

Health Check up Booking Confirmed Request(UBOIE3229),Package Code-
PKG10000476, Beneficiary Code-304357

Mediwheel <wellness@mediwheel.in>

Mon 1/22/2024 2:08 PM

To:Bh - Asset Recovery Branch-New Delhi [Union Bank Of India] <ubin0554723@unionbankofindia.bank>
Cc:customercare@mediwheel.in <customercare@mediwheel.in>

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011-41195959

Dear **VIKASH DAS,**

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 12-01-2024
Hospital Package Name : Mediwheel Full Body Health Checkup Male Above 40
Patient Package Name : MediWheel Full Body Health Checkup Male 50 To 60
Name of Diagnostic/Hospital : Manipal Hospital
Address of Diagnostic/Hospital- : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment
City : Ghaziabad
State :
Pincode : 201002
Appointment Date : 27-01-2024
Confirmation Status : Booking Confirmed
Preferred Time : 8:30am
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
VIKASH DAS	51 year	Male

Note - Please note to not pay any amount .

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,
Mediwheel Team

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भारत सरकार
Government of India



 विकेश दास
 Vikash Das
 जन्म तिथि/DOB: 10/01/1973
 पुरुष/ MALE



7185 2428 1987
 VID : 9143 0617 8847 7206

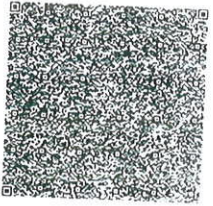
मेरा आधार, मेरी पहचान

*Self Attested
 For the purpose of
 Dr. Das, Hospital, 0015
 Vikash Das*


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
 पुना दास, फ्लैट न-405, 4th फ्लोर, ए आर रिफ्लेक्शंस,
 राजनगर एक्सटेंशन, राज नगर एक्सटेंशन, गाजियाबाद,
 उत्तर प्रदेश - 201017

Address:
 C/O Puna Das, Flat no-405, 4th Floor, AR
 Reflections, Rajnagar Extension, Raj
 Nagar Extension, Ghaziabad,
 Uttar Pradesh 201017



7185 2428 1987
 VID : 9143 0617 8847 7206

QR Code with Photograph



OUTPATIENT RECORD

Hospital No: MH011653234	Visit No: H18000001716
Name: MR VIKASH DAS	Age/Sex: 51 Yrs/Male
Doctor Name: HEALTH CHECK MGD	Specialty: HC SERVICE MGD
Date: 27/01/2024 08:43AM	

OPD Notes :

PRESENT OPHTHALMIC COMPLAINS -H/C
SYSTEMIC/ OPHTHALMIC HISTORY - NIL

EXAMINATION DETAILS

VISION (GLASSES)

RIGHT EYE

LEFT EYE

6/9

6/9

CONJ

NORMAL

NORMAL

CORNEA

CLEAR

CLEAR

ANTERIOR CHAMBER/ IRIS

N

N

VH GR - 3

VH GR-3

LENS

CLEAR

CLEAR

OCULAR MOVEMENTS

FULL

FULL

NCT

25

24

AT

24

24

FUNDUS EXAMINATION

A) VITREOUS

MEDIA CLEAR

CLEAR

B) OPTIC DISC

C:D 0.75

C:D 0.7

C) MACULAR AREA

FOVEAL REFLEX PRESENT

FOVEAL REFLEX PRESENT

D) VESSELS/ PERIPHERY

WNL

WNL

REFRACTION: POWER OF GLASS

Right eye: +2.25 Dsp /+0.50 Dcyl x 170 degree - 6/6

Left eye: +1.00 Dsp 6/6

ADD +2.25 DSPH - N/6 BE

DIAGNOSIS: GLAUCOMA SUSPECT

ADVISE / TREATMENT

E/D NISOL 4 TIMES DAILY X BE

GLAUCOMA SCREENING PROFILE

REVIEW WITH ABOVE REPORTS

HEALTH CHECK MGD

RADIOLOGY REPORT

NAME	MR Vikash DAS	STUDY DATE	27/01/2024 10:14AM
AGE / SEX	51 y / M	HOSPITAL NO.	MH011653234
ACCESSION NO.	R6778792	MODALITY	US
REPORTED ON	27/01/2024 11:15AM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS FINDINGS

LIVER: appears normal in size (measures 143 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 79 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 11.7 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 93 x 34 mm.

