

प्रति,

समन्वयक,
Mediwheel (Arcofemi Healthcare Limited)
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	ASHA YADAV
जन्म की तारीख	30-11-1977
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	25-08-2023
बुकिंग संदर्भ सं.	23S76530100067634S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MR. YADAV KANHAIYA
कर्मचारी की क.कू.संख्या	76530
कर्मचारी का पद	SINGLE WINDOW OPERATOR A
कर्मचारी के कार्य का स्थान	ALLAHABAD, ALLAHABAD MAIN
कर्मचारी के जन्म की तारीख	02-03-1973

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 24-08-2023 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)

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

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	ASHA YADAV
DATE OF BIRTH	30-11-1977
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	25-08-2023
BOOKING REFERENCE NO.	23S76530100067634S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. YADAV KANHAIYA
EMPLOYEE EC NO.	76530
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	ALLAHABAD,ALLAHABAD MAIN
EMPLOYEE BIRTHDATE	02-03-1973

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 **24-08-2023** till **31-03-2024**. 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's spouse 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))

CHANDAN DIAGNOSTIC CENTRE

KAMLA NEHRU ROAD KATRA PRAYAGRAJ, 9235447965

Ms. ASHA YADAV

Age : 45/F

Ref by : MEDWHEEL

Indication1 :

Indication2 :

Indication3 :

ID : 15379

HWt : /

Recorded : 25-8-2023 11:48

TREADMILL TEST SUMMARY REPORT

Protocol: BRUCE

History:

Medication1 :

Medication2 :

Medication3 :

PHASE	PHASE TIME	STAGE TIME	SPEED (Km/Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	II	ST LEVEL (mm) V2	V5	METS
SUPINE											
HYPERTENT											
STANDING	0:30	0:30			78	112/74	87	0.7	1.1	0.7	
					82	112/74	91	0.5	1.1	0.6	
					82	112/74	91	0.5	1.0	0.6	
STAGE 1	2:59	2:59	2.70	10.00	103	112/74	115	0.7	0.7	0.6	4.80
STAGE 2	6:00	2:59	4.00	12.00	115	122/74	140	-0.5	0.8	0.2	7.10
STAGE 3	9:01	2:59	5.40	14.00	141	132/74	186	-0.7	1.0	0.0	10.00
STAGE 4	9:17	0:14	6.70	16.00	146	140/74	204	-0.3	1.0	-0.2	10.31
PEAK EXER	9:26	0:23			153	140/74	214	-0.5	0.8	-0.2	10.51
RECOVERY	2:59	2:59	0.00	0.00	98	114/74	111	-0.2	0.3	-0.1	

RESULTS

Exercise Duration : 9:26 Minutes
 Max Heart Rate : 153 bpm 87% of target heart rate 175 bpm
 Max Blood Pressure : 140/74 mmHg
 Max Work Load : 10.51 METS
 Reason of Termination : Achieved THR

IMPRESSIONS
 GOOD EFFORT TOLERANCE, NORMAL IONOTROPIC AND CHRONOTROPIC RESPONSE
 NO ANGINAL/ARRYTHMIAS, NO SIGNIFICANT ST CHANGES AT PEAK OF TEST
 TEST IS NEGATIVE FOR EXERCISE INDUCED REVERSIBLE ISCHEMIA.

25/8/2023

DR R K VERMA

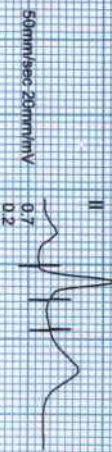
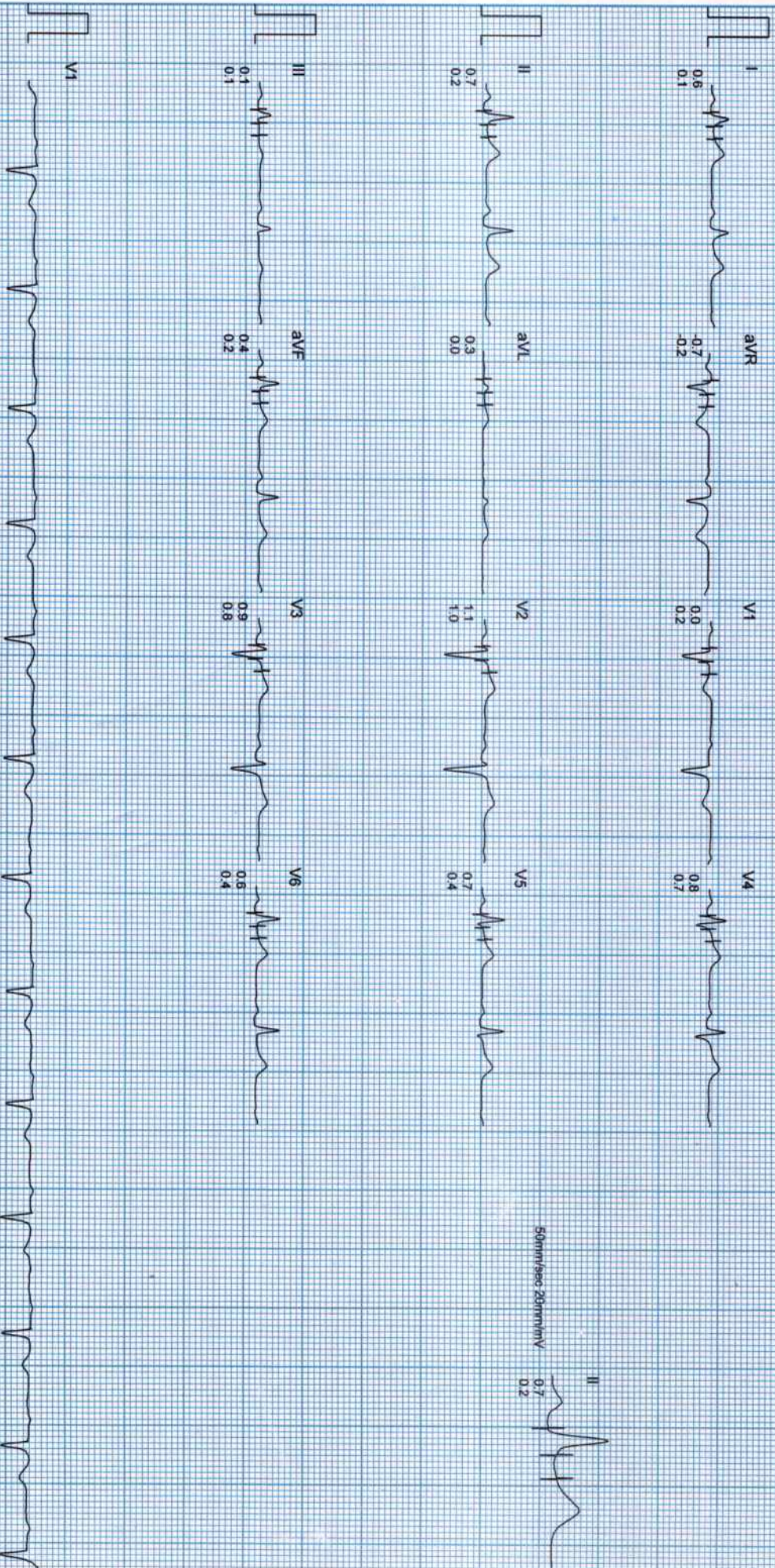
Ms. ASHA YADAV
I.D. : 15379
AGE/SEX : 45/F
RECORDED : 25-8-2023 11:48

RATE : 78 BPM
B.P. : 112/74 mmHg

SUPINE
PRETEST

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN

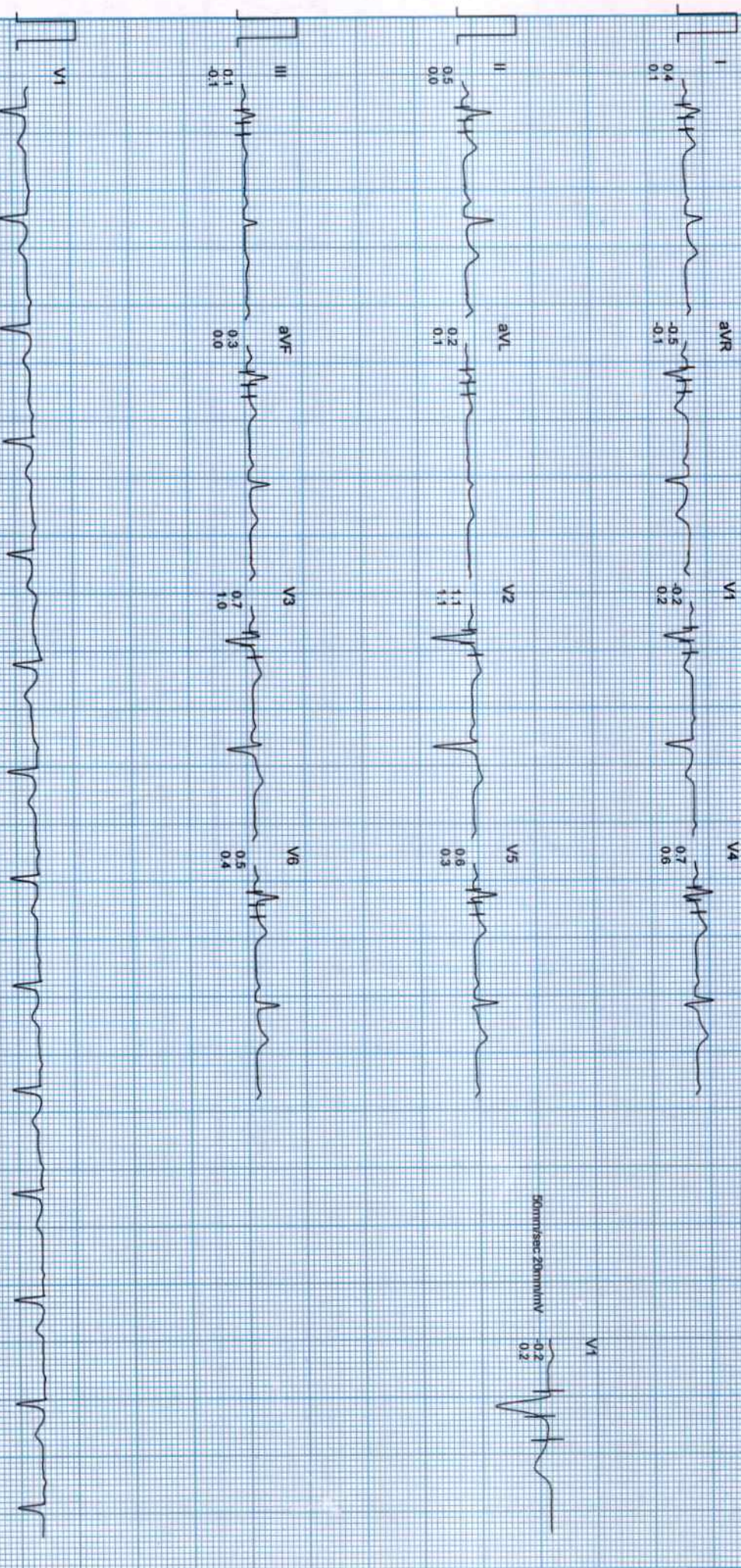


Ms ASHA YADAV
I.D. : 15379
AGE/SEX : 45/F
RECORDED : 25-8-2023 11:48

RATE : 82 BPM
B.P. : 112/74 mmHg

HYPERVENTILATION
PRETEST
STAGE TIME : 0:30

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

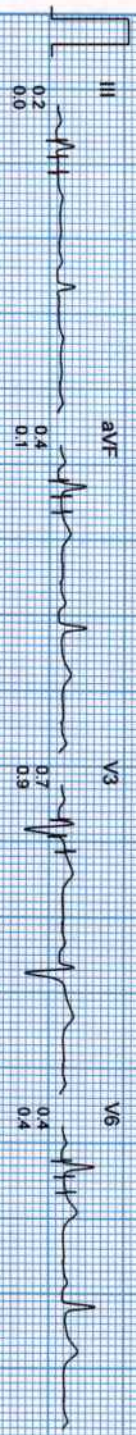
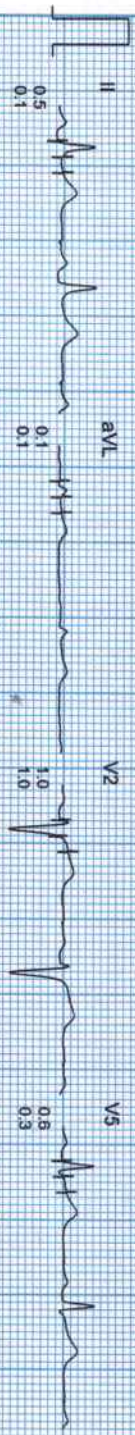
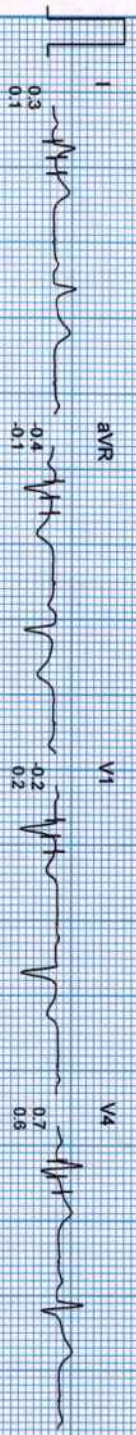
Ms. ASHA YADAV
I.D. : 15379
AGE/SEX : 45/F
RECORDED : 25-8-2023 11:48

RATE : 82 BPM
B.P. : 112/74 mmHg

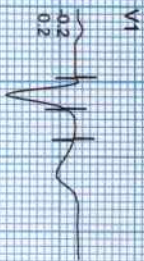
STANDING
PRETEST

ST @ 10mm/mV
80ms PosJ

LINKED MEDIAN



50mm/sec 20mm/mV

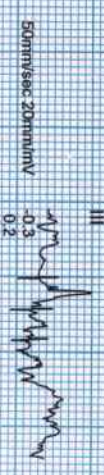
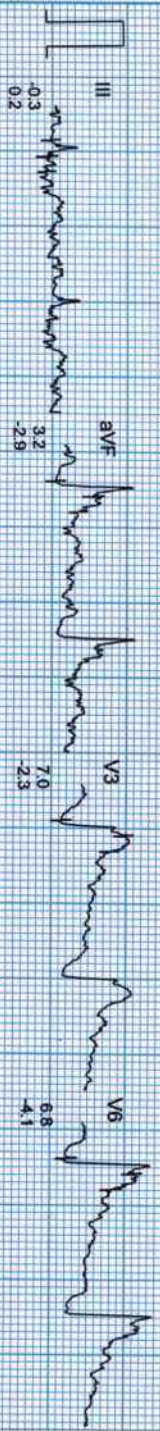
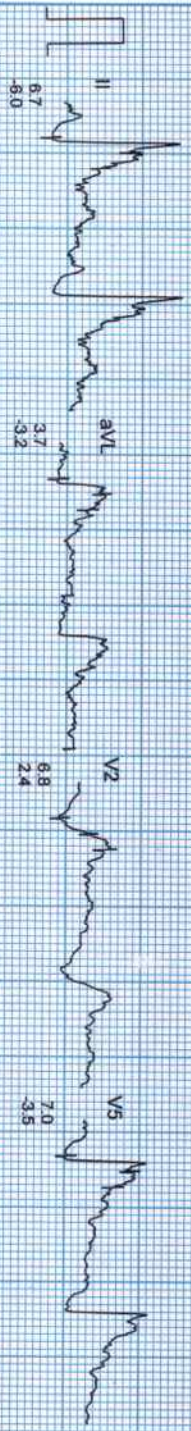
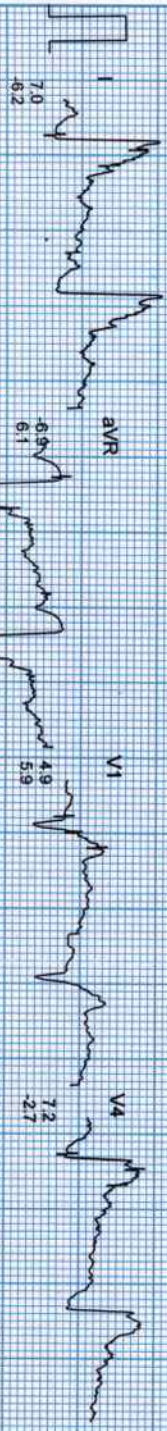


