

#### 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. MAVI VEDPAL     |
| EC NO.                  | 109224              |
| DESIGNATION             | HEAD PEON           |
| PLACE OF WORK           | GHAZIABAD           |
| BIRTHDATE               | 02-07-1995          |
| PROPOSED DATE OF HEALTH | 13-05-2023          |
| CHECKUP                 |                     |
| BOOKING REFERENCE NO.   | 23J109224100059234E |

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 **09-05-2023** 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 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

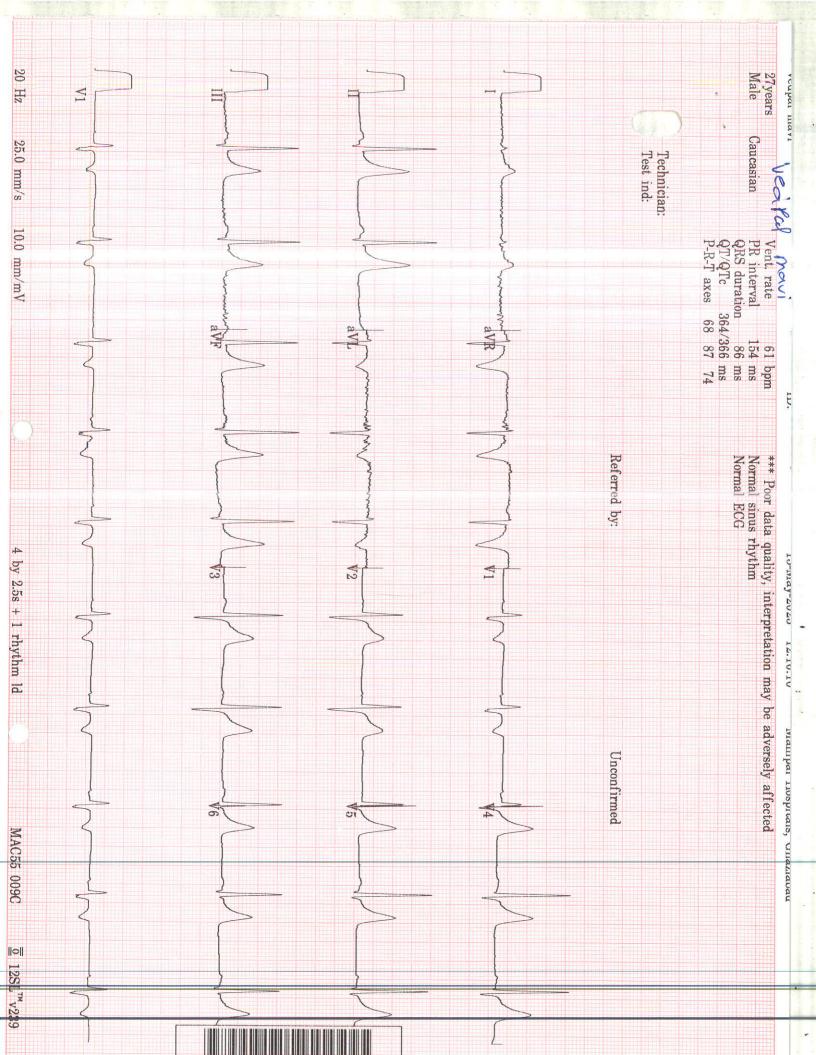
(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcolem: Healthcare Limited))