Left Kidney: measures 88 x 43 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 35 x 33 x 32 mm with volume 20 cc. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.



**Dr. Monica Shekhawat MBBS, DNB
CONSULTANT RADIOLOGIST**

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

MANIPAL HOSPITALS

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

www.manipalhospitals.com

RADIOLOGY REPORT

NAME	MR Vikash DAS	STUDY DATE	27/01/2024 8:58AM
AGE / SEX	51 y / M	HOSPITAL NO.	MH011653234
ACCESSION NO.	R6778791	MODALITY	CR
REPORTED ON	27/01/2024 9:36AM	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: There is mild cardiomegaly.
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:

Mild cardiomegaly.

Recommend clinical correlation.



Dr. Monica Shekhawat MBBS, DNB
CONSULTANT RADIOLOGIST

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

MANIPAL HOSPITALS

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

www.manipalhospitals.com



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex : Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 18:15

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. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex : Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 15:50

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex : Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 15:50

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL Method: D P D	0.61	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.12	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.49	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.50	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.51	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.00	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.51		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	27.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	21.80	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	59.0	IU/L	[32.0-91.0]
GGT	13.0	U/L	[7.0-50.0]



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 09:25

Age : 51 Yr(s) Sex : Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 09:25
Reporting Date : 27 Jan 2024 18:44

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	5.0	(4.6-8.0)
Specific Gravity	1.015	(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	0-1 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	0-1 /hpf	
CASTS	NIL	
Crystals	NIL	



Consultant Pathologist

LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex : Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 15:07

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDEANCE)	5.14	millions/cumm	[4.50-5.50]
HEMOGLOBIN	15.4	g/dl	[13.0-17.0]
Method: cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	49.3	%	[40.0-50.0]
MCV (DERIVED)	95.9	fL	[83.0-101.0]
MCH (CALCULATED)	30.0	pg	[25.0-32.0]
MCHC (CALCULATED)	31.2 #	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.4	%	[11.6-14.0]
Platelet count	153	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	14.8		
WBC COUNT (TC) (IMPEDEANCE)	5.48	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	68.0	%	[40.0-80.0]
Lymphocytes	26.0	%	[20.0-40.0]
Monocytes	5.0	%	[2.0-10.0]
Eosinophils	1.0	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
ESR	15.0 #	mm/1sthour	[0.0-



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex :Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 18:26

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 glyceemic control.			

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL Method:Oxidase,esterase, peroxide	212 #	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	127	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL Method : Enzymatic Immunoimhibition	60.0	mg/dl	[35.0-65.0]
VLDL- CHOLESTEROL (Calculated)	25	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	127.0 #	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189

Above optimal-100-129



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex : Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 15:48

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
eGFR (calculated) Technical Note	67.5	ml/min/1.73sq.m	[>60.0]

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.

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

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex : Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 15:49

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	3.5		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.1		<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	26.6	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	12.4	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	1.23 #	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization			
URIC ACID	5.9	mg/dl	[4.0-8.5]
Method: uricase PAP			
SODIUM, SERUM	140.50	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.28	mmol/L	[3.60-5.10]
SERUM CHLORIDE	105.2	mmol/L	[101.0-111.0]
Method: ISE Indirect			



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex : Male
Lab No : 202401003453
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 15:52

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	94.0	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.

