

011-41195959

Dear Manipal Hospital

We have received a booking request for the details are following. Please provide your confirmation by clicking on the yes button.

Are you sure to confirm the booking?

Name : MR. SOLANKI DIGAMBER KUMAR

Package Name : Mediwheel Full Body Health Checkup Female Above 40

Package Code : PKG10000477

Location : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment

Contact Details : 9920542632

E-mail id : DIGAMBER.SOLANKI@bankofbaroda.com

Booking Date : 18-01-2024

Appointment Date : 25-01-2024

Member Information		
Booked Member Name	Age	Gender
Rekha solanki	41 year	Female

Please login to your account to confirm the same. Also you mail us for confirmation

Hospital Package Name : Mediwheel Full Body Health Checkup Female Above 40

User Package Name : Mediwheel Full Body Health Checkup Female Above 40

Are you sure to confirm the booking?

22 Tests included in this Package

- Mammography
- Stool Test
- Gynae Consultation
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Urine analysis
- CBC
- Lipid Profile
- Kidney Profile
- Liver profile

Thanks,
Mediwheel Team

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भारत सरकार

GOVERNMENT OF INDIA

रेखा सोलंकी
Rekha Solanki

जन्म वर्ष / Year of Birth : 1983
महिला / Female



4132 1870 4891

आधार – आम आदमी का अधिकार

Rekha



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता: W/O दिगम्बर कुमार सोलंकी,
मकान नं. 258, डी. एम. रोड, अवास
विक्रम कॉलोनी, बुलंदशहर, बुलंदशहर,
बुलंदशहर, उत्तर प्रदेश, 203001

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Bulandshahr, Uttar Pradesh,
203001



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www.uidai.gov.in

P.O. Box No. 1947,
Bengaluru-560 001



LABORATORY REPORT

Name	: MRS REKHA SOLANKI	Age	: 41 Yr(s) Sex :Female
Registration No	: MH011787855	Lab No	: 202403002986
Patient Episode	: H18000001957	Collection Date	: 20 Mar 2024 09:30
Referred By	: HEALTH CHECK MGD	Reporting Date	: 20 Mar 2024 12:44
Receiving Date	: 20 Mar 2024 09:30		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
			Specimen Type : Serum
THYROID PROFILE, Serum			
T3 - Triiodothyronine (ELFA)	0.830	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	5.260	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	16.410	# μ IU/mL	[0.250-5.000]

NOTE:

TSH stimulates the thyroid gland to produce the main thyroid hormones T3 and T4. In cases of hyperthyroidism TSH level is severely inhibited and may even be undetectable. In rare forms of high-origin hyperthyroidism, the TSH level is not reduced, since the negative-feedback control of the thyroid hormones has no effect.

In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low.

The TSH assay aids in diagnosing thyroid or hypophysial disorders.

The T4 assay aids in assessing thyroid function, which is characterized by a decrease in thyroxine levels in patients with hypothyroidism and an increase in patients with hyperthyroidism.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.



LABORATORY REPORT

Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 09:30

Age : 41 Yr(s) Sex :Female
Lab No : 202403002986
Collection Date : 20 Mar 2024 09:30
Reporting Date : 20 Mar 2024 14:18

BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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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NOTE:

- Abnormal Values

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

Dr. Charu Agarwal
Consultant Pathologist



Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 09:30
Age : 41 Yr(s) Sex :Female
Lab No : 202403002986
Collection Date : 20 Mar 2024 09:30
Reporting Date : 20 Mar 2024 12:44

