

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	MRS. SINGH ANAMIKA
EC NO.	107892
DESIGNATION	JOINT MANAGER
PLACE OF WORK	CHIRKUNDA
BIRTHDATE	05-12-1987
PROPOSED DATE OF HEALTH CHECKUP	18-02-2023
BOOKING REFERENCE NO.	22M107892100042876E

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 **17-02-2023** 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))

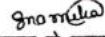


बैंक ऑफ बड़ौदा
Bank of Baroda

नाम : अनामिका सिंह
Name : Anamika Singh
कर्मचारी कूट क :
E.C. No. : 107892


जम्मेदारी अधिकारी
Issuing Authority




धारक के हस्ताक्षर
Holder's Signature

If found please return to:
Asst. General Manager (Security)
Bank of Baroda, Baroda Corporate Centre,
C-26, G-Block, Bandra-Kurla Complex, Mumbai-4000 051
Phone : 91 22 6698 5196 Fax : 91 22 2652 5747

मिलने पर निम्नलिखित को लौटाये :
सहायक महाप्रबंधक (सुरक्षा)
बैंक ऑफ बड़ौदा, बड़ौदा कॉरपोरेट सेन्टर,
सी-26, जी-ब्लॉक, बान्द्रा-कुर्ला कॉम्प्लेक्स, मुम्बई-400051
फोन नंबर : 91 22 6698 5196 फैक्स : 91 22 2652 5747
Blood Group B+





भारत सरकार
Government of India



Issue Date: 12/07/2012



अनामिका सिंह
Anamika Singh
जन्म तिथि / DOB : 05/12/1987
महिला / Female



6744 5267 6270

मेरा आधार, मेरी पहचान

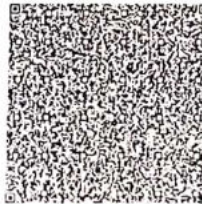


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता: व/ो राजू रंजन, ोमे, हजारीबाग,
झारखण्ड, 825311
Address: W/o Raju Ranjan, Ome,
Hazaribagh, Jharkhand, 825311

Print Date: 11/07/2022



6744 5267 6270

1947

help@uidai.gov.in

www.uidai.gov.in





असर्फी हॉस्पिटल

सबके लिए स्वास्थ्य

OUT PATIENT DEPARTMENT

Department of General Medicine

Mediwheel

Regd. No. : FEB23-41731 Visit : OPD/250223/30122
 Patient Name : MRS. ANAMIKA SINGH Mobile : 9828639240
 Age/Sex : 35 Y 2 M 20 D / Female Date : 25-Feb-2023 1:57 pm
 Address : KEREDARI , HAZARIBAG - Jharkhand , INDIA
 Doctor : Dr. Aditya Anurag MD (Medicine) OPD Timing :

Allergies : Referred By :
 Height : 5 Ft 4 In Temp. : 97.9 F SPO2 : 99 %
 Weight : 66 Kg Pulse : 94 BPM B.P. 100/60 mm/Hg

History and complaints :

Pt. came for regular checkup.

No chronic illness

Examination:

Diagnosis:

CXR-TA - WNL
 LFT - WNL
 MbAIC - 4.5
 CBC - WNL
 TSH - 12.9

Medicines Prescribed:

Advise...
 - Maintain healthy lifestyle...
 - Yoga / Meditation

Follow up:

Days

Advice (Diet/ Lifestyle / Rehab)

Date :

Time :

Signature of Doctor

*Prescription to be valid for 7 Days only.
 *This document is not valid for Medico-Legal purposes.

© AHL/D/0085/3013/December/22



Baramuri, P.O. Bishunpur Polytechnic, Dhanbad-828130 CIN : U85110JH2005PLC011673
 Ph. : 78083 68888 Email : info@asarfihospital.com / www.asarfihospital.com

Rate 94 . Sinus rhythm
 . Borderline T wave abnormalities
 . Baseline wander in lead(s) I, II, aVR, V2, V4