Ms. ASHA YADAV
I.D. : 15379
AGE/SEX : 45/F
RECORDED : 26-8-2023 11:48

RATE : 89 BPM
B.P. : 112/74 mmHg

BRUCE
WARM UP 1
PHASE TIME : 0:00
STAGE TIME : 0:00

ST @ 10mm/mV
80ms PostJ
SPEED : 1.5 Km/Hr
GRADE : 0.0 %
LINKED MEDIAN

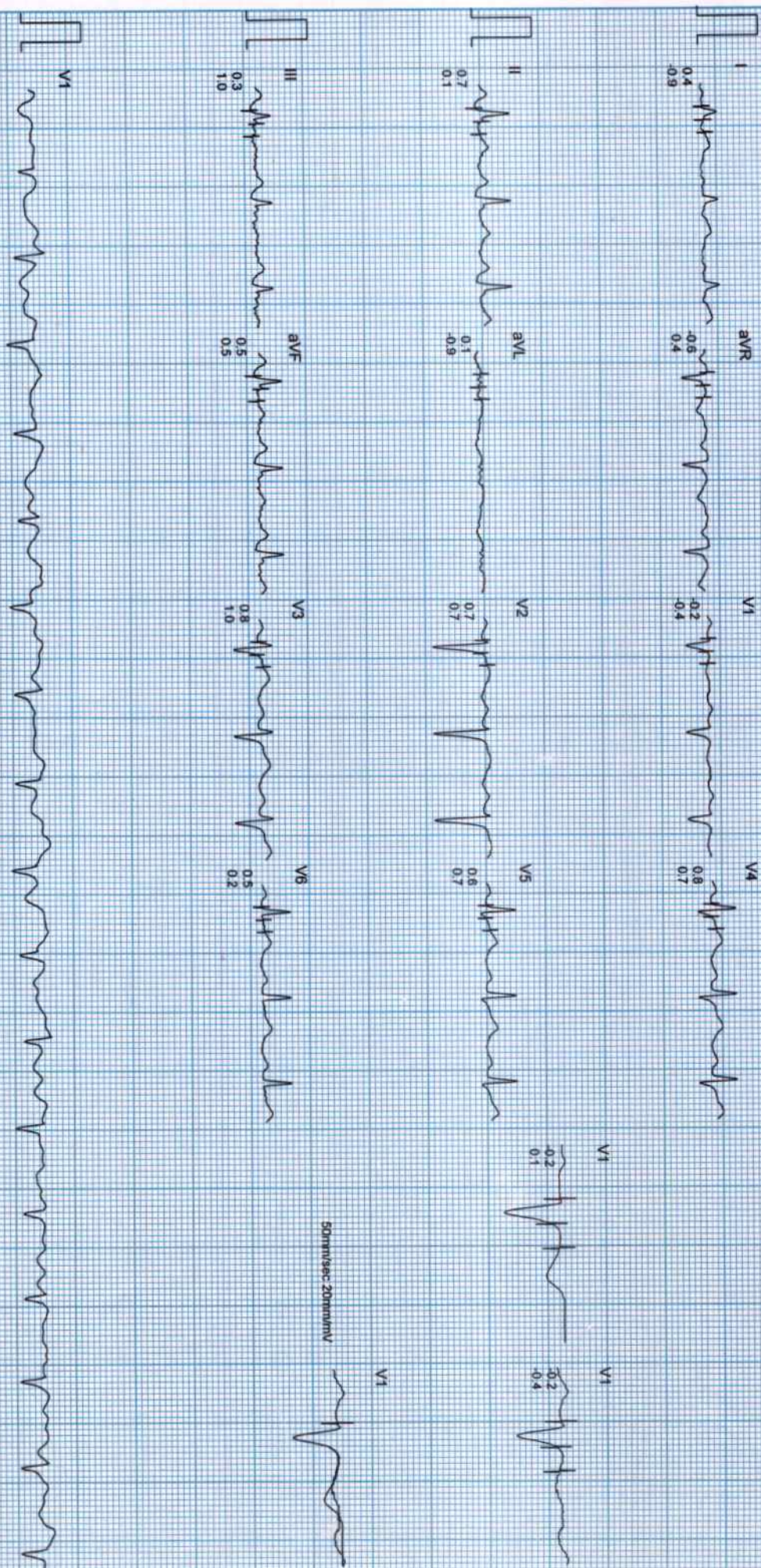


Ms. ASHA YADAV
I.D. : 15379
AGE/SEX : 45/F
RECORDED : 25-8-2023 11:48

RATE : 103 BPM
B.P. : 112/74 mmHg

BRUCE
EXERCISE 1
PHASE TIME : 2:59
STAGE TIME : 2:59

ST @ 10mm/mV
80ms PostJ
SPEED : 2.7 Km./Hr.
GRADE : 10.0 %
LINKED MEDIAN



CHANDAN DIAGNOSTIC CENTRE

Ms. ASHA YADAV
I.D. : 15379
AGE/SEX : 45/F
RECORDED : 25-8-2023 11:48

RATE : 115 BPM
B.P. : 122/74 mmHg

BRUCE
EXERCISE 2
PHASE TIME : 6:00
STAGE TIME : 2:59

ST @ 10mm/mv
80ms PostJ
SPEED : 4.0 Km./Hr