### **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                 |











#### TMT INVESTIGATION REPORT

Patient Name : Mr VEDPAL MAVI

Location

: Ghaziabad

Age/Sex

: 27 Year(s)/male

Visit No

: V0000000001-GHZB

MRN No

Order Date

: 13/05/2023

Ref. Doctor : HCP

Report Date

: 13/05/2023

**Protocol** 

: Bruce

**MPHR** 

: 193BPM

**Duration of exercise** Reason for termination : THR achieved

: 8min 49sec

85% of MPHR

: 164BPM

Peak HR Achieved : 165BPM

Blood Pressure (mmHg) : Baseline BP : 110/82mmHg

% Target HR **METS** 

: 85% : 10.1METS

Peak BP

: 140/82mmHg

| STAGE     | TIME<br>(min) | H.R<br>(bpm) | BP<br>(mmHg) | SYMPTOMS | ECG CHANGES        | ARRHYTHMIA |
|-----------|---------------|--------------|--------------|----------|--------------------|------------|
| PRE- EXC. | 0:00          | 85           | 110/82       | Nil      | No ST changes seen | Nil        |
| STAGE 1   | 3:00          | 103          | 120/82       | Nil      | No ST changes seen | Nil        |
| STAGE 2   | 3:00          | 124          | 130/82       | Nil      | No ST changes seen | Nil        |
| STAGE 3   | 2:49          | 165          | 140/82       | Nil      | No ST changes seen | Nil        |
| RECOVERY  | 2:01          | 81           | 120/82       | Nil      | No ST changes seen | Nil        |

#### **COMMENTS:**

- No ST changes in base line ECG.
- No ST changes during exercise and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Good effort tolerance.

#### **IMPRESSION:**

Treadmill test is negative for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh

MD, DM (CARDIOLOGY), FACC MD, DNB (CARDIOLOGY), MNAMS MD Sr. Consultant Cardiology

Dr. Abhishek Singh

Dr. Sudhanshu Mishra

Sr.Consultant Cardiology

Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002

P: 0120-616 5666

Page 1 of 2

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017 P +91 80 4936 0300 E info@manihospitals.com www.maninalhospitals.com



## RADIOLOGY REPORT

| Name       | Vedpal MAVI          | Modality     | US                  |
|------------|----------------------|--------------|---------------------|
| Patient ID | MH010992466          | Accession No | R5533016            |
| Gender/Age | M / 27Y 10M 11D      | Scan Date    | 13-05-2023 11:44:38 |
| Ref. Phys  | Dr. HEALTH CHECK MGD | Report Date  | 13-05-2023 12:21:11 |

#### USG ABDOMEN & PELVIS

#### **FINDINGS**

LIVER: Liver is enlarged in size (measures 154 mm) but normal in shape and echotexture. Rest normal.

SPLEEN: Spleen is normal in size (measures 96 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 12.1 mm.

COMMON BILE DUCT: Appears normal in size and measures 3.3 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 95 x 44 mm. Left Kidney: measures 93 x 42 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. PROSTATE: Prostate is normal in size, shape and echotexture. It measures 34 x 27 x 27 mm with volume 13 cc. Prostatic parenchymal calcification is seen. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

#### **IMPRESSION**

Marica

-Hepatomegaly (ADV: LFT Correlation).

Recommend clinical correlation.

Dr. Monica Shekhawat, MBBS, DNB,

Consultant Radiologist, Reg No MCI 11 10887

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## RADIOLOGY REPORT

| Name       | Vedpal MAVI          | Modality     | DX                  |
|------------|----------------------|--------------|---------------------|
| Patient ID | MH010992466          | Accession No | R5533015            |
| Gender/Age | M / 27Y 10M 11D      | Scan Date    | 13-05-2023 11:28:17 |
| Ref. Phys  | Dr. HEALTH CHECK MGD | Report Date  | 13-05-2023 12:27:22 |

#### 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.

Marica

Dr. Monica Shekhawat, MBBS, DNB, Consultant Radiologist, Reg No MCI11 10887

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Name

MR VEDPAL MAVI

Age

27 Yr(s) Sex :Male

Registration No

MH010992466

Lab No

32230504802

Patient Episode

H18000000558

**Collection Date:** 

13 May 2023 19:34

Referred By

. 1110000000000

Reporting Date :