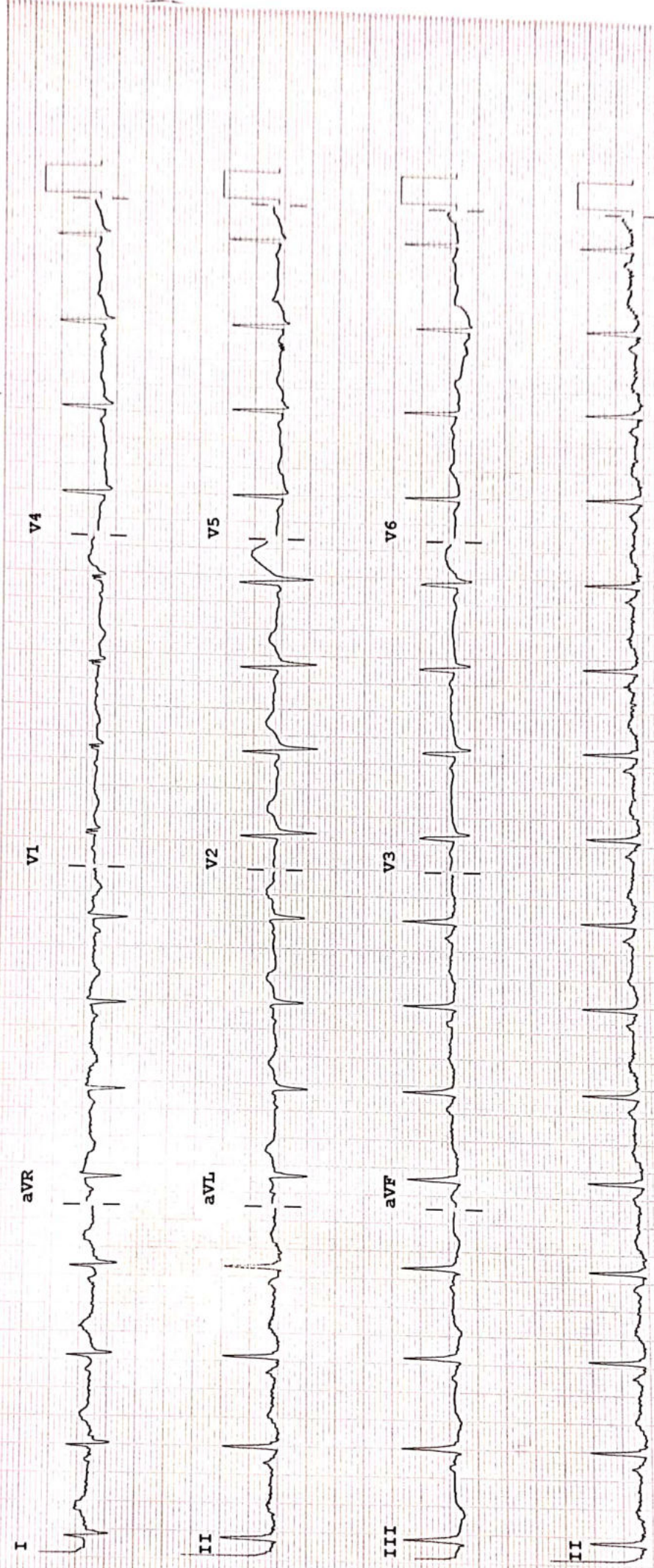


--AXIS--
 P 60
 QRS 89
 T -3

12 Lead; Standard Placement

- BORDERLINE ECG -

Unconfirmed Diagnosis



F 50- 0.50-100 Hz W

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

Device:

PH100B CL P?



असर्फी हॉस्पिटल
सबके लिए स्वास्थ्य

MEDICA Heart Institute
caring for Life

A Unit of Asarfi Hospital Limited, Dhanbad



ECHOCARDIOGRAPHY REPORT
Reports

Name: MRS ANAMIKA SINGH

Age: 35

Sex: Female

Date: 25/02/2023

2D & M-MODE MEASUREMENTS

LA Diam	3.4 cm
Ao Diam	2.9 cm
IVSd	0.6 cm
LVIDd	4.6 cm
LVPWd	0.7 cm
IVSs	1.2 cm
LVIDs	3.0 cm

2D & M-MODE CALCULATIONS

EDV(Teich)	100 ml
ESV(Teich)	35 ml
EF(Teich)	65 %
%FS	35 %
SV(Teich)	65 ml
LVd Mass	103.38 g
RWT	0.30

MITRAL VALVE

MV E Vel	0.92 m/s
MV DecT	159 ms
MV Dec Slope	5.8 m/s ²
MV A Vel	0.69 m/s
MV E/A Ratio	1.33

AORTIC VALVE

TRICUSPID VALVE

PULMONARY VALVE

COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-64%)
- NORMAL MITRAL INFLOW PATTERN
- NO MR, AR, NO TR
- IAS, IVS INTACT
- NO CLOT, PE
- IVC NORMAL

