PHC [MH-Ghaziabad] < phc.ghaziabad@manipalhospitals.com>

Fri 3/1/2024 4:24 PM

To:Crm: Mediwheel: New Delhi <crm@mediwheel.in>;network@mediwheel.in <network@mediwheel.in>;Mediwheel Wellness <report@mediwheel.in>;
Customer Care: Mediwheel: New Delhi <customercare@mediwheel.in>

Cc:Mudit Garg [MH-Ghaziabad] < mudit.garg@manipalhospitals.com>

Dear Team,

I can't book an appointment, I have written earlier in other mails to the patient To mention mobile number.

Thanks

Pratiksha Singh

From: Mediwheel < wellness@mediwheel.in>

Sent: Friday, March 1, 2024 4:13 PM

To: PHC [MH-Ghaziabad] <phc.ghaziabad@manipalhospitals.com> Cc: customercare@mediwheel.in <customercare@mediwheel.in>

Subject: Health Check up Booking Request(bobE12521), Beneficiary Code-148184



011-41195959

Dear Manipal Hospital

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. BHARTI SACHIN KUMAR

Hospital Package

Name Mediwheel Full Body Health Checkup Male Below 40

Name of : Manipal Hospital Diagnostic/Hospital

Address of NH-24, Hapur Road, Oppo. Bahmeta Village, Near Lancraft Golf

Diagnostic/Hospital- Links Aparment

Appointment Date : 09-03-2024

Member Information

Booked Member Name Age Gender MR. BHARTI SACHIN KUMAR 34 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

- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney ProfileLiver profile

Thanks, Mediwheel Team

Please Download Mediwheel App





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Please visit to our Terms & Conditions for more information. Click here to unsubscribe.

2024 - 25, Accaleme Health-care Pyl Limited (Mediwheel)



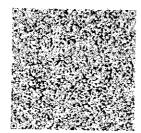


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सामाकन अन्य/ Enrolment No.: 0000/00195/91459

वर्षरेक क्षेत्रसम्बद्धाः Sadan Kumar Boarg 5/O.hem Chass Bailti 35 ta/Sc She Ram Nagar Studistana East Della Della 110032 9716615441





आपका आधार क्रमांक / Your Aadhaar No. :

8190 7160 8307 VID: 9169 8433 1067 6206

मेरा आधार, मेरी पहचान



MAN SIXBUL Continuent of India





संधित क्षमार भारती Sachin Kumar Bharti जना तिथि/DOB: 26/09/1989 THE MALE

8190 7160 8307 VID: 9169 8433 1067 6206





सुवना

- * अध्यार पहचान का प्रमाण है, नागरिकता का नहीं।
- चुरसित OR कोड / ऑफलाइन XML/ऑनलाइन ऑथेटिकेशन सं पहचान प्रमाणित करे।
- यह एक इलेक्ट्रॉनिक प्रक्रिया तारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
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 - 💌 आधार में मोबाइन संबर और हंभेल 10 अगडेट रखें।
 - आधार की अपने स्मार्ट फोन पर रखें, mAadhaar App A STREET
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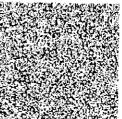


marks fifting uponer untilerro Unique identification Authority of India



पश: ,S/O मेन कर भारती, 2519/5की की राम नगर, शास्त्रस्त्र, पुर्वी दिस्सी, दिस्मी - 110032

Address: 570-Prem Chand Bharti, 251a/5c Shri Ram Nagar, Shahdara, East Evely, Delhi- 118632

