

HEALTH CHECK UP

Name : Kunal Shaetvi

Date : 9/2/24

Age : 40y

Sex : Male / Female

Marital status : Married / Single

PERSONAL HISTORY

Habits : Smoking / Tobacco & Snuff / Alcohol NO

Drug allergy if any :

Medical : ALL

Surgical :

Height 180 cm Weight 95 Kg. BP 140/90 Pulse 71W

Vision : Rt 6/9 Lt 6/6 With Spectacles Rt Lt

Colour Vision : Normal / Abnormal Near Vision NG / RE

FAMILY HISTORY

Father Mother Siblings

CVS : Heart Sound Normal Murmurs Absent Thrills Absent

RS : Rate /mt Breath sounds Normal Adventitious Absent

ABDOMEN : Tenderness Absent Rigidity Absent Bowel sound Normal

Liver NAD Kidney NAD Hernia Absent

CNS : Cranial Nerves NAD Sensory System..... NAD Motor System..... NAD

ENT NAD

Remarks

Dr. Bharti Jeswani
MBBS

Dr. Seema Kale
MBBS, MD

Dr. S. K. Suri
MBBS

Dr. Meenakshi
MBBS

HOME SAMPLE COLLECTION FACILITY AVAILABLE

Licensee : Bharti Medicare Pvt. Ltd. The Apollo Clinic, C-70, Major Sudesh Kumar Marg, Opp. Madhav Park, Near Main Market, Rajouri Garden, New Delhi-110 027
Phone : (011) 2591 8222 / 8333 / 8444, 9811061009, E-mail : rajourigarden@theapolloclinic.com, Website : www.apolloclinicrajourigarden.com

MSME UAM NO. : DL11E0021531



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. SHASTRI KUNAL
EC NO.	171834
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	NEW DELHI, GOVERNMENT RELATIONS
BIRTHDATE	05-01-1984
PROPOSED DATE OF HEALTH CHECKUP	09-03-2024
BOOKING REFERENCE NO.	23M171834100098450E

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 **08-03-2024** 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 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))

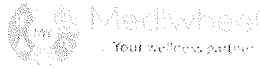
Health Check up Booking Request(bobE14389), Beneficiary Code-142504



Mediwheel
to me, customers care

Fri, Mar 8, 11:49 AM (20 hours ago)

Reply



011-41195959

Dear Apollo Bharti Apollo Bharti Medicare Pvt. Ltd.

We have received a booking request with the following details. Provide your confirmation by clicking on the Yes button.

You confirm this booking?

Name : MR. SHASTRI KUNAL
Contact Details : 920000000000
Hospital Package Name : Mediwheel Full Body Health Checkup Male Below 40
Location : C70, Opp. Madhav Park, Major Sudesh Kumar Marg -110027
Appointment Date : 09-03-2024

Member Information		
Booked Member Name	Age	Gender
MR. SHASTRI KUNAL	39 year	Male

Tests included in this Package -

- Stool Test
- 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
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile

Thanks,
Mediwheel Team
Please Download Mediwheel App



You have received this mail because your e-mail ID is registered with Arcofemi Healthcare Limited This is a system-generated e-mail

ID: 22
kunal shasri
Male 40Years
180cm 95kg 140/90 mmHg
Req. No. :
Room No. : 5

09-03-2024 11:53:16
HR : 71 bpm
P : 116 ms
PR : 128 ms
QRS : 94 ms
QT/QTcBz : 386/420 ms
P/QRS/T : 50/-17/-3 °
RV5/SV1 : 0.624/0.155 mV

Diagnosis Information:
Sinus rhythm
Inferior T wave abnormality is nonspecific
Borderline ECG

Report Confirmed by:



NAME: MR KUNAL SHASTRI
REF

AGE: 40 / Sex / M
DATE 09//03 /2024

ECHO ADULT (COLOUR DOPPLER)

DIMENSIONS			NORMAL			DIMENSIONS			NORMAL		
Ao (ed)	34.7 mm		(1.5 cm/m2)			IVS (Ed)	11.0 mm		(0.6-1.2cm)		
LA (es)	39.4 mm		(1.5 cm/m2)			LVPW (Ed)	10.0 mm		(.6-1.1cm)		
RVID (ed)	Normal		(0.9cm/m2)			EF	60.0 %		(0.62-0.85)		
LVID (ed)	50.0 mm		(2.6-3.4 cm/m2)			FS	30.0				
LVID (es)	30.0 mm										

MORPHOLOGICAL DATA

Mitral Valve	Normal	Interatrial Septum	Normal
Aortic Valve	Normal	Interventricular Septum	Normal
Tricuspid Valve	Normal	Pulmonary Artery	Normal
Pulmonary Valve	Normal	Aorta	Normal
Right Ventricle	Normal	Right Atrium	Normal
Left Ventricle	Normal	Left At	MILDLY DILATED
Pericardium	Normal		
Colour Doppler	TRACE MR NO PAH, IVC NORMAL.		
Wall motion	Normal		

IMPRESSION : TRACE MR, LA MILDLY DILATED, GRADE II LV DIASTOLIC DYSFUNCTION, NO RWMA, LVEF ~ 60 %
RV FUNCTION NORMAL, NOPAH, IVC NORMAL.


