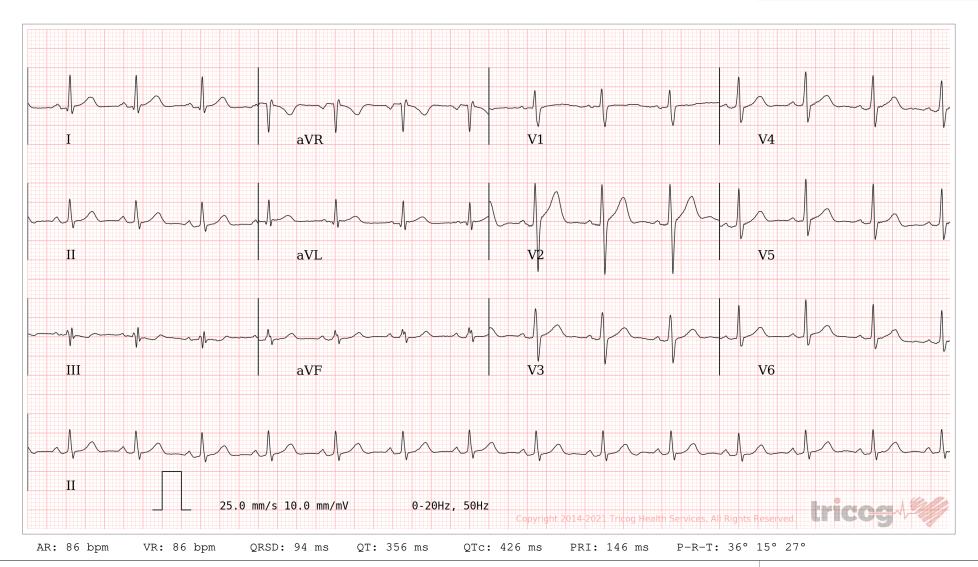
Chandan Diagnostic Centre, Varanasi



Age / Gender: 34/Male Date and Time: 23rd Aug 21 9:56 AM

Patient ID: CVAR0053182122

Patient Name: Mr.MANISH KUMAR-PKG10000238



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

AUTHORIZED BY



Dr. Charit MD, DM: Cardiology Dr Velmurugan. J

63382

122015

REPORTED BY



D63/6B-99, Shivaji Nagar Colony, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India

Latitude

25.305372°

LOCAL 10:07 AM GMT 04:37 AM Longitude

82.979074°

MONDAY 08.23.2021 ALTITUDE 63 FEET

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-2223232 CIN: U85110DL2003PLC308206

Patient Name : 23/Aug/2021 09:00:31 : Mr.MANISH KUMAR-PKG10000238 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 23/Aug/2021 09:57:55 UHID/MR NO : CVAR.0000021282 Received : 23/Aug/2021 10:02:18 Visit ID : CVAR0053182122 Reported : 23/Aug/2021 12:51:40 : Dr.Mediwheel - Arcofemi Health Care Ltd. Status Ref Doctor : Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) * , Blood	od			
Blood Group	0			
Rh (Anti-D)	POSITIVE			
COMPLETE BLOOD COUNT (CBC) * , Blo	ood			
Haemoglobin	13.90	g/dl	13.5-17.5	PHOTOMETRIC
TLC (WBC)	6,100	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	60.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	30.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	4.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	6.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	10.00	Mm for 1st h	r.	
Corrected	6.00	Mm for 1st h	r. <9	
PCV (HCT) Platelet count	39.00	cc %	40-54	
Platelet Count	1.50	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE
PDW (Platelet Distribution width)	16.60	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	nr	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.18	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	nr	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	4.41	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

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DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	88.30	fl	80-100	CALCULATED PARAMETER
MCH	31.50	pg	28-35	CALCULATED PARAMETER
MCHC	35.70	%	30-38	CALCULATED PARAMETER
RDW-CV	13.50	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	44.30	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count Absolute Eosinophils Count (AEC)	3,660.00 366.00	/cu mm /cu mm	3000-7000 40-440	



S. M. Sinha (MD Path)

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-2223232 CIN: U85110DL2003PLC308206

Patient Name : Mr.MANISH KUMAR-PKG10000238 Registered On : 23/Aug/2021 09:00:31 Age/Gender : 23/Aug/2021 09:57:55 : 34 Y 0 M 0 D /M Collected UHID/MR NO : CVAR.0000021282 Received : 23/Aug/2021 10:02:18 Visit ID : CVAR0053182122 Reported : 23/Aug/2021 13:30:40 : Dr.Mediwheel - Arcofemi Health Care Ltd. Ref Doctor : Final Report Status

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interva	al Method
Glucose Fasting Sample:Plasma	90.00	100-) Normal 125 Pre-diabetes 5 Diabetes	GOD POD

Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) 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.
- c) I.G.T = Impared Glucose Tolerance.