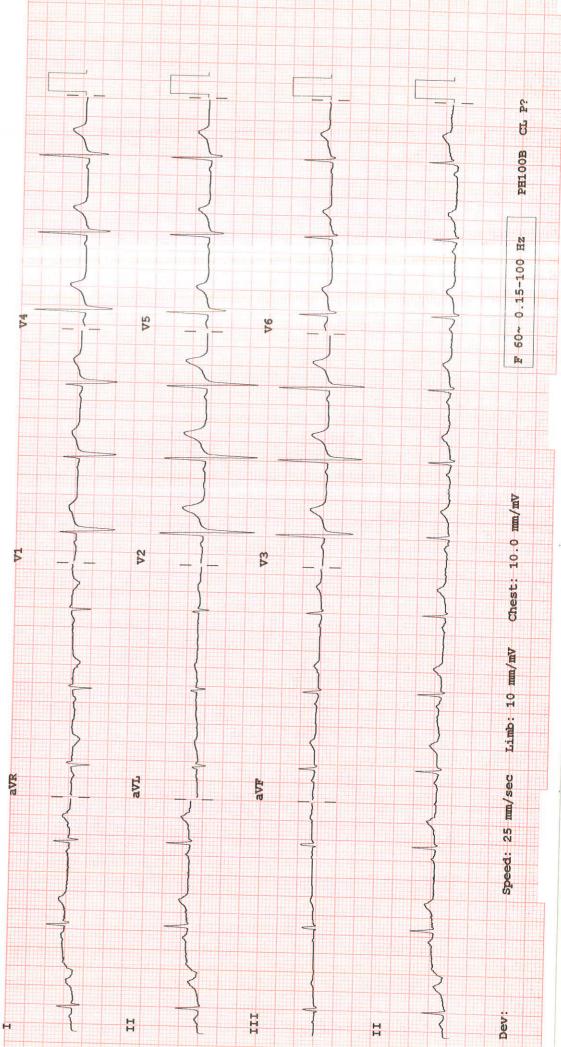


8190 7160 8307 VID: 9169 8433 1067 6206



- NORMAL ECG -

Unconfirmed Diagnosis









TMT INVESTIGATION REPORT

Patient Name MR SACHIN KUMAR

Location

: Ghaziabad

Age/Sex

: 34Year(s)/male

Visit No

: V0000000001-GHZB

MRN No

MH008785288

Order Date

: 09/03/2024

Ref. Doctor : DR BHUPENDRA SINGH

Report Date

: 09/03/2024

Protocol

: Bruce

MPHR

: 186BPM

Duration of exercise

: 9min 30sec

85% of MPHR

: 157BPM

Reason for termination

: THR achieved

Peak HR Achieved

: 185BPM

Blood Pressure (mmHg) : Baseline BP : 120/80mmHg

% Target HR

: 99%

Peak BP : 150/90mmHg

METS : 10.9METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	106	120/80	Nil	No ST changes seen	Nil
STAGE 1	3:00	133	120/80	Nil No ST changes seen		Nil
STAGE 2	3:00	157	130/84	Nil No ST changes seen		Nil
STAGE 3	3:00	180	140/90	Nil	No ST changes seen	Nil
STAGE 4	0:30	185	150/90	Nil	No ST changes seen	Nil
RECOVERY	5:12	123	130/80	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes at peak stage.
- No ST changes in recovery.
- Normal chronotropic response.
- Normal blood pressure response.

IMPRESSION:

Treadmill text is negative for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh

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

Dr. Abhishek Singh MD, DNB (CARDIOLOGY), MNAMS MD

Dr. Sudhanshu Mishra

Sr.Consultant Cardiology

Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P: 0120-3535353

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.manipalhospitals.com

manipal hospitals

LIFE'S ON



NAME	, SACHIN KUMAR BHARTI	STUDY DATE	09/03/2024 9:16AM
AGE / SEX	34 y / M	HOSPITAL NO.	MH008785288
ACCESSION NO.	R7021095	MODALITY	CR
REPORTED ON	09/03/2024 9:30AM	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 seen.

Please correlate clinically

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS

CONSULTANT RADIOLOGIST

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

Manipal Hospital, Ghazlabad

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

P:0120-616 5666

Manipal Health Enterprises Private Limited

CINE U85110KA2003PTC033055

Regal, Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017

P +91 80 4936 0300 E info@manihospitals.com www.manipaingspitals.com

manipalnospital

LIFE'S ON III



			A CONTRACTOR OF THE PARTY OF TH
NAME	, SACHIN KUMAR BHARTI	STUDY DATE	09/03/2024 9:12AM
AGE / SEX	34 v / M	HOSPITAL NO.	MH008785288
The state of the s	J-T V [101	MODALITY	US
ACCESSION NO.	1(1) 02 1000	REFERRED BY	HEALTH CHECK MGD
REPORTED ON	09/03/2024 1:05PM	KELEKKED DI	

USG ABDOMEN & PELVIS

FINDINGS

LIVER: appears enlarged in size (measures 152 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade II fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 92 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 10 mm.

COMMON BILE DUCT: Appears normal in size and measures 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 113 x 46 mm. Left Kidney: measures 115 x 51 mm.

PELVI-CALYCEAL SYSTEMS: There is mild prominence of right pelvicalyceal system likely extra renal pelvis.

Compact on left side. NODES: Not enlarged. FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 41 x 35 x 28 mm with volume 21 cc.

Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Hepatomegaly with diffuse grade II fatty infiltration in liver.

-There is mild prominence of right pelvicalyceal system likely extra renal pelvis.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS

CONSULTANT RADIOLOGIST

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

Manipal Hospital, Ghaziabad

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

p:0120-616 5666

Manipal Health Enterprises Private Limited

OR: U85110KA2003PTC033055

Regd Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017







Name : SACHIN KUMAR BHARTI Age : 34 Yr(s) Sex :Male

Referred By : HEALTH CHECK NODE Reporting Date : 09 Mar 2024 10:26 : 09 Mar 2024 08:51

HOCHEMISTRY

	HOCHEMI	STRY		
TEST	17.7	UNIT	BIOLOGICAL REFERENCE	INTERVAL
LIVER FUNCTION TEST				
BILIRUBIN - TOTAL Method: D P D	0.56	mg/	/dl [0.30-1.20]	
BILIRUBIN - DIRECT Method: DPD	0.14	mç	g/dl [0.00-0.30]	
INDIRECT BILIRUBIN(SERUM) Method: Calculation	0.42	mç	g/dl [0.10-0.90]	
TOTAL PROTEINS (SERUM) Method: BIURET	7.30	gr	n/dl [6.60-8.70]	
ALBUMIN (SERUM) Method: BCG	4.61	g	/dl [3.50-5.20]	
GLOBULINS (SERUM) Method: Calculation	2.70	gr	m/dl [1.80-3.40]	
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.71	a .	[1.00-2.50]	
AST(SGOT) (SERUM) Method: IFCC W/O P5P	41.00 #	U	/L [0.00-40.00]	
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	66.80 #	U,	/L [17.00-63.00]	
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	87.0	I	U/L [32.0-91.0]	
GGT	62.0 #	p.	U/L [7.0-50.0]	
				2002 - 2002

Page 5 of 8





Name

SACHIN KUMAR BHARTI

Age

34 Yr(s) Sex :Male

Registration No

MH008785288

Lab No

202403001037

Patient Episode

H18000001877

Collection Date:

09 Mar 2024 08:51

Referred By

: HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 13:36

Receiving Date

: 09 Mar 2024 08:51

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Specimen Type : Serum

THYROID PROFILE, Serum

T3 - Triiodothyronine (ELFA)	1.050	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	6.930	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	2.050	µIU/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.

Page1 of 2





Name

SACHIN KUMAR BHARTI

34 Yr(s) Sex: Male

Registration No

MH008785288

202403001037

Patient Episode

H18000001877

Referred By

09 Mar 2024 08:51

HEALTH CHECK MGD

Collection Date: Reporting Date:

Lab No

10 Mar 2024 13:36

Receiving Date

09 Mar 2024 08:51

BLOOD BANK

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

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

Blood Group & Rh typing

B Rh(D) Positive

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

Page 2 of 2

NOTE:

- Abnormal Values

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

Dr. Alka Dixit Vats **Consultant Pathologist**







Name : SACHIN KUMAR BHARTI Age : 34 Yr(s) Sex :Male

 Patient Episode
 : H18000001877
 Collection Date : 09 Mar 2024 08:51

Referred By : HEALTH CHECK MGD Reporting Date : 09 Mar 2024 12:18

Receiving Date : 09 Mar 2024 08:51

HAEMATOLOGY

TEST	RESULT	UNIT BIOLO	BIOLOGICAL REFERENCE INTERVAL		
COMPLETE BLOOD COUNT (AUTOMA	rep)	SPECIMEN-EDTA Whole Blood			
RBC COUNT (IMPEDENCE)	5.64 #	millions/cumm	[4.50-5.50]		
HEMOGLOBIN	15.9	g/dl	[13.0-17.0]		
Method:cyanide free SLS-colo	rimetry				
HEMATOCRIT (CALCULATED)	48.9	90	[40.0-50.0]		
MCV (DERIVED)	86.7	fL	[83.0-101.0]		
MCH (CALCULATED)	28.2	pg	[25.0-32.0]		
MCHC (CALCULATED)	32.5	g/dl	[31.5-34.5]		
RDW CV% (DERIVED)	13.7	90	[11.6-14.0]		
Platelet count	190	\times 10 3 cells/cumm	n [150-410]		
Method: Electrical Impedance					
MPV (DERIVED)	11.5				
WBC COUNT (TC) (IMPEDENCE) DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)	6.03	\times 10 3 cells/cumn	[4.00-10.00]		
Neutrophils	51.0	90	[40.0-80.0]		
Lymphocytes	39.0	%	[20.0-40.0]		
Monocytes	8.0	%	[2.0-10.0]		
Eosinophils	2.0	00	[1.0-6.0]		
Basophils	0.0	90	[0.0-2.0]		
ESR	7.0	mm/1sthour	[0.0-		

Page 1 of 8







Name

: SACHIN KUMAR BHARTI

Age

34 Yr(s) Sex :Male

Registration No

: MH008785288

Lab No

202403001037

Patient Episode

: H18000001877

Collection Date:

09 Mar 2024 08:51

Referred By

: HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 16:42

Receiving Date

: 09 Mar 2024 08:51

BIOCHEMISTRY

TEST

RESULT

UNIT

00

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin)

5.4

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA

HbAlc in %

Non diabetic adults >= 18 years <5.7

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

Estimated Average Glucose (eAG)

108

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.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

CLEAR

(4.6 - 8.0)

Reaction[pH]
Specific Gravity

1.005

(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin

Negative

(NEGATIVE)

Glucose

NIL

(NIL)

Ketone Bodies

Negative

(NEGATIVE)

Urobilinogen

Normal

(NORMAL)

Page 2 of 8







Name : SACHIN KUMAR BHARTI Age : 34 Yr(s) Sex :Male

Patient Episode : H18000001877 Collection Date : 09 Mar 2024 10:38

Referred By : HEALTH CHECK MGD Reporting Date : 09 Mar 2024 12:26

Receiving Date : 09 Mar 2024 10:38

CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION (Auto	mated/Man	ual)			
Pus Cells	1-2 /hpf			(0-5/hpf)	
RBC	NIE			(0-2/hpf)	
Epithelial Cells	$O = \bot$	/hpf			
CASTS	NIL				
Crystals	NIL				
Bacteria	NIL				
OTHERS	NIL				
				Œ	
Serum LIPID PROFILE					
Serum TOTAL CHOLESTEROL			145	mg/dl	[<200]
Method: Oxidase, esterase, per	oxide				Moderate risk:200-239
nechod.onidade/edecided/ per					High risk:>240
TRIGLYCERIDES (GPO/POD)			68	mg/dl	[<150]
INIGHICHNIDHO (OLO) LOD)				3,	Borderline high:151-199
					High: 200 - 499
					Very high:>500
HDL- CHOLESTEROL			53	mg/dl	[35-65]
Method: Enzymatic Immunoimh	ibition			-	
VLDL- CHOLESTEROL (Calculate			14	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED			78.0	mg/dl	[<120.0]
0110111011, 1111, 011111					Near/
Above optimal-100-129					
					Borderline High: 130-159
					High Risk:160-189
T.Chol/HDL.Chol ratio(Calcu	ulated)		2.7		<4.0 Optimal
					4.0-5.0 Borderline
					>6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calc	culated)		1.5		<3 Optimal
					3-4 Borderline
					>6 High Risk