DR SEEMA KALE MD
SEN. (PHYSICIAN)

Patient Name : Mr. Kunal Shastri
UHID/MR No. : FRAJ.0000243492
Visit Date : 09-03-2024 11:55
Sample Collected on : 09-03-2024 12:00
Ref Doctor : SELF
Emp/Auth/TPA ID : drtrgto65989+9+
Sponsor Name : MEDIWHEELS HEALTH CARE

Age / Gender : 40Y/Male
OP Visit No : FRAJOPV119047
Reported on : 09-03-2024 15:48
Specimen : Whole Blood (Edta)
Pres Doctor: :


DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
COMPLETE BLOOD COUNT			
Hb (Haemoglobin) Method: Non Cyanide	14.7	13 - 18	gm/dl
PCV/Haematocrit Method: RBC pulse height detect	46.1	40 - 50	%
ESR. Method: Westergren's Method	08	0 - 20	mm/1st Hr
TLC Method: DC Detection Method	5600	4000 - 10000	/cumm.
RBC COUNT. Method: DC Detection Method	5.0	5 - 6	Million/cmm
PLATELET COUNT Method: DC Detection Method	1.62	1.5 - 4.1	lakh/cumm.
MCV Method: Derived	91.3	77 - 98	fl
MCH Method: Derived	29.1	27 - 32	pg
MCHC Method: Derived	31.9	31.5 - 34.5	gm/dl
NEUTROPHIL Method: Microscopy	59	40 - 70	%
LYMPHOCYTE Method: Microscopy	34	20 - 40	%
EOSINOPHIL Method: Microscopy	04	1.0 - 6.0	%
MONOCYTE Method: Microscopy	03	2.0 - 10.0	%
BLOOD GROUP AND RH TYPE			
ABO Group	B		
RH	Positive		

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
Yogita


Dr. Prashant Purwar
MBBS, DCP
Consultant Pathologist

• CLINICAL CORRELATION IS ESSENTIAL FOR FINAL DIAGNOSIS. • IF THE TESTS RESULTS ARE UNEXPECTED PLEASE CONTACT THE LABORATORY.
• ALL THE CONGENITAL ANAMOLIES IN THE FETUS MAY NOT BE DIAGNOSED IN ULTRASONOGRAPHY. • THIS REPORT IS NOT VALID FOR MEDICOLEGAL PURPOSE.
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 UHID/MR No. : FRAJ.0000243492
 Visit Date : 09-03-2024 11:55
 Sample Collected on : 09-03-2024 12:00
 Ref Doctor : SELF
 Emp/Auth/TPA ID : drtrgto65989+9+
 Sponsor Name : MEDIWHEELS HEALTH CARE

Age / Gender : 40Y/Male
 OP Visit No : FRAJOPV119047
 Reported on : 10-03-2024 13:45
 Specimen : Plasma(Fluoride)
 Pres Doctor: :


DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
GLUCOSE - (FASTING)			
GLUCOSE - (FASTING) Method: (GOD-POD).	93	70 - 110	mg/dL
GLUCOSE - (POST PRANDIAL)			
GLUCOSE - (POST PRANDIAL) Method: (GOD-POD)	109	70-140	mg/dl
GLYCOSYLATED HEMOGLOBIN (HBA1C)			
GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD Method: BORONATE AFFINITY	5.5	4.2 - 6.0	%
LIPID PROFILE TEST (PACKAGE)			
CHOLESTEROL Method: CHOD - PAP	278*	Desirable < 200 Borderline High : 200-239 High : > 240	mg/dl
Triglyceride Method: GPO-PAP	205*	50-200	mg/dl
HDL Method: DIRECT	64.0*	30 - 50	mg/dl
LDL Method: DIRECT	173.0*	60 - 100	mg/dl
VLDL Method: Calculated	41.0*	<40	mg/dl
CHOLESTEROL / HDL RATIO Method: Calculated.	4.3	0 - 4.5	
Thyroid Profile 2(Free T4, Free T3 And TSH)			
Serum FT3	4.3	3.2 - 5.9	pmol/l
Serum FT4	14.7	10.6 - 21.0	pmol/l
Serum TSH	4.0	0.38 - 5.0	uIU/ml