HAEMATOTOLOGY

BIOLOGICAL REFERENCE INTERVAL

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)			
SPECIMEN-EDTA Whole Blood			
RBC COUNT (IMPEDENCE)	3.87	millions/cumm	[3.80-4.80]
HEMOGLOBIN	12.1	g/dl	[12.0-15.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	38.0	%	[36.0-46.0]
MCV (DERIVED)	98.2	fL	[83.0-101.0]
MCH (CALCULATED)	31.3	pg	[25.0-32.0]
MCHC (CALCULATED)	31.8	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.4	%	[11.6-14.0]
Platelet count	194	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	13.00	fL	
WBC COUNT (TC) (IMPEDENCE)	8.32	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT			
(VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	60.0	%	[40.0-80.0]
Lymphocytes	25.0	%	[20.0-40.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	8.0 #	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
ESR	42.0 #	mm/1sthour	[0.0-



Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 10:28

Age : 41 Yr(s) Sex :Female
Lab No : 202403002986
Collection Date : 20 Mar 2024 10:28
Reporting Date : 20 Mar 2024 12:38

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	6.5	(4.6-8.0)
Specific Gravity	1.005	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	NIL /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	



LABORATORY REPORT

Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 09:30

Age : 41 Yr(s) Sex :Female
Lab No : 202403002986
Collection Date : 20 Mar 2024 09:30
Reporting Date : 20 Mar 2024 16:39

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin Specimen: EDTA HbA1c (Glycosylated Hemoglobin) Method: HPLC	5.2	%	[0.0-5.6] 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) 103 mg/dl

Comments : HbA1c 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 Method:Oxidase,esterase, peroxide	224 #	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	170 #	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500 [35-65]
HDL- CHOLESTEROL Method : Enzymatic Immunoimhibition	59	mg/dl	[0-35]
VLDL- CHOLESTEROL (Calculated)	34	mg/dl	[<120.0]
CHOLESTEROL, LDL, CALCULATED	131.0 #	mg/dl	Near/ Borderline High:130-159 High Risk:160-189

Above optimal-100-129



LABORATORY REPORT

Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 09:30

Age : 41 Yr(s) Sex :Female
Lab No : 202403002986
Collection Date : 20 Mar 2024 09:30
Reporting Date : 20 Mar 2024 12:41

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	3.8		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.2		<3 Optimal 3-4 Borderline >6 High Risk

Note:
Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

KIDNEY PROFILE

Specimen: Serum			
UREA	23.6	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	11.0	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	0.78	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization			
URIC ACID	3.4 #	mg/dl	[4.0-8.5]
Method:uricase PAP			
SODIUM, SERUM	135.90 #	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	3.97	mmol/L	[3.60-5.10]
SERUM CHLORIDE	104.3	mmol/L	[101.0-111.0]
Method: ISE Indirect			



LABORATORY REPORT

Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 09:30

Age : 41 Yr(s) Sex :Female
Lab No : 202403002986
Collection Date : 20 Mar 2024 09:30
Reporting Date : 20 Mar 2024 12:40

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
eGFR (calculated)	94.7	ml/min/1.73sq.m	[>60.0]
<p>Technical Note eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. 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.</p>			

LIVER FUNCTION TEST

BILIRUBIN - TOTAL Method: D P D	0.61	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.10	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.51	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.70	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.47	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.20	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.38		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	21.00	U/L	[0.00-40.00]



LABORATORY REPORT

Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 09:30

Age : 41 Yr(s) Sex :Female
Lab No : 202403002986
Collection Date : 20 Mar 2024 09:30
Reporting Date : 20 Mar 2024 12:43

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	25.10	U/L	[14.00-54.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	78.0	IU/L	[32.0-91.0]
GGT	33.0	U/L	[7.0-50.0]

Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

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

Dr. Charu Agarwal
Consultant Pathologist

**LABORATORY REPORT**

Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 09:29

Age : 41 Yr(s) Sex :Female
Lab No : 202403002987
Collection Date : 20 Mar 2024 09:29
Reporting Date : 20 Mar 2024 12:44

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	89.0	mg/dl	[70.0-110.0]

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%).
Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortical insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia),
Drugs-
insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

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

Dr. Charu Agarwal
Consultant Pathologist



LABORATORY REPORT

Name : MRS REKHA SOLANKI
Registration No : MH011787855
Patient Episode : H18000001957
Referred By : HEALTH CHECK MGD
Receiving Date : 20 Mar 2024 13:57