14 May 2023 09:33

Receiving Date

: HEALTH CHECK MGD : 13 May 2023 20:06

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Specimen Type : Serum

#### THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA) 1.23 ng/ml [0.70-2.04]
T4 - Thyroxine (ECLIA) 9.07 µg/dl [4.60-12.00]
Thyroid Stimulating Hormone (ECLIA) 1.010 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. Neelam Singal

CONSULTANT BIOCHEMISTRY

Neelan Sugar

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Name

MR VEDPAL MAVI

MH010992466

Registration No Patient Episode

H18000000558

Referred By

HEALTH CHECK MGD

**Receiving Date** 

13 May 2023 11:57

Age

27 Yr(s) Sex :Male

Lab No

202305001536

**Collection Date:** 

13 May 2023 11:02

Reporting Date:

13 May 2023 17:13

#### HAEMATOLOGY

TEST

Eosinophils

Basophils

ESR

RESULT

UNIT

양

00

/1sthour

BIOLOGICAL REFERENCE INTERVAL

| COMPLETE BLOOD COUNT (AUTOMAT  | ED)   | SPECIMEN-EDTA Whole               | Blood  |
|--|---|-----------------------------------|--|
| RBC COUNT (IMPEDENCE) HEMOGLOBIN Method:cyanide free SLS-color                             | 4.85<br>15.1<br>imetry                        | millions/cumm<br>g/dl             | [4.50-5.50]<br>[12.0-16.0]   |
| HEMATOCRIT (CALCULATED) MCV (DERIVED) MCH (CALCULATED) MCHC (CALCULATED) RDW CV% (DERIVED) | 42.9<br>88.5<br>31.1<br><b>35.2 #</b><br>12.3 | %<br>fL<br>pg<br><b>g/dl</b><br>% | [40.0-50.0]<br>[83.0-101.0]<br>[27.0-32.0]<br>[31.5-34.5]<br>[11.6-14.0] |
| Platelet count MPV(DERIVED)  | 211<br>11.4                                   | $\times$ 10 $^{3}$ cells/cumm     | [150-400]  |
| WBC COUNT (TC) (IMPEDENCE) DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)                  | 8.21  | $\times$ 10 $^{3}$ cells/cumm     | [4.00-10.00]   |
| Neutrophils<br>Lymphocytes<br>Monocytes  | <b>35.0 #</b> 37.0 6.0                        | <b>%</b><br>©<br>©                | [40.0-80.0]<br>[17.0-45.0]<br>[2.0-10.0]                                 |

22.0 #

0.0

5.0

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[2.0-10.0]

[2.0-7.0]

[0.0-2.0]

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Name

MR VEDPAL MAVI

MH010992466

Registration No Patient Episode

H18000000558

Referred By

HEALTH CHECK MGD

**Receiving Date** 

13 May 2023 11:57

Age

27 Yr(s) Sex: Male

Lab No

202305001536

Collection Date:

13 May 2023 11:02

Reporting Date:

13 May 2023 17:55

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin) Method: HPLC

5.0

[0.0-5.6]

As per American Diabetes Association (

HbA1c in %

Non diabetic adults >= 18years < 5.7

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

Estimated Average Glucose (eAG)

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.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW CLEAR

(Pale Yellow - Yellow)

Appearance

Reaction[pH]

5.0

(4.6 - 8.0)

Specific Gravity

1.025

(1.003 - 1.035)

CHEMICAL EXAMINATION

Protein/Albumin

Glucose

(NEGATIVE)

Ketone Bodies

NIL

(NIL)

Urobilinogen

Negative

(NEGATIVE)

Normal

(NORMAL)

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Name

MR VEDPAL MAVI

Age

27 Yr(s) Sex : Male

Registration No

MH010992466

Lab No

Patient Episode

H18000000558

202305001536

Referred By

Collection Date:

13 May 2023 11:57

HEALTH CHECK MGD

Reporting Date:

13 May 2023 18:03

**Receiving Date** 

13 May 2023 11:57

**CLINICAL PATHOLOGY** 

/hpf

MICROSCOPIC EXAMINATION (Automated/Manual) Pus Cells

1-2 /hpf

(0-5/hpf)