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Patient Name : Mr. Kunal Shastri
 UHID/MR No. : FRAJ.0000243492
 Visit Date : 09-03-2024 11:55
 Sample Collected on : 09-03-2024 12:00
 Ref Doctor : SELF
 Emp/Auth/TPA ID : dtrgto65989+9+
 Sponsor Name : MEDIWHEELS HEALTH CARE

Age / Gender : 40Y/Male
 OP Visit No : FRAJOPV119047
 Reported on : 10-03-2024 13:47
 Specimen : Serum
 Pres Doctor: :


DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
LIVER FUNCTION TEST (PACKAGE)			
BILIRUBIN - TOTAL. Method: Jendrassik	0.54	0.1 - 1.3	mg/dl
Bilirubin (Direct)-Serum Method: Diazo.	0.11	0 - 0.3	mg/dl
A/G Method: Calculated	1.5	1.0 - 2.0	
BILIRUBIN - INDIRECT. Method: Calculated.	0.43	<1.1	
SGOT /AST Method: IFCC (With P5P)	33.6	0 - 35	U/L
SGPT/ALT Method: IFCC (With P5P)	51.3*	0 - 45	U/L
ALKALINE PHOSPHATE Method: AMP BUFFER	81.9	30 - 117	U/L
GGT. Method: SZAZ	47.7	10 - 50	U/L
TOTAL PROTEIN Method: Biuret	7.4	5.8-8.0	g/dl
ALBUMIN Method: BCG	4.5	3.7-5.2	g/dl
GLOBULIN Method: Calculated	2.9	2.5 - 3.5	mg/dL

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Sponsor Name : MEDIWHEELS HEALTH CARE

Age / Gender : 40Y/Male
OP Visit No : FRAJOPV119047
Reported on : 10-03-2024 13:48
Specimen : Serum
Pres Doctor: :


DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
KFT - RENAL PROFILE-SERUM			
UREA Method: Urease	12.9	10-50	mg/dl
Creatinine Method: Jaffe	0.98	0.5 - 1.3	mg/dl
Uric Acid Method: Uricase	4.9	3.5 - 7.2	mg/dl
Sodium(Na) Method: ISE	141.4	136 - 142	mmol/L
Potassium(K) Method: ISE	4.2	3.8 - 5.0	mmol/L
Chloride(Cl) Method: ISE	101.8	95 - 103	mmol/L
Calcium. Method: OCPC	9.8	9.2 - 11.0	mg/dl
Phosphorus Method: Molybdate UV	3.5	2.3 - 4.7	mg/dl

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Visit Date : 09-03-2024 11:55
Sample Collected on : 09-03-2024 12:00
Ref Doctor : SELF
Emp/Auth/TPA ID : dtrrgto65989+9+
Sponsor Name : MEDIWHEELS HEALTH CARE

Age / Gender : 40Y/Male
OP Visit No : FRAJOPV119047
Reported on : 09-03-2024 16:04
Specimen : Urine
Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

URINE ROUTINE EXAMINATION


URINE EXAMINATION TEST REPORT

Test Name	Observed Value	Unit	Reference Range
Urine R/M Examination			
Quantity	30	ml.	
Colour	Pale Yellow		Pale Yellow
Transparency	Clear		Clear
Urine Specific Gravity	1.020		1.005 - 1.030
Dipstick			
pH	6.5		5.5 - 7.5
Dipstick / pH paper			
Chemical Examination			
Protein	Nil		Nil
Dipstick/Heat & acetic acid			
Sugar	Nil		Nil
Dipstick/Benedicts reagent			
Microscopic Examination			
Pus Cells	2-4	/HPF	1-2
RBC'S	Nil	/HPF	Nil
Casts	Nil	/HPF	Nil
Crystals	Nil		Nil
Epithelial Cells	Occasional	/HPF	1-2
Bacteria	Nil	/HPF	Nil

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Dr_Prashant


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MSME UAM NO. : DL11E0021531

Patient Name : Mr. Kunal Shastri
Age/Sex : 40 Y/M
Pres Doctor :
Ref.by : SELF

MR No : FRAJ.0000243492
Visit No : FRAJOPV119047
Bill Date : 09-03-2024 11:57
Report Date : 10-03-2024 11:46

X-RAY CHEST PA VIEW

- Both lungs fields do not show any active parenchymal lesion.
- Both costophrenic angles are normal.
- B/L hila appear normal in size & density.
- Both domes of diaphragm are normal.
- Cardiac silhouette appears normal.
- Visualised soft tissues and bony cage appear normal.

IMPRESSION:- NORMAL STUDY.

To be correlate clinically.


Dr. Rahul Gera
Consultant Radiologist.