Age : 41 Yr(s) Sex :Female
Lab No : 202403002988
Collection Date : 20 Mar 2024 13:57
Reporting Date : 20 Mar 2024 16:06

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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PLASMA GLUCOSE

Specimen: Plasma			
GLUCOSE, POST PRANDIAL (PP), 2 HOURS	138.0	mg/dl	[80.0-140.0]
Method: Hexokinase			

Note:
Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption, post exercise

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

Dr. Alka Dixit Vats
Consultant Pathologist

**RADIOLOGY REPORT**

NAME	MRS Rekha SOLANKI	STUDY DATE	20/03/2024 10:26AM
AGE / SEX	41 y / F	HOSPITAL NO.	MH011787855
ACCESSION NO.	R7088148	MODALITY	US
REPORTED ON	20/03/2024 10:43AM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS**FINDINGS**

LIVER: Liver is normal in size (measures 139 mm), shape and echotexture. Rest normal.
 SPLEEN: Spleen is normal in size (measures 84 mm), shape and echotexture. Rest normal.
 PORTAL VEIN: Appears normal in size and measures 9 mm.
 COMMON BILE DUCT: Appears normal in size and measures 4 mm.
 IVC, HEPATIC VEINS: Normal.
 BILIARY SYSTEM: Normal.
 GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.
 PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.
 KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.
 Right Kidney: measures 92 x 42 mm.
 Left Kidney: measures 100 x 44 mm.
 PELVI-CALYCEAL SYSTEMS: Compact.
 NODES: Not enlarged.
 FLUID: Nil significant.
 URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.
 UTERUS: Uterus is anteverted, bulky in size (measures 75 x 68 x 57 mm) but normal in shape and shows coarse myometrial echotexture along with an intramural fibroid is seen in anterior myometrium measuring 36 x 30 mm but no increased vascularity seen within and not seen in indenting the endometrium. Another intramural fibroid is seen in posterior myometrium measuring 39 x 36 mm but no increased vascularity seen within and not seen in indenting the endometrium.
 Endometrial thickness measures 10.4 mm. Cervix appears normal.
 OVARIES: Both ovaries are normal in size, shape and echotexture. Rest normal.
 Right ovary measures 29 x 28 x 12 mm with volume 5.2 cc.
 Left ovary measures 27 x 26 x 22 mm with volume 7.9 cc.
 BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Bulky uterus with coarse myometrial echotexture along with two intramural fibroids.

Recommend clinical correlation.



Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS
CONSULTANT RADIOLOGIST

*****End Of Report*****



NAME	MRS Rekha SOLANKI	STUDY DATE	20/03/2024 9:41AM
AGE / SEX	41 y / F	HOSPITAL NO.	MH011787855
ACCESSION NO.	R7088147	MODALITY	CR
REPORTED ON	20/03/2024 9:46AM	REFERRED BY	HEALTH CHECK MGD

XR- CHEST PA VIEW**FINDINGS:**

LUNGS: Normal.
TRACHEA: Normal.
CARINA: Normal.
RIGHT AND LEFT MAIN BRONCHI: Normal.
PLEURA: Normal.
HEART: Normal.
RIGHT HEART BORDER: Normal.
LEFT HEART BORDER: Normal.
PULMONARY BAY: Normal.
PULMONARY HILA: Normal.
AORTA: Normal.
THORACIC SPINE: Normal.
OTHER VISUALIZED BONES: Normal.
VISUALIZED SOFT TISSUES: Normal.
DIAPHRAGM: Normal.
VISUALIZED ABDOMEN: Normal.
VISUALIZED NECK: Normal.

IMPRESSION:

No significant abnormality noted.
Recommend clinical correlation.