GRADE : 12.0 %
LINKED MEDIAN

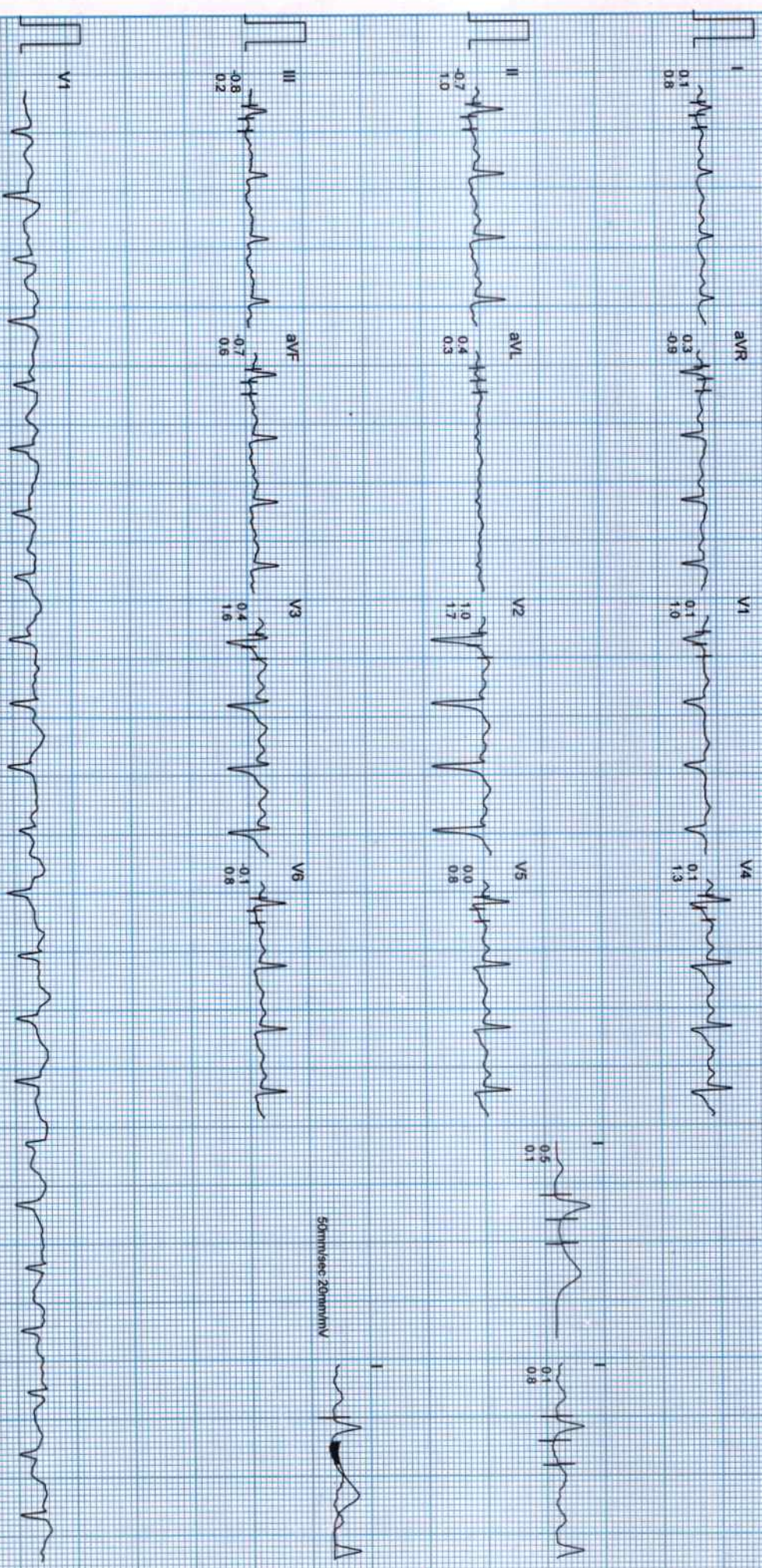


MS. ASHA YADAV
ID : 15379
AGE/SEX : 45/F
RECORDED : 25-8-2023 11:48

RATE : 141 BPM
B.P. : 132/74 mmHg

BRUCE
EXERCISE 3
PHASE TIME : 9:01
STAGE TIME : 2:59

ST @ 10mm/mV
80ms Post J
SPEED : 5.4 Km/HR
GRADE : 14.0 %
LINKED MEDIAN



Ms. ASHA YADAV

I.D. : 15379

AGE/SEX : 45/F

RECORDED : 25-8-2023 11:48

RATE : 146 BPM

B.P. : 140/74 mmHg

BRUCE

EXERCISE 4

PHASE TIME : 9:17

STAGE TIME : 0:14

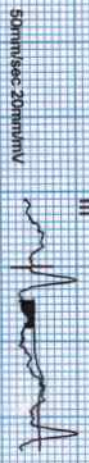
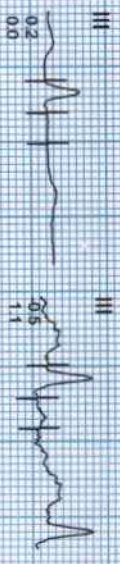
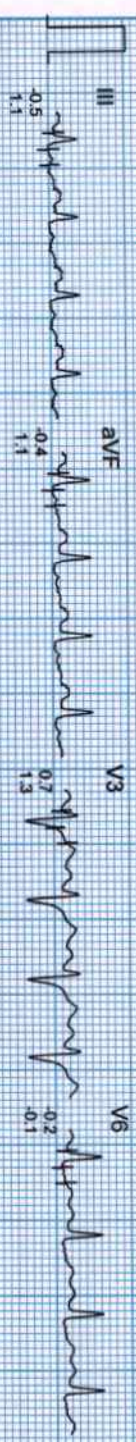
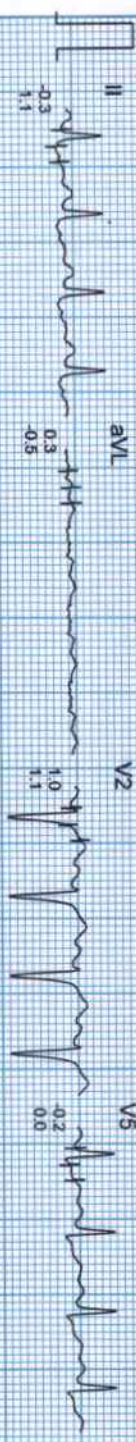
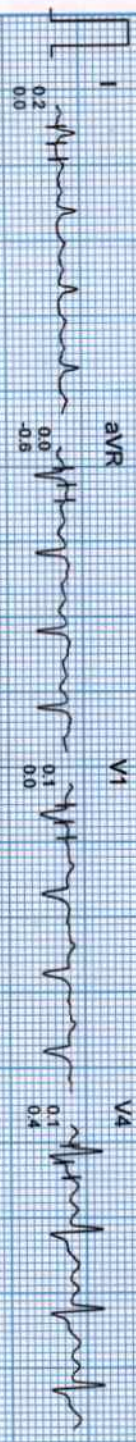
ST @ 10mm/mV

80ms PostJ

SPEED : 6.7 Km./Hr.