RBC

NIL

(0-2/hpf)

Epithelial Cells

1 - 2NIL

CASTS Crystals

NIL

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL

mg/dl

[<2001

TRIGLYCERIDES (GPO/POD)

Moderate risk:200-234

122

High risk:>240 mg/dl

[<150]

170

Borderline high:151-199

High: 200 - 499

Very high: >500

HDL- CHOLESTEROL

44.0

mg/dl

[35.0-65.0]

Method: Enzymatic Immunoimhibition VLDL- CHOLESTEROL (Calculated)

24

mg/dl

[0-35]

CHOLESTEROL, LDL, CALCULATED

102.0

mg/dl

[<120.0]

Near/

Above optimal-100-129

T.Chol/HDL.Chol ratio(Calculated)

3.9

Borderline High: 130-150

High Risk: 160-189

<4.0 Optimal

4.0-5.0 Borderline

>6 High Risk

LDL.CHOL/HDL.CHOL Ratio(Calculated)

2.3

<3 Optimal

3-4 Borderline

>6 High Risk

Note:

Reference ranges based on ATP III Classifications.

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Name

MR VEDPAL MAVI

Age

27 Yr(s) Sex :Male

Registration No

MH010992466

Lab No

202305001536

**Patient Episode** 

H18000000558

Collection Date:

13 May 2023 11:02

Referred By

1110000000336

Receiving Date

HEALTH CHECK MGD
13 May 2023 11:57

Reporting Date:

13 May 2023 15:54

#### BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

#### KIDNEY PROFILE

| Specimen: Serum                     |        |               |                 |
|-------------------------------------|--------|---------------|-----------------|
| UREA                                | 34.7   | mg/dl         | [15.0-40.0]     |
| Method: GLDH, Kinatic assay         |        |               |                 |
| BUN, BLOOD UREA NITROGEN            | 16.2   | mg/dl         | [8.0-20.0]      |
| Method: Calculated                  |        |               |                 |
| CREATININE, SERUM                   | 0.72   | mg/dl         | [0.70-1.20]     |
| Method: Jaffe rate-IDMS Standardiza | tion   |               |                 |
| URIC ACID                           | 4.0    | mg/dl         | [4.0-8.5]       |
| Method:uricase PAP                  |        |               |                 |
|                                     |        |               |                 |
| SODIUM, SERUM                       | 139.50 | mmol/L        | [136.00-144.00] |
| POTASSIUM, SERUM                    | 4.34   | mmol/L        | [3.60-5.10]     |
| SERUM CHLORIDE                      | 107.0  | mmol/l        | [101.0-111.0]   |
| Method: ISE Indirect                |        |               |                 |
| eGFR (calculated) Technical Note    | 127.8  | ml/min/1.73sc | q.m [>60.0]     |

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to1.73 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.

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Name

MR VEDPAL MAVI

Age

27 Yr(s) Sex :Male

Registration No

: MH010992466

Lab No

202305001536

Patient Episode

: H18000000558

Collection Date:

13 May 2023 11:02

Referred By

: HEALTH CHECK MGD

Reporting Date:

13 May 2023 15:54

Receiving Date

: 13 May 2023 11:57

**BIOCHEMISTRY** 

|  |        | D. O CHILIMINI IN I |          |                               |  |
|--|--------|---------------------|----------|-------------------------------|--|
| TEST   |        | RESULT              | UNIT BIO | BIOLOGICAL REFERENCE INTERVAL |  |
| LIVER FUNCTION TEST                          |        |                     |          |                               |  |
| BILIRUBIN - TOTAL Method: D P D              |        | 0.54                | mg/dl    | [0.30-1.20]                   |  |
| BILIRUBIN - DIRECT Method: DPD               |        | 0.10                | mg/dl    | [0.00-0.30]                   |  |
| INDIRECT BILIRUBIN(S Method: Calculation     | SERUM) | 0.44                | mg/dl    | [0.10-0.90]                   |  |
| TOTAL PROTEINS (SERUM Method: BIURET         | (P     | 7.20                | gm/dl    | [6.60-8.70]                   |  |
| ALBUMIN (SERUM) Method: BCG                  |        | 4.34                | g/dl     | [3.50-5.20]                   |  |
| GLOBULINS (SERUM) Method: Calculation        |        | 2.90                | gm/dl    | [1.80-3.40]                   |  |
| PROTEIN SERUM (A-G) Method: Calculation      | RATIO  | 1.52                |          | [1.00-2.50]                   |  |
| AST(SGOT) (SERUM) Method: IFCC W/O P5F       | )      | 23.00               | U/L      | [0.00-40.00]                  |  |
| ALT(SGPT) (SERUM) Method: IFCC W/O P5F       |        | 32.00               | U/L      | [17.00-63.00]                 |  |
| Serum Alkaline Phosp<br>Method: AMP BUFFER I |        | 56.0                | IU/L     | [32.0-91.0]                   |  |
| GGT  |        | 20.0                |          | [7.0-50.0]                    |  |

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Name

MR VEDPAL MAVI

Age

27 Yr(s) Sex :Male

Registration No

MH010992466

Lab No

202305001536

Patient Episode

H18000000558

**Collection Date:** 

13 May 2023 11:02

Referred By

HEALTH CHECK MGD

Reporting Date:

13 May 2023 17:43

**Receiving Date** 

13 May 2023 11:57

**BLOOD BANK** 

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

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

Blood Group & Rh typing

A 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

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Name

MR VEDPAL MAVI

Age

27 Yr(s) Sex: Male

Registration No

: MH010992466

Lab No

202305001537

Patient Episode

: H18000000558

Collection Date :

13 May 2023 11:02

Referred By

HEALTH CHECK MGD

Reporting Date:

13 May 2023 12:24

Receiving Date

: 13 May 2023 11:02

**BIOCHEMISTRY** 

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

GLUCOSE-Fasting

Specimen: Plasma

)LUCOSE, FASTING (F)
Method: Hexokinase

86.0

mg/dl

[70.0-110.0]

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----END OF REPORT---

Dr. Charu Agarwal Consultant Pathologist



Name

: MR VEDPAL MAVI

Age

27 Yr(s) Sex: Male

Registration No

MH010992466

Lab No

202305001538

Patient Episode

H18000000558

Collection Date:

13 May 2023 14:54

Referred By

HEALTH CHECK MGD

Reporting Date:

13 May 2023 17:06

**Receiving Date** 

13 May 2023 14:54

**BIOCHEMISTRY** 

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

#### PLASMA GLUCOSE

Specimen: Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS 117.0

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

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

Dr. Alka Dixit Vats **Consultant Pathologist** 

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# Manipal Hospital

## Ghaziabad

noah4

**Patient Name** 

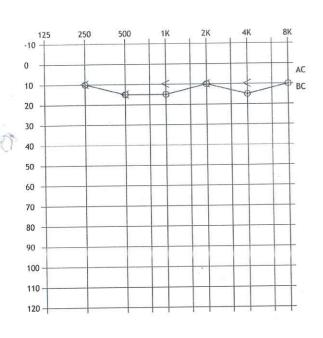
Mavi, Vedpal

Date of birth

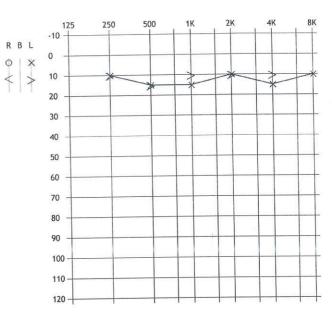
02-07-1995

Test date:

13-05-2023







### Report comments:

Bilateral Normal hearing Sensitivity

Recommendation:

Aural Hygiene

Fallow up

Name

Audiologist

13-05-2023