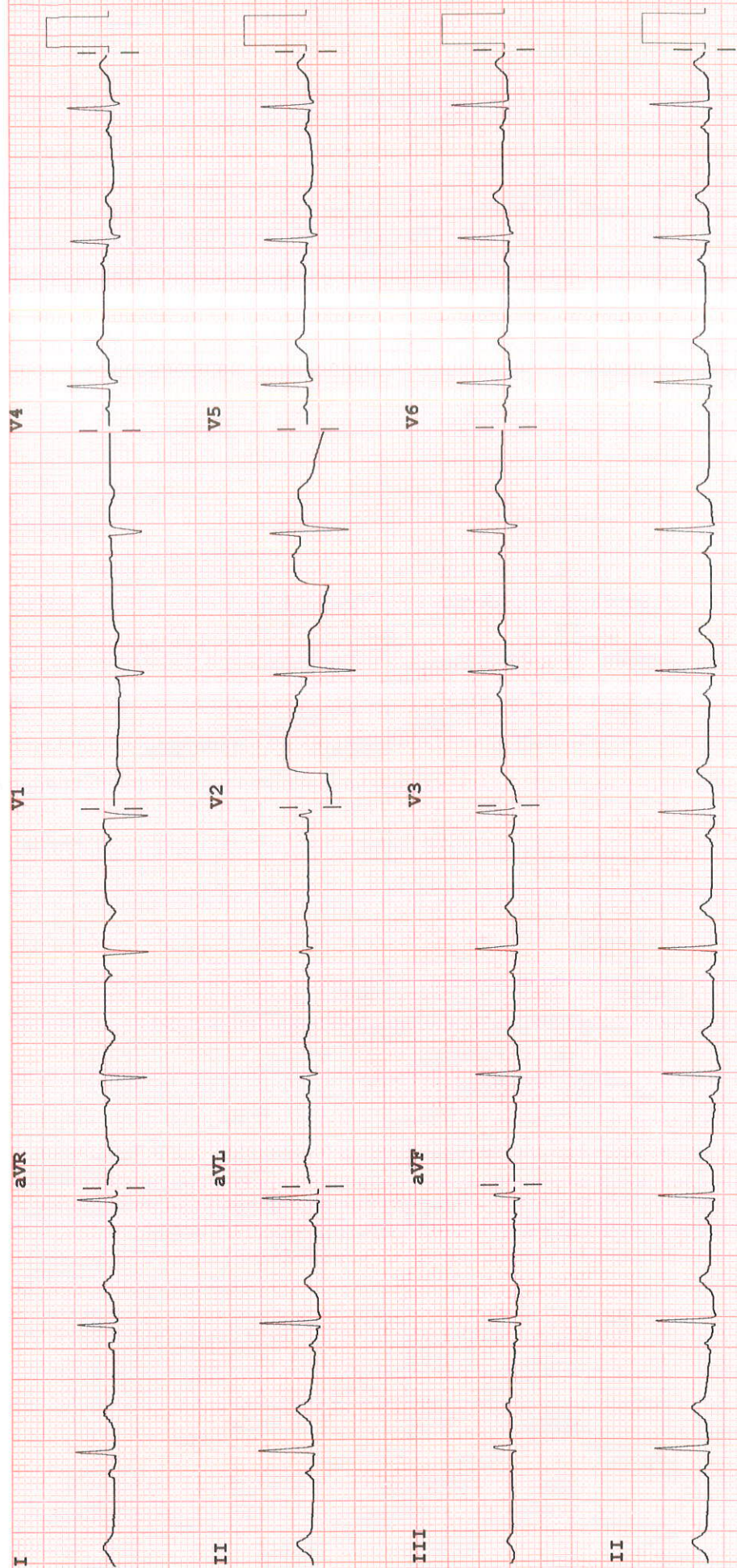


Dr. Monica Shekhawat MBBS, DNB
CONSULTANT RADIOLOGIST

*****End Of Report*****

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



PH100B CL P?

F 60~ 0.15-100 Hz

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

Dev: