107 dec esc esc esc esc esc esc esc esc esc e		12 24 .
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0.00	:	Payable	Net						
2350.00	:	20 Share	Limited 2022-	Healthcare	rcofemi				
2350.00	;	Payable	Net						

(Bill to Arcofemi Healthcare Limited 2022-20 a sum of Rupees Two Thousand Three Hundred Fifty only)

> Generated/Printed By (Pratiksha Singh)

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Registered Office: Manipal Hospital Pvt. Ltd.
The Annexe, #98/2, Rustom Bagh, HAL Airport Road, Bengaluru 560 017 | P +91 80 4936 0300 | www.manipalhospitals.com ClN: U855110KA2003PTC03305



# 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	MR. SINGH NARENDRA
EC NO.	71000
DESIGNATION	HEAD CASHIER "E" II
PLACE OF WORK	GHAZIABAD,RAJNAGAR
BIRTHDATE	23-06-1974
PROPOSED DATE OF HEALTH CHECKUP	25-06-2022
BOOKING REFERENCE NO.	22J71000100019736E

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 **04-06-2022** 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

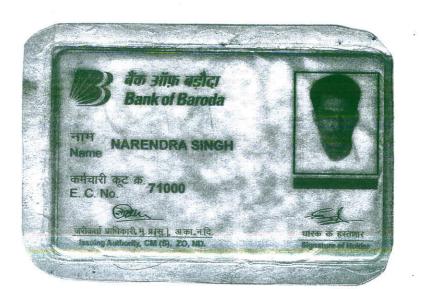
(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



# SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years)
	and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation







Name

MR NARENDRA SINGH

Age

48 Yr(s) Sex :Male

**Registration No** 

MH010665703

Lab No

202212002090

**Patient Episode** 

H18000000074

**Collection Date:** 

24 Dec 2022 10:46

**Referred By** 

HEALTH CHECK MGD

Reporting Date:

24 Dec 2022 14:18

Receiving Date

: 24 Dec 2022 10:46

**BIOCHEMISTRY** 

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

GLUCOSE-Fasting

Specimen: Plasma

GLUCOSE, FASTING (F)

97.0

mg/dl

[70.0-110.0]

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Method: Hexokinase

-----END OF REPORT--

Alla

Dr. Alka Dixit Vats Consultant Pathologist



Name

MR NARENDRA SINGH

Age

48 Yr(s) Sex : Male

**Registration No** 

: MH010665703

Lab No

32221208281

**Patient Episode** 

H18000000074

**Collection Date:** 

24 Dec 2022 20:19

**Referred By** 

HEALTH CHECK MGD

Reporting Date:

25 Dec 2022 11:51

Receiving Date

: 24 Dec 2022 20:27

### **BIOCHEMISTRY**

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

Test Name

Result

Unit

Biological Ref. Interval

TOTAL PSA, Serum (ECLIA)

0.402

ng/mL

[<2.500]

Note: PSA is a glycoprotein that is produced by the prostate gland. Normally, very little PSA is secreted in the blood. Increases in glandular size and tissue damage caused by BPH, prostatitis, or prostate cancer may increase circulating PSA levels.

Caution : Serum markers are not specific for malignancy, and values may vary by method.

Immediate PSA testing following digital rectal examination, ejaculation, prostate massage urethral instrumentation, prostate biopsy may increase PSA levels.

Some patients who have been exposed to animal antigens, may have circulating antianimal

antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

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#### BIOCHEMISTRY

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

### THYROID PROFILE, Serum

			1
T3 - Triiodothyronine (ECLIA)	1.39	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	9.53	micg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	1.460	μIU/mL	[0.340-4.250]

Note: TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m. and at a minimum between 6-10 pm. Factors such as change of seasons hormonal fluctuations, Ca or Fe supplements, high fibre diet, stress and illness affect TSH results.

- \* References ranges recommended by the American Thyroid Association
- 1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128
  - 2) http://www.thyroid-info.com/articles/tsh-fluctuating.html

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-----END OF REPORT-----

Dr. Lona Mohapatra CONSULTANT PATHOLOGY

Dediapas



Name

MR NARENDRA SINGH

Age : 48 Yr(s) Sex :Male

**Registration No** 

: MH010665703

Lab No : 202212002089

Patient Episode

: H18000000074

**Collection Date :** 24 Dec 2022 10:46

Referred By

: H18000000074

Collection Date: 24 Dec 2022 10:40

**Receiving Date** 

: HEALTH CHECK MGD: 24 Dec 2022 10:50

**Reporting Date:** 24 Dec 2022 14:28

### **HAEMATOLOGY**

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RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