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

Alka

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : MR VIKASH DAS

Registration No : MH011653234

Patient Episode : H18000001716

Referred By : HEALTH CHECK MGD

Receiving Date : 27 Jan 2024 12:41

Age : 51 Yr(s) Sex :Male

Lab No : 202401003454

Collection Date : 27 Jan 2024 12:41

Reporting Date : 27 Jan 2024 16:41

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE Specimen:Plasma GLUCOSE, POST PRANDIAL (PP), 2 HOURS Method: Hexokinase	83.0	mg/dl	[80.0-140.0]

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



LABORATORY REPORT

Name : MR VIKASH DAS Age : 51 Yr(s) Sex :Male
Registration No : MH011653234 Lab No : 202401003452
Patient Episode : H18000001716 Collection Date : 27 Jan 2024 08:51
Referred By : HEALTH CHECK MGD Reporting Date : 27 Jan 2024 18:25
Receiving Date : 27 Jan 2024 08:51

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Specimen Type : Serum			
PROSTATE SPECIFIC ANTIGEN(PSA-Total):	1.000	ng/mL	[<3.500]

Method :ELFA

Note :1.This is a recommended test for detection of prostate cancer along with Digital Recta Examination (DRE) in males above 50 years of age
damage caused by BPH, prostatitis, or prostate cancer may increase circulating PSA levels.
2. False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy
3. PSA levels may appear consistently elevated / depressed due to the interference by hetero antibodies & nonspecific protein binding
4. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massag indwelling catheterization, and ultrasonography and needle biopsy of prostate is not recomme as they falsely elevate levels
5. PSA values regardless of levels should not be interpreted as absolute evidence of the pre or absence of disease. All values should be correlated with clinical findings and results of other investigations
6. Sites of Non - prostatic PSA production are breast epithelium, salivary glands, peri - urethral & anal glands, cells of male urethra && breast mil
7. Physiological decrease in PSA level by 18% has been observed in hospitalized / sedentary patients either due to supine position or suspended sexual activity

Recommended Testing Intervals

- * Pre-operatively (Baseline)
- * 2-4 days post-operatively
- * Prior to discharge from hospital
- * Monthly follow-up if levels are high or show a rising trend

NOTE:

- Abnormal Values

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

Dr. Alka Dixit Vats



LABORATORY REPORT

Name : MR VIKASH DAS
Registration No : MH011653234
Patient Episode : H18000001716
Referred By : HEALTH CHECK MGD
Receiving Date : 27 Jan 2024 08:51

Age : 51 Yr(s) Sex : Male
Lab No : 202401003452
Collection Date : 27 Jan 2024 08:51
Reporting Date : 27 Jan 2024 18:25

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
THYROID PROFILE, Serum			
			Specimen Type : Serum
T3 - Triiodothyronine (ELFA)	0.980	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	6.720	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	13.500 #	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.

NOTE:

- Abnormal Values

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

Dr. Alka Dixit Vats
Consultant Pathologist



TMT INVESTIGATION REPORT

Patient Name	Vikash DAS	Location	: Ghaziabad
Age/Sex	: 51Year(s)/male	Visit No	: V0000000001-GHZZ
MRN No	11653234	Order Date	: 27/01/2024
Ref. Doctor	: HCP	Report Date	: 27/01/2024

Protocol	: Bruce	MPHR	: 169BPM
Duration of exercise	: 7min 07sec	85% of MPHR	: 143BPM
Reason for termination	: THR achieved	Peak HR Achieved	: 146BPM
Blood Pressure (mmHg)	: Baseline BP : 126/86mmHg Peak BP : 140/90mmHg	% Target HR	: 86%
		METS	: 8.7METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	70	126/86	Nil	No ST changes seen	Nil
STAGE 1	3:00	116	130/86	Nil	No ST changes seen	Nil
STAGE 2	3:00	133	136/86	Nil	No ST changes seen	Nil
STAGE 3	1:07	145	140/90	Nil	No ST changes seen	Nil
RECOVERY	3:15	90	130/90	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 test is **negative** for exercise induced reversible myocardial ischemia.

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