GRADE : 16.0 %

LINKED MEDIAN

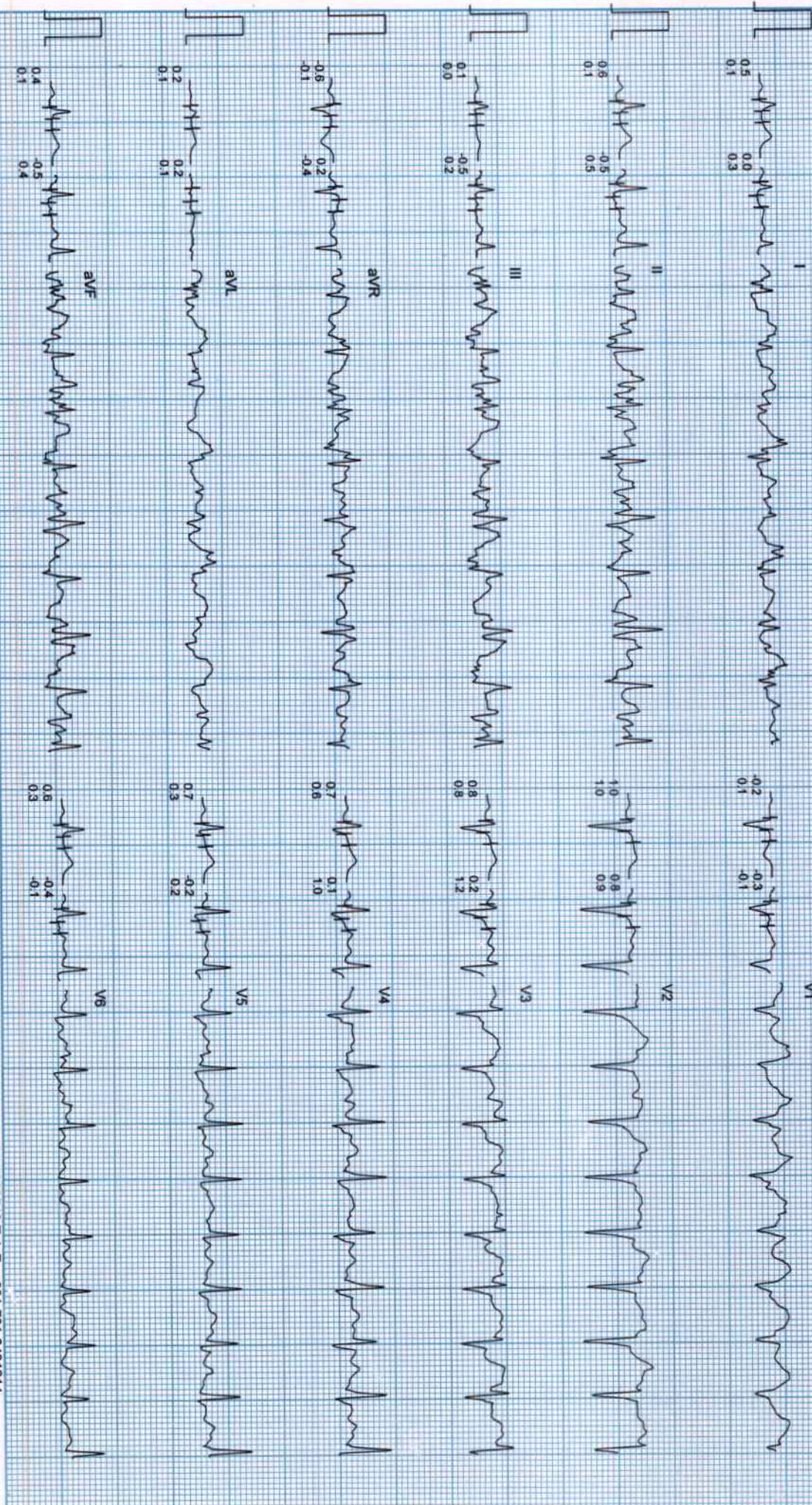


Ms. ASHA YADAV
ID : 15379
AGE/SEX : 45/F
RECORDED : 25-8-2023 11:48

RATE : 153 BPM
B.P. : 140/74 mmHg

BRUCE
PEAK EXER
PHASE TIME : 9:26
STAGE TIME : 0:23

ST @ 10mm/mv
80ms PostJ
SPEED : 6.7 Km/HR
GRADE : 16.0 %
MIXED E.C.G



Filtered Computer Corrected Baseline

25mm/sec 10mm/mV

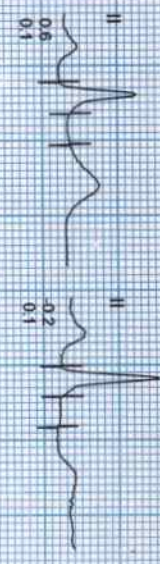
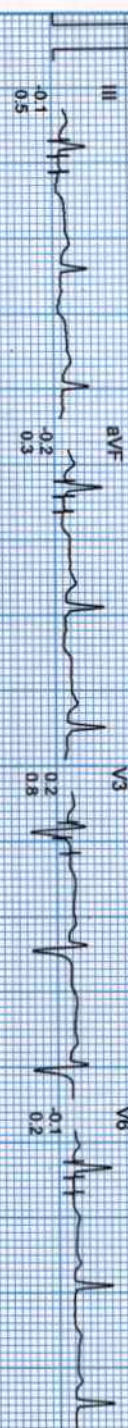
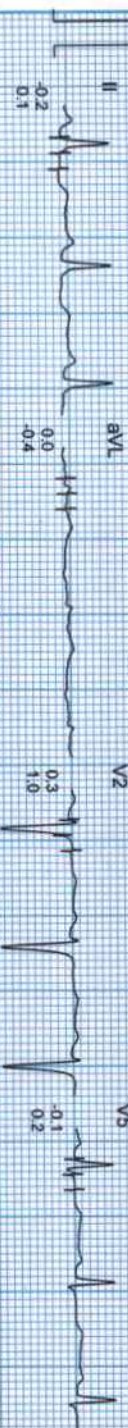
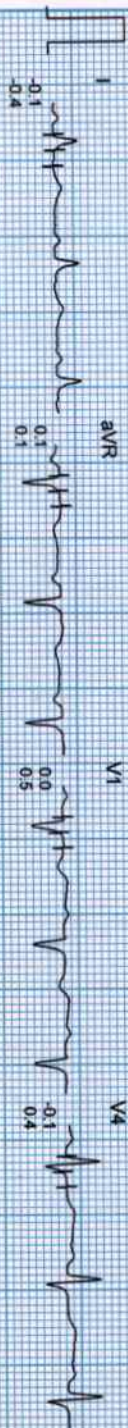
CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

Ms. ASHA YADAV
ID : 15379
AGE/SEX : 45/F
RECORDED : 25-8-2023 11:48

BRUCE
RECOVERY
PHASE TIME : 2:59

ST @ 10mm/mV
80ms PostJ
SPEED : 0.0 Km./hr.
GRADE : 0.0 %
LINKED MEDIAN

RATE : 98 BPM
B.P. : 114/74 mmHg





CHANDAN DIAGNOSTIC CENTRE

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj
Ph: 9235447965,0532-2548257
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ASHA YADAV	Registered On	: 25/Aug/2023 09:54:34
Age/Gender	: 45 Y 8 M 24 D /F	Collected	: 25/Aug/2023 10:03:50
UHID/MR NO	: ALDP.0000124341	Received	: 25/Aug/2023 10:09:49
Visit ID	: ALDP0153792324	Reported	: 25/Aug/2023 13:40:40
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Blood Group (ABO & Rh typing) * , Blood

Blood Group	A			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh (Anti-D)	POSITIVE			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA

Complete Blood Count (CBC) * , Whole Blood

Haemoglobin	11.20	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	
TLC (WBC)	4,200.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	61.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	30.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	6.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE
ESR				
Observed	22.00	Mm for 1st hr.		
Corrected	-	Mm for 1st hr.	< 20	
PCV (HCT)	34.00	%	40-54	
Platelet count				
Platelet Count	0.96	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.70	fL	9-17	ELECTRONIC IMPEDANCE





CHANDAN DIAGNOSTIC CENTRE

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj
Ph: 9235447965,0532-2548257
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ASHA YADAV	Registered On	: 25/Aug/2023 09:54:34
Age/Gender	: 45 Y 8 M 24 D /F	Collected	: 25/Aug/2023 10:03:50
UHID/MR NO	: ALDP.0000124341	Received	: 25/Aug/2023 10:09:49
Visit ID	: ALDP0153792324	Reported	: 25/Aug/2023 13:40:40
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
P-LCR (Platelet Large Cell Ratio)	61.70	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.13	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	15.70	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	3.86	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	88.90	fL	80-100	CALCULATED PARAMETER
MCH	29.10	pg	28-35	CALCULATED PARAMETER
MCHC	32.70	%	30-38	CALCULATED PARAMETER
RDW-CV	13.20	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	45.30	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,562.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	126.00	/cu mm	40-440	

AS

Dr.Akanksha Singh (MD Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj
Ph: 9235447965,0532-2548257
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ASHA YADAV	Registered On	: 25/Aug/2023 09:54:36
Age/Gender	: 45 Y 8 M 24 D /F	Collected	: 25/Aug/2023 10:03:50
UHID/MR NO	: ALDP.0000124341	Received	: 25/Aug/2023 10:09:49
Visit ID	: ALDP0153792324	Reported	: 25/Aug/2023 12:16:42
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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GLUCOSE FASTING * , Plasma

Glucose Fasting	96.80	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impared Glucose Tolerance.