Glucose PP	125.00	mg/dl	<140 Normal	GOD POD
Sample:Plasma After Meal			140-199 Pre-diabetes	
			>200 Diabetes	

Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) 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.
- c) I.G.T = Impared Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) *, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.20	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	33.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	103	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.

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.

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-2223232 CIN: U85110DL2003PLC308206

Patient Name : Mr.MANISH KUMAR-PKG10000238 Registered On : 23/Aug/2021 09:00:31 Age/Gender Collected : 23/Aug/2021 09:57:55 : 34 Y 0 M 0 D /M UHID/MR NO : CVAR.0000021282 Received : 23/Aug/2021 10:02:18 Visit ID : CVAR0053182122 Reported : 23/Aug/2021 13:30:40 : Dr.Mediwheel - Arcofemi Health Care Ltd. Ref Doctor Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
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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.

N.B.: Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

Clinical Implications:

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

^{*}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.

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	U	nit Bio. Ref. Interv	al Method
Sample:Serum				
Creatinine Sample:Serum	1.20	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	102.00	ml/min/1.73n	n2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	6.40	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) *, Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT)	72.20 93.80	U/L U/L	< 35 < 40	IFCC WITHOUT P5P IFCC WITHOUT P5P
Gamma GT (GGT) Protein	86.60 6.40	IU/L gm/dl	11-50 6.2-8.0	OPTIMIZED SZAZING BIRUET
Albumin	4.00	gm/dl	3.8-5.4	B.C.G.
Globulin A:G Ratio	2.40 1.67	gm/dl	1.8-3.6 1.1-2.0	CALCULATED CALCULATED
Alkaline Phosphatase (Total)	64.20	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total) Bilirubin (Direct)	0.50 0.20	mg/dl mg/dl	0.3-1.2 < 0.30	JENDRASSIK & GROF JENDRASSIK & GROF
Bilirubin (Indirect)	0.30	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	217.00	mg/dl	<200 Desirable 200-239 Borderline Higl > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	35.70	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	150	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	
VLDL	31.14	mg/dl	10-33	CALCULATED
Trielvcerides	155.70	mg/dl	< 150 Normal 150-199 Borderline Higl 200-499 High >500 Very High	GPO-PAP S. N. Sinda Dr.S.N. Sinha (MD Path)

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-2223232 CIN: U85110DL2003PLC308206

Patient Name : Mr.MANISH KUMAR-PKG10000238 : 23/Aug/2021 09:00:31 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 23/Aug/2021 13:37:13 UHID/MR NO : CVAR.0000021282 Received : 23/Aug/2021 13:39:34 Visit ID : CVAR0053182122 Reported : 23/Aug/2021 14:12:58 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE * ,	Urine			
Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.5)			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			DIPSTICK
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	0-2/h.p.f			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			
SUGAR, FASTING STAGE * , Urine				
Sugar, Fasting stage	ABSENT	gms%		
Interpretation:				

Interpretation:

(+)< 0.5

(++)0.5-1.0

(+++) 1-2

(++++) > 2

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-2223232 CIN: U85110DL2003PLC308206

Patient Name : 23/Aug/2021 09:00:31 : Mr.MANISH KUMAR-PKG10000238 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 23/Aug/2021 13:37:13 UHID/MR NO : CVAR.0000021282 Received : 23/Aug/2021 13:39:34 Visit ID : CVAR0053182122 Reported : 23/Aug/2021 14:12:58

: Dr.Mediwheel - Arcofemi Health Care Ltd. Status Ref Doctor : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Method **Test Name** Result Unit Bio. Ref. Interval

SUGAR, PP STAGE * , Urine

Sugar, PP Stage **ABSENT**

Interpretation:

(+)< 0.5 gms%

(++)0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%



S.N. Sinta Dr.S.N. Sinha (MD Path)

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-2223232 CIN: U85110DL2003PLC308206

Patient Name : Mr.MANISH KUMAR-PKG10000238 Registered On : 23/Aug/2021 09:00:31 Age/Gender : 34 Y 0 M 0 D /M Collected : 23/Aug/2021 09:57:55 UHID/MR NO : CVAR.0000021282 Received : 23/Aug/2021 16:12:41 Visit ID : CVAR0053182122 Reported : 23/Aug/2021 16:16:59 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. : Final Report Status

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL * , Serum				
T3, Total (tri-iodothyronine)	102.00	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	6.45	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.35	μIU/mL	0.27 - 5.5	CLIA
Interpretation:				
-		0.3-4.5 μIU/m	L First Trimest	er
		0.4-4.2 $\mu IU/m$	L Adults	21-54 Years
		0.5-4.6 μ IU/m		
		0.5-8.9 μ IU/m		55-87 Years
		0.7-64 μIU/m	,	
		0.7-27 μIU/m		28-36 Week
		0.8-5.2 μIU/m		
		1-39 μIU/m 1.7-9.1 μIU/m		0-4 Days 2-20 Week
		2.3-13.2 μIU/m		> 37Week

- 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.