COMPLETE BLOOD COUNT (AUTOMATED	))	SPECIMEN-EDTA Whole	Blood
RBC COUNT (IMPEDENCE)	4.64	millions/cu mm	[4.50-5.50]
HEMOGLOBIN	15.7	g/dl	[13.0-17.0]
Method:cyanide free SLS-colorim	netry	Association of the second	
HEMATOCRIT (CALCULATED)	47.4	%	[40.0-50.0]
MCV (DERIVED)	102.2 #	fL	[83.0-101.0]
MCH (CALCULATED)	33.8 #	pg	[27.0-32.0]
MCHC (CALCULATED)	33.1	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.0	%	[11.6-14.0]
Platelet count	198	x 10 <sup>3</sup> cells/cumm	[150-400]
MPV (DERIVED)	9.6		
halpiquini selah matawa 3 metah men			
WBC COUNT(TC)(IMPEDENCE) DIFFERENTIAL COUNT	6.02	x 10 <sup>3</sup> cells/cumm	[4.00-10.00]
(VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	53.0	%	[40.0-80.0]
Lymphocytes	38.0	%	[17.0-45.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	2.0	ે	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	11.0 #	/1sthour	-0.0]

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MR NARENDRA SINGH Name

48 Yr(s) Sex :Male Age

**Registration No** 

MH010665703

202212002089

**Patient Episode** 

**Collection Date:** 

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Referred By

H18000000074

HEALTH CHECK MGD

Reporting Date:

Lab No

24 Dec 2022 14:21

**Receiving Date** 

24 Dec 2022 10:50

### **CLINICAL PATHOLOGY**

### ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

### MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

SLIGHTLY TURBID

(4.6-8.0)

Reaction[pH] Specific Gravity 6.0 1.020

(1.003 - 1.035)

### CHEMICAL EXAMINATION

Protein/Albumin

(NOT DETECTED)

Glucose

Normal

(NOT DETECTED)

Ketone Bodies

+Ketone Bodies+

(NOT DETECTED) (NORMAL)

Urobilinogen

### MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells

2-4 /hpf

RBC

0-1/hpf

/hpf

(0-5/hpf)(0-2/hpf)

Epithelial Cells

nil

CASTS

nil

calcium oxilate Crystals

OTHERS

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Name

MR NARENDRA SINGH

Age 48 Yr(s) Sex : Male

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H18000000074

**Collection Date:** 24 Dec 2022 10:46

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HEALTH CHECK MGD

Reporting Date: 24 Dec 2022 14:26

**Receiving Date** 

24 Dec 2022 10:50

### **BIOCHEMISTRY**

TEST

RESULT

**BIOLOGICAL REFERENCE INTERVAL** 

Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin)

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA HbA1c in %

Non diabetic adults >= 18years <5.7

Prediabetes (At Risk )5.7-6.4 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

117

mg/dl

Comments: HbAlc provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

#### Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	234 #	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	99	mg/dl	[<150] Borderline high:151-199
			High: 200 - 499 Very high:>500
HDL- CHOLESTEROL Method: Enzymatic Immunoimhibition	61.0 n	mg/dl	[35.0-65.0]
VLDL- CHOLESTEROL (Calculated)	20	mg/dl	[0-35]
CHOLESTEROL, LDL, DIRECT	153.0 #	mg/dl	[<120.0] Near/

Above optimal-100-129

Borderline High: 130-159 High Risk: 160-189

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**Reporting Date:** 

24 Dec 2022 14:18

24 Dec 2022 10:50

### **BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculat		3.8	<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calcula		2.5	<3 Optimal 3-4 Borderline Source >6 High Risk

### Note:

Reference ranges based on ATP III Classifications.

### KIDNEY PROFILE

Specimen: Serum			
UREA	21.4	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	10.0	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	0.66 #	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization	1		
URIC ACID	3.9 #	mg/dl	[4.0-8.5]
Method:uricase PAP			
SODIUM, SERUM	139.5	mmol/L	[136.0-144.0]
POTASSIUM, SERUM	4.71	mmol/L	[3.60-5.10]
SERUM CHLORIDE	104.3	mmol/l	[101.0-111.0]
Method: ISE Indirect			
eGFR (calculated)	114.3	ml/min/1.73sq.m	[>60.0]
Technical Note			
eGFR which is primarily based on Serum	Creatinine is	a derivation of	CKD-EPI 2009

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equation normalized to1.73 sq.m BSA and is not applicable to individuals below 18 years.



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Lab No : 202212002089

Patient Episode

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Referred By

**Collection Date:** 24 Dec 2022 10:46

**Receiving Date** 

: HEALTH CHECK MGD : 24 Dec 2022 10:50 Reporting Date: 24 Dec

24 Dec 2022 14:18

### **BIOCHEMISTRY**

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### RESULT

### UNIT

### BIOLOGICAL REFERENCE INTERVAL

eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

### LIVER FUNCTION TEST

BILIRUBIN - TOTAL Method: D P D	0.61	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.13	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.48 #	mg/dl	[0.10-0.30]
TOTAL PROTEINS (SERUM) Method: BIURET	8.00	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.61	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.40	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.36		[1.00-2.50]
AST(SGOT) (SERUM) Method: IFCC W/O P5P	25.00	U/L	[0.00-40.00]
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	11.00 #	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	70.0	IU/L	[32.0-91.0]

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24 Dec 2022 10:50

BIOCHEMISTRY

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

GGT

31.0

[7.0-50.0]

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing

O Rh(D) Positive

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

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-----END OF REPORT-----

Dr. Alka Dixit Vats **Consultant Pathologist**