IMPRESSION:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-64%)

DR.S.H CHAVAN
(CONSULTANT CARDIOLOGIST)

TECH. SIG

RADIOLOGY REPORT

Reg. No.	41731	Ref. Dr.	SELF
Name	MRS. ANAMIKA SINGH	Study	USG WHOLE ABDOMEN
Age & Sex	35Y /F	Reporting Date	25.02.2023

USG WHOLE ABDOMEN

- LIVER** : Liver is normal in size, shape & 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 10.1 cm in size.
- KIDNEYS** : The right kidney measures 10.8 x 3.9cm. The left kidney measures 10.5 x 4.3cm. 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. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- UTERUS** : Uterus is normal in size, shape & echotexture. It measures 8.6 x 3.3 x 4.4cm. Endometrium is central and measures 6.2 mm.
- OVARIES** : The right ovary measures 3.2 x 1.8cm. The left ovary measures 2.4 x 1.6cm. Both ovaries are normal in shape, size & position.
- OTHERS** : No ascites or retroperitoneal lymphadenopathy is seen.
- IMPRESSION** : • No significant abnormality detected.



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



असर्फी हॉस्पिटल
सबके लिए स्वास्थ्य

Baramuri, P.O. -Bishunpur Polytechnic, Dhanbad (Jharkhand) - 828130
Regd. Office : Phulariland, Kharkaree, Dhanbad (Jharkhand) - 828125
Mob.: 78083 68888
CIN : U85110JH2005PLC011673

RADIOLOGY REPORT



Patient Information			
Patient Name	MRS ANAMIKA SINGH	Patient ID	41731
Age Gender	35Y/FEMALE	Scan Date	FEB 25 2023
Referring Doctor	SELF	Report Date	FEB 25 2023

X-RAY CHEST

FINDINGS

The heart is normal in size and contour.

The aorta is normal.

The mediastinum, hila and pulmonary vasculature are also normal.

Trachea is central. Tracheo-bronchial tree is normal.

No focal lung lesion is seen.

No pneumothorax is seen.

The costophrenic sulci and hemidiaphragms are preserved.

Bony thoracic cage is normal. Both domes of diaphragm are normally placed. No soft tissue abnormality seen.

CONCLUSION

No gross chest abnormality is seen.

RECOMMENDATION

Kindly correlate with other clinical parameters.

Dr. Kajal Agarwal

MD Radiology(MPMC-18472)

Consultant Radiologist

MRS ANAMIKA SINGH 35Y DR SEL | 1

24 HOUR EMERGENCY

© AHL/D/0070/4021/Jan/23



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



Collection Time : 25-02-2023 10:22 am
Receiving Time : 25-02-2023 10:23 am
Reporting Time : 28-02-2023 4:22 pm
Publish Time : 28-02-2023 5:05 pm

Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel

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 4.0 mg/dl 3.4-7.0

Blood Urea Nitrogen (BUN)

Method: Calculated

Machine Name: XL640

Blood Urea Nitrogen (BUN) 19.6 mg/dl Jun-20

Fasting Blood Glucose, Plasma

Method: GOD-POD

Machine Name: XL640

Fasting Blood Glucose, Plasma 96.3 mg/dl 70-110

LIPID PROFILE, SERUM

Method: Spectrophotometry

Machine Name: XL640

Cholesterol, Total (CHOD/PAP) 241.0 H mg/dl 0-200

Triglycerides (Enzymatic) 110.0 mg/dl 0-150

HDL Cholesterol (Enzymatic) 62.6 H mg/dl 0-50

LDL Cholesterol (Calculated) 156.4 H mg/dl 0-100

VLDL Cholesterol (Calculated) 22.0 mg/dl 0-30

GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD

Method: HPLC / Nephelometry

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

HbA1C 4.5 % 4.4-6.2

Interpretation:

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic.

Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when


DR N N SINGH
(PATHOLOGIST)

*This Document is not valid for Medico-Legal purposes.