Glucose PP *

Sample:Plasma After Meal

108.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impared Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) * , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.40	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	35.40	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	108	mg/dl	

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.





CHANDAN DIAGNOSTIC CENTRE

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj
Ph: 9235447965,0532-2548257
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ASHA YADAV	Registered On	: 25/Aug/2023 09:54:36
Age/Gender	: 45 Y 8 M 24 D /F	Collected	: 25/Aug/2023 10:03:50
UHID/MR NO	: ALDP.0000124341	Received	: 25/Aug/2023 10:09:49
Visit ID	: ALDP0153792324	Reported	: 25/Aug/2023 12:16:42
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)	NGSP mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

**Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated VARIANT II TURBO HPLC Analyser.

Clinical Implications:

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) * Sample:Serum	11.07	mg/dL	7.0-23.0	CALCULATED
Creatinine * Sample:Serum	0.90	mg/dl	Serum 0.5-1.2 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid * Sample:Serum	5.20	mg/dl	2.5-6.0	URICASE





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LFT (WITH GAMMA GT) * , Serum

SGOT / Aspartate Aminotransferase (AST)	48.90	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	63.80	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	24.20	IU/L	11-50	OPTIMIZED SZAIZING
Protein	6.40	gm/dl	6.2-8.0	BIURET
Albumin	4.00	gm/dl	3.4-5.4	B.C.G.
Globulin	2.40	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.67		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	85.30	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.40	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.10	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.30	mg/dl	< 0.8	JENDRASSIK & GROF

LIPID PROFILE (MINI) * , Serum

Cholesterol (Total)	205.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	62.80	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	112	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	30.30	mg/dl	10-33	CALCULATED
Triglycerides	151.50	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP

AS

Dr.Akanksha Singh (MD Pathology)





CHANDAN DIAGNOSTIC CENTRE

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Patient Name	: Mrs.ASHA YADAV	Registered On	: 25/Aug/2023 09:54:35
Age/Gender	: 45 Y 8 M 24 D /F	Collected	: 25/Aug/2023 14:41:32
UHID/MR NO	: ALDP.0000124341	Received	: 25/Aug/2023 15:40:40
Visit ID	: ALDP0153792324	Reported	: 25/Aug/2023 19:19:32
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic (6.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	0-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	0-2/h.p.f			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

Urine Microscopy is done on centrifuged urine sediment.

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	ABSENT	gms%
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Interpretation:

(+)	< 0.5
(++)	0.5-1.0
(+++)	1-2





CHANDAN DIAGNOSTIC CENTRE

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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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(++++) > 2

SUGAR, PP STAGE * , Urine

Sugar, PP Stage ABSENT

Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



AS

Dr.Akanksha Singh (MD Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj
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UHID/MR NO	: ALDP.0000124341	Received	: 25/Aug/2023 10:09:49
Visit ID	: ALDP0153792324	Reported	: 25/Aug/2023 13:19:48
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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THYROID PROFILE - TOTAL * , Serum

T3, Total (tri-iodothyronine)	131.00	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	5.40	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	4.40	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

AS

Dr.Akanksha Singh (MD Pathology)





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Ph: 9235447965,0532-2548257

CIN : U85110DL2003PLC308206



Patient Name	: Mrs.ASHA YADAV	Registered On	: 25/Aug/2023 09:54:37
Age/Gender	: 45 Y 8 M 24 D /F	Collected	: N/A
UHID/MR NO	: ALDP.0000124341	Received	: N/A
Visit ID	: ALDP0153792324	Reported	: 25/Aug/2023 12:54:46
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

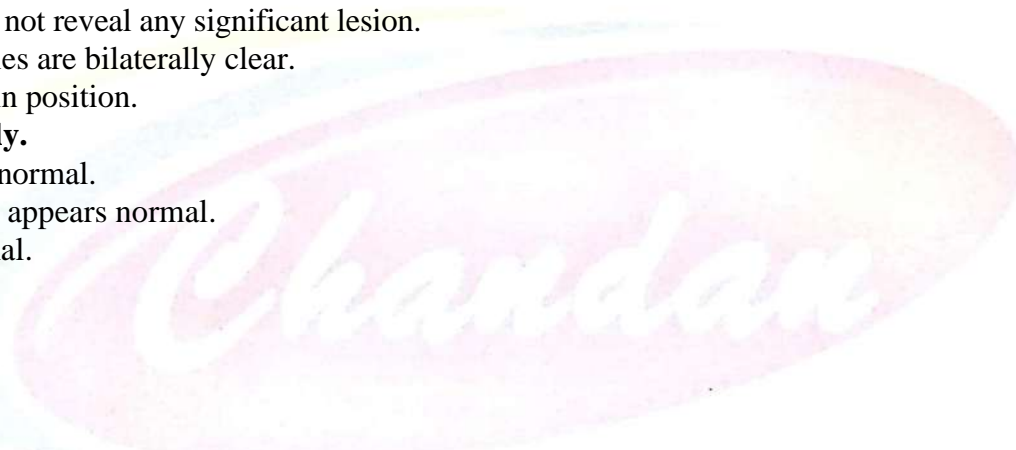
X-RAY REPORT

(300 mA COMPUTERISED UNIT SPOT FILM DEVICE)

CHEST P-A VIEW

- Both lung field did not reveal any significant lesion.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- **Mild cardiomegaly.**
- Hilar shadows are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

Please correlate clinically.