Page 3 of 8







Name : SACHIN KUMAR PHARTI Age : 34 Yr(s) Sex :Male

Referred By : HEALTH CHECK MGD Reporting Date : 09 Mar 2024 10:25

Receiving Date : 09 Mar 2024 08:5

HIOCHEMISTRY

TEST UNIT BIOLOGICAL REFERENCE INTERVAL

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	25.5	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	11.9	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	1.28 #	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardizatio	n		
URIC ACID	6.8	mg/dl	[4.0-8.5]
Method:uricase PAP			
SODIUM, SERUM	136.50	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.72	mmol/L	[3.60-5.10]
SERUM CHLORIDE	104.1	mmol/L	[101.0-111.0]
Method: ISE Indirect		8 5	
eGFR (calculated)	72.5	ml/min/1.73sq.m	[>60.0]
Technical Note			
eGFR which is primarily based on Serum	Creatinine is	a derivation of	CKD-EPI 2009
COLIT MILLON TO PLENSTELL	The state of the s	1000 - ACMINISTRATION - NOVERSON SON SON - 2015-901	STANDARD STANDARD STANDARD STANDARD

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to1.73 sq.m Park and is not applicable to individuals below 18 years. eGFR tends to be less accurate when became Creatinine estimation is indeterminate e.g. patients at extremes of muscle make, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

Page 4 of 8







Age

Lab No

Collection Date:

Reporting Date:

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002 Ph. +91 120 353 5353, M. 88609 45566 www.manipalhospitals.com

34 Yr(s) Sex: Male

09 Mar 2024 08:51

09 Mar 2024 10:26

202403001038

Name

: SACHIN KUMAR I

Registration No

: MH008785288

Patient Episode

: H18000001877

Referred By

: HEALTH CHECK

Receiving Date

: 09 Mar 2024 08:51

HOCHEMISTRY

TEST

UNIT

BIOLOGICAL REFERENCE INTERVAL

GLUCOSE-Fasting

Specimen: Plasma

GLUCOSE, FASTING (F)

Method: Hexokinase

92.0

mg/dl

[70.0-110.0]

Normally, the glucose concentration in extracellular fluid is closely regulated so that a the urine.

Increased in Diabetes mellitus, Drugs corticosteroids, phenyto:

Decreased in Pancreatic islet insufficiency, hypopituitarism, fibro sarcoma), infant of a die Drugs-

agents.

source of energy is readily available tissues and so that no glucose is excreted in

ma's syndrome (10-15%), chronic pancreatitis (30%). rogen, thiazides

is se with increased insulin, insulinoma, adrenocortica liver disease, malignancy(adrenocortical, stomach, her enzyme deficiency diseases (e.g.galactosemia),

insulin, ethanol, propranolol, sull relations, tobutamide, and other oral hypoglycemic

Page 7 of 8

OF REPORT-----

Dr. Alka Dixit Vats Consultant Pathologist







Name

: SACHIN KUMAR BHARTI

Age

34 Yr(s) Sex: Male

Registration No

: MH008785288

Lab No

202403001037

Patient Episode

: H18000001877

Collection Date:

09 Mar 2024 08:51

Referred By

: HEALTH CHECK MINE

Reporting Date:

09 Mar 2024 10:26

Receiving Date

: 09 Mar 2024 08:51

BIOCHEMISTRY

TEST

UNIT

BIOLOGICAL REFERENCE INTERVAL

causes of dysfunction like hema. cholestasis of obstructive came

Liver function test aids in dia various pre hepatic, hepatic and post hepatic memia's, viral and alcoholic hepatitis and

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

Page 6 of 8

REPORT-----

Dr. Alka Dixit Vats **Consultant Pathologist**







Name : SACHIN KUMAR I

Age

34 Yr(s) Sex :Male

Registration No

: MH008785288

Lab No

202403001039

Patient Episode

: H18000001877

Collection Date:

09 Mar 2024 13:49

Referred By Receiving Date : HEALTH CHECK : 09 Mar 2024 13:4 Reporting Date:

10 Mar 2024 12:47

OCHEMISTRY

TEST

UNIT

BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Specimen:Plasma

GLUCOSE, POST PRANDIAL (PP), 2

Method: Hexokinase

Note:

Conditions which can lead to lo fasting glucose are excessive lorisk glucose absorption, possible. 98.0

mg/dl

[80.0-140.0]

randial glucose levels as compared to lease, rapid gastric emptying,

Page 8 of 8

REPORT----

Dr. Charu Agarwal Consultant Pathologist