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s)/Sample(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 to 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/lipemic 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



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130
Ph. No.: 7808368888, 9297862282, 9234681514



असर्फी हॉस्पिटल
सबके लिए स्वास्थ्य



Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel



Collection Time : 25-02-2023 10:22 am
Receiving Time : 25-02-2023 10:23 am
Reporting Time : 26-02-2023 1:32 pm
Publish Time : 26-02-2023 1:33 pm

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

-----|-----|
 Hemoglobin variants, elevated fetal | Any condition that shortens erythrocyte |
 hemoglobin (HbF) and chemically | survival or decreases mean erythrocyte |
 modified derivatives of hemoglobin | age (e.g., recovery from acute blood loss, |
 (e.g. carbamylated Hb in patients | hemolytic anemia, HbSS, HbCC, and HbSC) |
 with renal failure) can affect the | will falsely lower HbA1c test results |
 accuracy of HbA1c measurements | regardless of the assay method used. Iron |
 deficiency anemia is associated with |
 higher HbA1c |

Glucose, PP

Method: GOD POD

Glucose, PP	115.0		mg/dl	70-140
-------------	-------	--	-------	--------

Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine

*This Document is not valid for Medico-Legal purposes.

DR N N SINGH
(PATHOLOGIST)

Condition of Laboratory Testing & Reporting
 (1) It is presumed that the test(s) performed are on the specimen(s) / Sample(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) 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/ lipemic 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

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



असर्फी हॉस्पिटल
सबके लिए स्वास्थ्य

ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130
Ph. No.: 7808368888, 9297862282, 9234681514



Collection Time: 25-02-2023 10:22 am
Receiving Time: 25-02-2023 10:23 am
Reporting Time: 28-02-2023 4:22 pm
Publish Time: 28-02-2023 5:05 pm

Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel

Test Name	Result	Flag	Unit	Reference Range
Liver Function Test (LFT)				
<i>Method: Spectrophotometry</i>				
Bilirubin Total (Diazo)	0.5		mg/dl	0.3-1.2
Bilirubin Direct (Diazo)	0.2		mg/dl	0.00-0.2
Bilirubin Indirect (Calculated)	0.3		mg/dl	0.00-1.0
SGPT (IFCC without PDP)	12.2		U/L	7-50
SGOT (IFCC without PDP)	13.4		U/L	5-45
Alkaline Phosphate (PNP AMP Kinetic)	167.5		U/L	70-306
GGT (Enzymatic)	13.1		U/L	0-55
Protein Total (Biuret)	6.7		g/dl	6.4-8.3
Albumin (BCG)	4.1		g/dl	3.5-5.2
Globulin (Calculated)	2.6		g/dl	2.3-3.5
A : G Ratio (Calculated)	1.5			0.8-2.0

Machine Name: XL-640

*This Document is not valid for Medico-Legal purposes.

DR N N SINGH
(PATHOLOGIST)

Page 3 of 9

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s)/Sample(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) 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/ spmc 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/0066/4068/February/22

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



असर्फी हॉस्पिटल
सबके लिए स्वास्थ्य

ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130
Ph. No. : 7808368888,9297862282,9234681514



Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel



Collection Time: 25-02-2023 10:22 am
Receiving Time: 25-02-2023 10:23 am
Reporting Time: 26-02-2023 1:32 pm
Publish Time : 26-02-2023 1:33 pm

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

Clinical Pathology

Routine Urine Examination; Urine

Method: Microscopic

Appearance	CLEAR			
Colour	STRAW			
Volume	15		ml.	
Protiens	NEGATIVE			
Glucose	NEGATIVE			
PH	6.0			
Specific Gravity	1.015			
Bilirubin	NEGATIVE			
Ketone Bodies	XX			
Bile Salts	XX			
Bile Pigments	XX			
Pus Cells	1-2		/hpf.	
Epithelial Cells	1-2		/hpf.	
R.B.C.	NIL		/hpf.	
Casts	NOT SEEN		/hpf.	
Crystals	NOT SEEN		/hpf.	

*This Document is not valid for Medico-Legal purposes.

DR N N SINGH
(PATHOLOGIST)

Page 4 of 2

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(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) 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/lipemic 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 queues or unexpected test results please call at +91 9297862282, Email- labasarfi@gmail.com

24 HOUR EMERGENCY

© AHL/D/0066/4068/February/22

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



असर्फी हॉस्पिटल
सबके लिए स्वास्थ्य

ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130
Ph. No.: 7808368888,9297862282,9234681514



Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel



Collection Time: 25-02-2023 10:22 am
Receiving Time: 25-02-2023 10:23 am
Reporting Time: 26-02-2023 2:45 pm
Publish Time: 26-02-2023 2:47 pm

Test Name	Result	Flag	Unit	Reference Range
Protein:Creatinine Ratio; Urine				
<i>Method: Immunoturbidimetry, Spectrophotometry</i>				
Protein	17.0		mg/L	
Creatinine	50.0		mg/dl	
PCR	0.34		mg/g	0-0.5

*This Document is not valid for Medico-Legal purposes.