C.M. Sinta

Dr.S.N. Sinha (MD Path)

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-2223232 CIN: U85110DL2003PLC308206

Patient Name : Mr.MANISH KUMAR-PKG10000238 : 23/Aug/2021 09:00:32 Registered On

Age/Gender : 34 Y 0 M 0 D /M Collected UHID/MR NO : CVAR.0000021282 Received : N/A

Visit ID : 23/Aug/2021 10:34:22 : CVAR0053182122 Reported

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

- The liver measures 14.4 cm in mid clavicular line. It is normal in shape and echogenecity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.
- Gall bladder is well distended and is normal.
- Portal vein measures 12 mm in caliber. CBD measures 3.8 mm in caliber.
- Pancreas is normal in size, shape and echogenecity.
- Spleen is normal in size (8.2 cm in its long axis), shape and echogenecity.
- Right kidney is normal in size, shape and echogenecity. No focal lesion or calculus seen. Right pelvicalyceal system is not dilated. Right kidney measures: 8.5 x 4.4 cm.
- Left kidney is normal in size, shape and echogenecity. No focal lesion or calculus seen. Left pelvicalyceal system is not dilated. Left kidney measures: 9.3 x 5.1 cm.
- Urinary bladder is normal in shape, outline and distension. Lumen is anechoic and no wall thickening seen.Prevoid urine volume 113 cc.
- The prostate is normal in size (34 x 31 x 31 mm/17gms), shape and echopattern.
- No free fluid is seen in the abdomen/pelvis.

IMPRESSION: No significant abnormality seen.

Please correlate clinically

*** End Of Report ***

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, X-RAY DIGITAL CHEST PA



Dr. Raveesh Chandra Roy (MD-Radio)

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



Age: 34 Yrs.

Name: Mr manish kumar Gender: Male

Lab No:

8ill No: 295482

Ref By: Self

UHID: 72583

Time: 6.30 Pm

Date: 23/08/2021

X-RAY CHEST PA VIEW

Trachea and mediastinum are central. Soft tissues & bones in view are normal.

Heart is normal in size.

B/L lung fields are normal seen.

B/L costophrenic angles are clear.

Both domes of diaphragms are normally seen.

Thoracic cage appears normal.

Please correlate clinically. Normal study. IMPRESSION:

Radiologist

The Emergency Helpline

D-63/6-K, Tulsipur (Near Akashwani), Mahmoorganj, Varanasi - 221010 Phone: +91-542-2220770, 2220771, 2222416 E-mail: info.suryahealthgroup@gmail.com | Website: www.suryahealthcare.in







Name of Company: medium.

Name of Executive: manyl Lund

Pate of Birth: (9-03-1987

Sex: May

भारता अधिकार

Weight: 84

BMI (Body Mass Index): 27.

Chest (Expiration / Inspiration) 92 97

96 Abdomen:

Blood Pressure: 110 76

Pulse: 7-6

NB1 : ЯЯ

Ident Mark: Out on Leaf huerd

Any Allergies:

Vertigo: Nectigo:

Any Surgical History: Eye Sumpy; physical History: Eye Sumpy; physical History: Eye of s. physical History: Habite of alcoholism/smoking/tobacco:

Lab Investigation Reports' Chief Complaints if any:

Eye Check up vision & Color vision:

Right eye: Left eye: Name

Mear vision: Near Vision:







Dental Checkup: ENT consultation: Monroe Far vision: Moment

Eve Checkup: North.

Final impression:

Client Signature

. Emal himph

silment, he/she is Fit / Unfit to join any organization. is presently in good health and free from any cardio-respiratory/communicative Certified that I examined South Mile or Dio

Signature of Medical Examiner

(am) (2881) Fall) - O. Lackshiften & sme V

Date.. 2.3 ... R. Place... VARANASI

Phone No.:0542-2223232 (.9.0) 010155 . isene 16V inserioomnem iseen lisunz, 20 19109) Sizonzeig nebren)



Alandan Diagnostic Center Varanasi-22 1010 (U.p.)
Phone No.:0542-2223232 John Brown MEBS., MD. (Radio Diagnosis)
Reg. No.-26918