Nidhikant

Dr Nidhikant (MBBS,DMRD,DNB)





CHANDAN DIAGNOSTIC CENTRE

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Visit ID	: ALDP0153792324	Reported	: 25/Aug/2023 11:05:33
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER: - Normal in size (14.9 cm), shape and **shows diffuse increase in the liver parenchymal echogenicity suggestive of grade I fatty changes.** No focal lesion is seen. No intra hepatic biliary radicle dilation seen.

GALL BLADDER :- Well distended, walls are normal. No e/o calculus / focal mass lesion/ pericholecystic fluid.

CBD :- Normal in calibre at porta.

PORTAL VEIN: - Normal in calibre and colour uptake at porta.

PANCREAS: - Head is visualised, normal in size & echopattern. No e/o ductal dilatation or calcification. Rest of pancreas is obscured by bowel gas.

SPLEEN: - Normal in size (9.5 cm), shape and echogenicity.

RIGHT KIDNEY: - Normal in size, shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

LEFT KIDNEY: - Normal in size, shape and echogenicity. **Few tiny concretions are seen.** Pelvicalyceal system is not dilated.

URINARY BLADDER :- Normal in shape, outline and distension. No e/o wall thickening / calculus.

UTERUS :- Anteverted, and is normal in size. No focal myometrial lesion seen. Endometrium is normal in thickness.

OVARIES :- Bilateral ovaries are normal in size, shape and echogenicity.

Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy

No free fluid is seen in the abdomen/pelvis.

IMPRESSION :

- **Grade I fatty liver.**
- **Left renal concretions.**

Please correlate clinically.

*** End Of Report ***

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, Tread Mill Test (TMT), PAP SMEAR FOR CYTOLOGICAL EXAMINATION





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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS



Nidhikant

Dr Nidhikant (MBBS,DMRD,DNB)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *
365 Days Open *Facilities Available at Select Location

Page 11 of 11



Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection
1800-419-0002

Mar. 2018



भारत सरकार

Government of India



आशा यादव

Asha Yadav

जन्म तिथि / DOB : 30/11/1977

महिला / Female



9745 9529 2545

आधार - आम आदमी का अधिकार

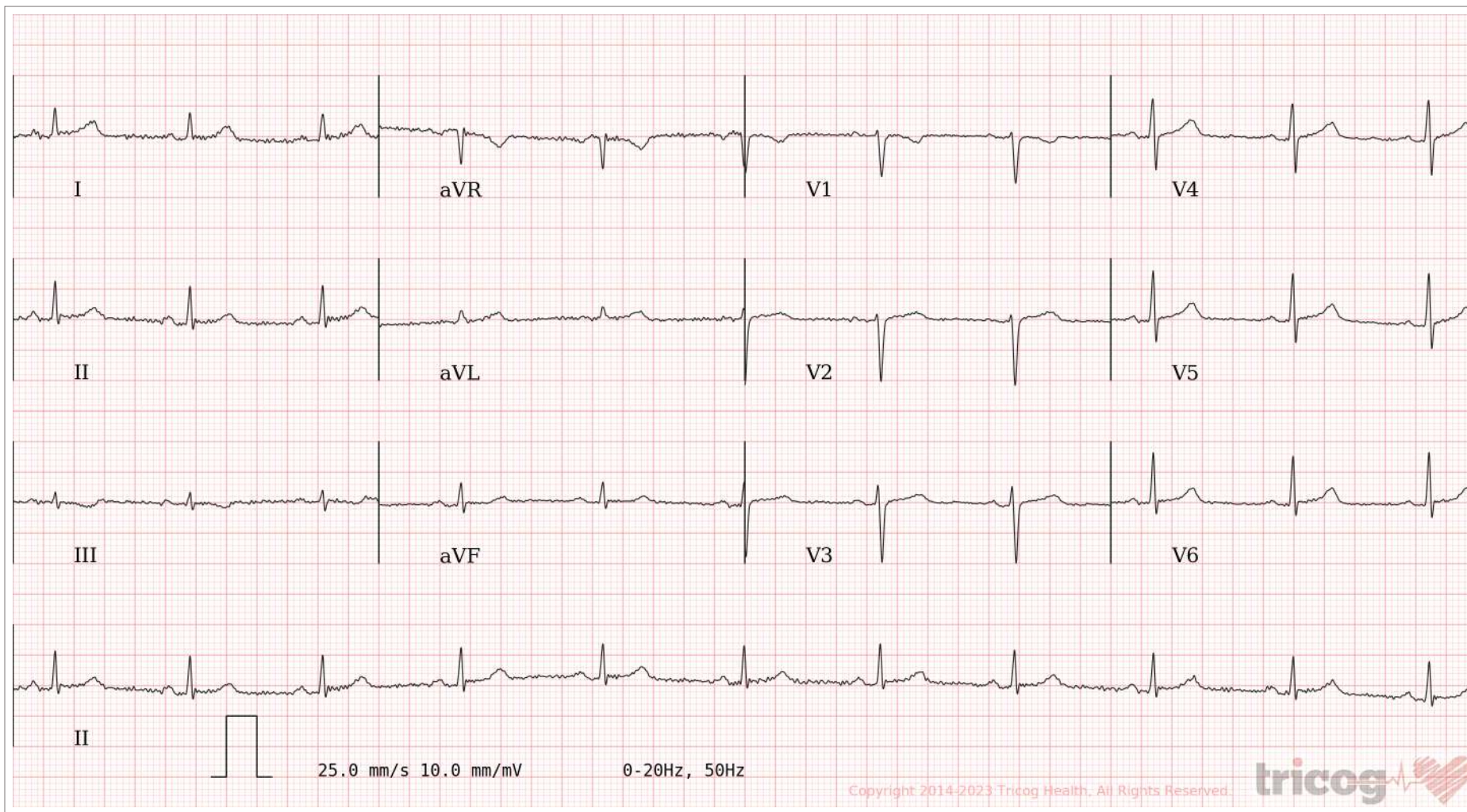
Asha

Chandan Diagnostic



Age / Gender: 45/Female
Patient ID: ALDP0153792324
Patient Name: Mrs.ASHA YADAV

Date and Time: 25th Aug 23 10:14 AM



AR: 67bpm VR: 67bpm QRSD: 72ms QT: 374ms QTcB: 395ms PRI: 154ms P-R-T: 65° 37° 26°

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY

Dr. Bharati R

72470

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.