DR N N SINGH
(PATHOLOGIST)

Page 5 of 8

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(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) 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/lipemic 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/0066/4068/February/22

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



Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel



Collection Time: 25-02-2023 10:22 am
Receiving Time: 25-02-2023 10:23 am
Reporting Time: 28-02-2023 4:22 pm
Publish Time: 28-02-2023 5:05 pm

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

Haematology

BLOOD GROUP, ABO & RH TYPING

Method: Agglutination

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

ESR (Erythrocyte Sedimentaion Rate)

Method: Westergren

Machine Name: VES-MATIC 20

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

*This Document is not valid for Medico-Legal purposes.


DR N N SINGH
(PATHOLOGIST)

Page 6 of 9

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) / Sample(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) 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, lipemic 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/0066/4068/February/22

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



Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel

Collection Time: 25-02-2023 10:22 am
Receiving Time: 25-02-2023 10:23 am
Reporting Time: 28-02-2023 4:22 pm
Publish Time : 28-02-2023 5:05 pm

Test Name	Result	Flag	Unit	Reference Range
Complete Blood Count (CBC)				
<i>Method: Electronical Impedence</i>				
			<i>Machine Name: Sysmex 6 part</i>	
Hemoglobin	11.8	L	g/dl	13-18
Total Leukocyte Count (TLC)	5,600		/cu-mm	4000-11000
PCV	36.1	L	%	40-50
MCH	27.5		Pg	27-31
MCHC	32.5		g/dl	31.5-35.5
Red Cell Distribution Width (RDW)	14.5	H	%	11.6-14
Neutrophils	60		%	55-75
Lymphocytes	32	H	%	15-30
Eosinophils	03		%	1-6
Monocytes	05		%	2-10
Basophils	00		%	0-1
RBC Count	4.28	L	million/mm ³	4.5-5.5
Mean Corpuscular Volume (MCV)	84.6		fL	83-101
Platelet Count	2.42		lakhs/cumm	1.5-4.5

*This Document is not valid for Medico-Legal purposes.

DR N N SINGH
(PATHOLOGIST)

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s)/Sample(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) 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/lipemic 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 queues or unexpected test results please call at +91 9297862282, Email: labasarfi@gmail.com

Page 7 of 9



Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel



Collection Time: 25-02-2023 10:22 am
Receiving Time: 25-02-2023 10:23 am
Reporting Time: 28-02-2023 4:22 pm
Publish Time: 28-02-2023 5:05 pm

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

Immunology and Serology

THYROID PROFILE, TOTAL, SERUM


Method: ECLIA

Machinè Name: Vitros ECI

T3, Total	1.17		ng/ml	0.8-2.0
T4, Total	8.19		µg/dL	5.10-14.10
TSH (Ultrasensitive)	1.29		mIU/mL	0.27-4.2

Interpretation:

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations.
2. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
3. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.


DR N N SINGH
(PATHOLOGIST)

*This Document is not valid for Medico-Legal purposes.

Page 8 of 9

Condition of Laboratory Testing & Reporting

(1)It is presumed that the test(s) performed are on the specimen(s) /Sample(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)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/lipemic 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/0066/4068/February/22

"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, Bishnupur Polytechnic, Dhanbad 828 130
Ph. No.: 7808368888,9297862282,9234681514



Name : MRS. ANAMIKA SINGH
Age / Sex : 35 Yrs / Female
Doctor :
Reg. No. : FEB23-41731
Pat. Type : Mediwheel



Collection Time: 25-02-2023 10:22 am
Receiving Time: 25-02-2023 10:23 am
Reporting Time: 28-02-2023 4:22 pm
Publish Time : 28-02-2023 5:05 pm

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

Microbiology

Culture & Sensitivity (Urine)

Method: vitek 2 compact

Machine Name: vitek 2 compact

Organism Isolated

NO GROWTH OF ANY ORGANISM

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

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

*This Document is not valid for Medico-Legal purposes.

DR N N SINGH
(PATHOLOGIST)

Page 9 of 9

Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s)/Sample(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) 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/filipemic 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/0066/4068/February/22

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