

Health Check up Booking Request(UBOIE4074), Beneficiary Code-169927

Mediwheel <wellness@mediwheel.in>
To: insurancedckc234@gmail.com
Cc: customercare@mediwheel.in

4 March 2024 at 16:38

Anil Bhandari@unionsbankofindia.com



Mediwheel
...Your wellness partner

011-41195959

Dear Dr. Charu Kohli Clinic

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

You confirm this booking? Yes No

Name : ANIL SINGH BHANDARI
Contact Details : 9871728817
Hospital Package Name : Mediwheel Full Body Plus Annual Check Advanced With Vitamin Male
Appointment Date : 06-03-2024

Member Information		
Booked Member Name	Age	Gender
ANIL SINGH BHANDARI	46 year	Male

*W - 95 kg
H - 170 cm*

Tests included in this Package -

- Bmi Check
- ✓ Ent Consultation
- Dietician Consultation
- 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
- Vitamin B12
- Vitamin D
- Urine Sugar Fasting
- Urine Sugar PP
- ✓ Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile
- Prostate Specific Antigen (PSA Male)
- Phosphatasa

Thanks,

Mediwheel Team

Please Download Mediwheel App



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NAME : ANIL SINGH BHANDARI
AGE/SEX : 46 Y/ M
DATE : 06.03.2024

Height	Weight	BP	BMI
170 cm	95 kg	110/70 mmHg	32.9
HABITS Smoking : NO ALCOHOL : NO DRUGS : NO			

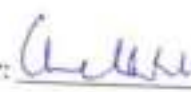
Family History: -

- Asthma : NO
- Diabetes : NO
- TB : NO
- Cancer : NO
- Heart Disease : NO
- HTN : NO
- BP : NO
- Thyroid : NO

Personal History:

- Pleurisy : NO
- Rheumatic : NO
- Acquired deformity : NO
- Operated for : NO
- Accidents : NO
- Psychosomatic history : NO
- Diabetes : NO
- Thyroid : NO
- BP : NO

Eye / Vision	DISTANCE VISION		NEAR VISION		COLOUR VISION	GLASSES
	RT Eye	LT Eye	RT Eye	LT Eye		
	6/6	6/6	N/6	N/6		

Signature of Medical Examiner: 

DR. CHARU KOHLI
CONSULTANT MBBS
DMC-8388

Breakfast

Egg.

12: PM

Granten.

Lunch

Dal, Vegetarian, ~~Sampla~~.

3: 30

Green tea

Nuts.

Dinner

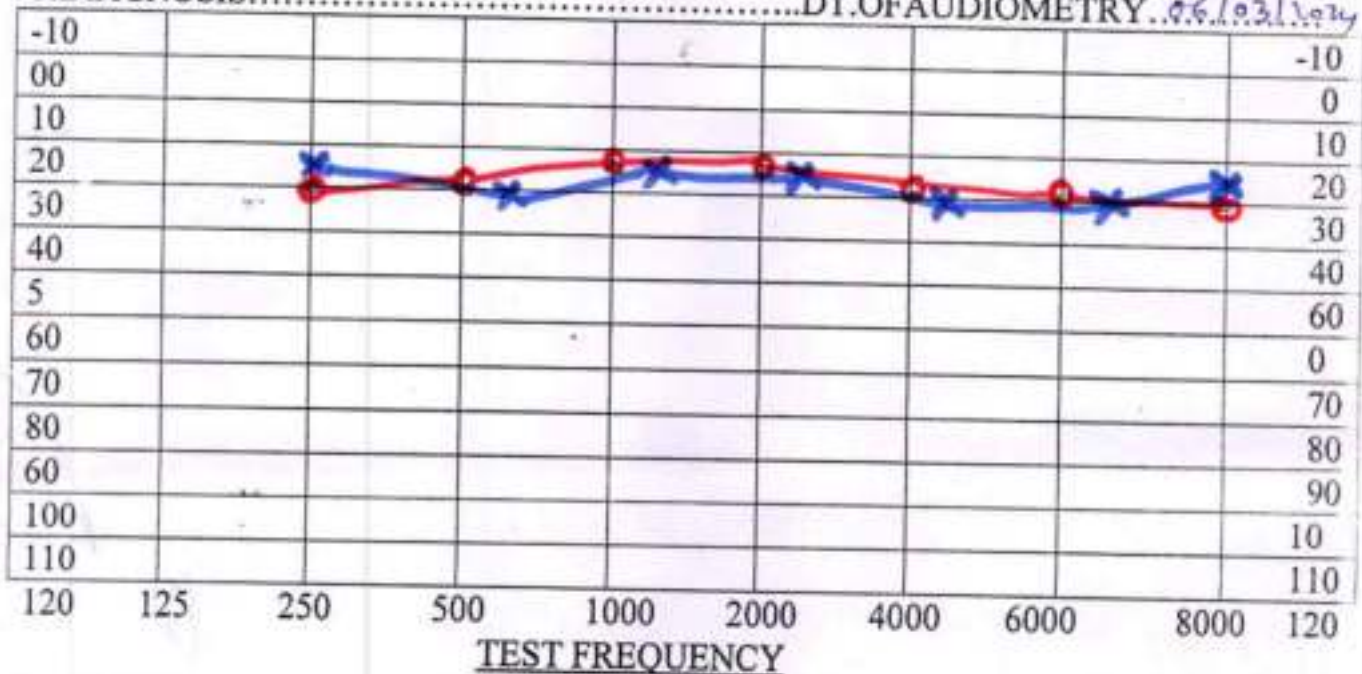
Nonveg, veget. Panera,

Suggestions

Add 4 piece of dry fruits by 4 almonds
/ 4 walnuts
2 fruits & salads.

AUDIOLOGICAL EVALUATION

1. NAME ANIL SINGH BHANDARI AGE 46y SEX M
 2. ADDRESS.....
 OCCUPATION.....
 3. DIAGNOSIS..... DT. OF AUDIOMETRY 06/03/2024



AIR X =LEFT EAR--- Rinne----- Hearing Loss for Speech R L _____
 O =RIGHT EAR -----

BONE < =LEFT EAR --- Weber----- DISCRIMINATION SCORE R L _____

Masking

No Response
Audiologists remarks

- 0dB-20dB....normal hearing
- 20dB-40dB....mild hearing loss
- 40dB-55dB....moderate hearing loss
- 55dB-70dB....moderately severe hearing loss
- 70dB-90dB....sever hearing loss
- >90dB.....profound hearing loss

Mr. ANIL SINGH BHANDARI
ID : 78
AGE/SEX : 46/M
RECORDED : 6-3-2024 9:32

RATE : 105 BPM
B.P. : 110/70 mmHg

DR. CHARU KOHLI'S CLINIC

SUPINE
PRETEST

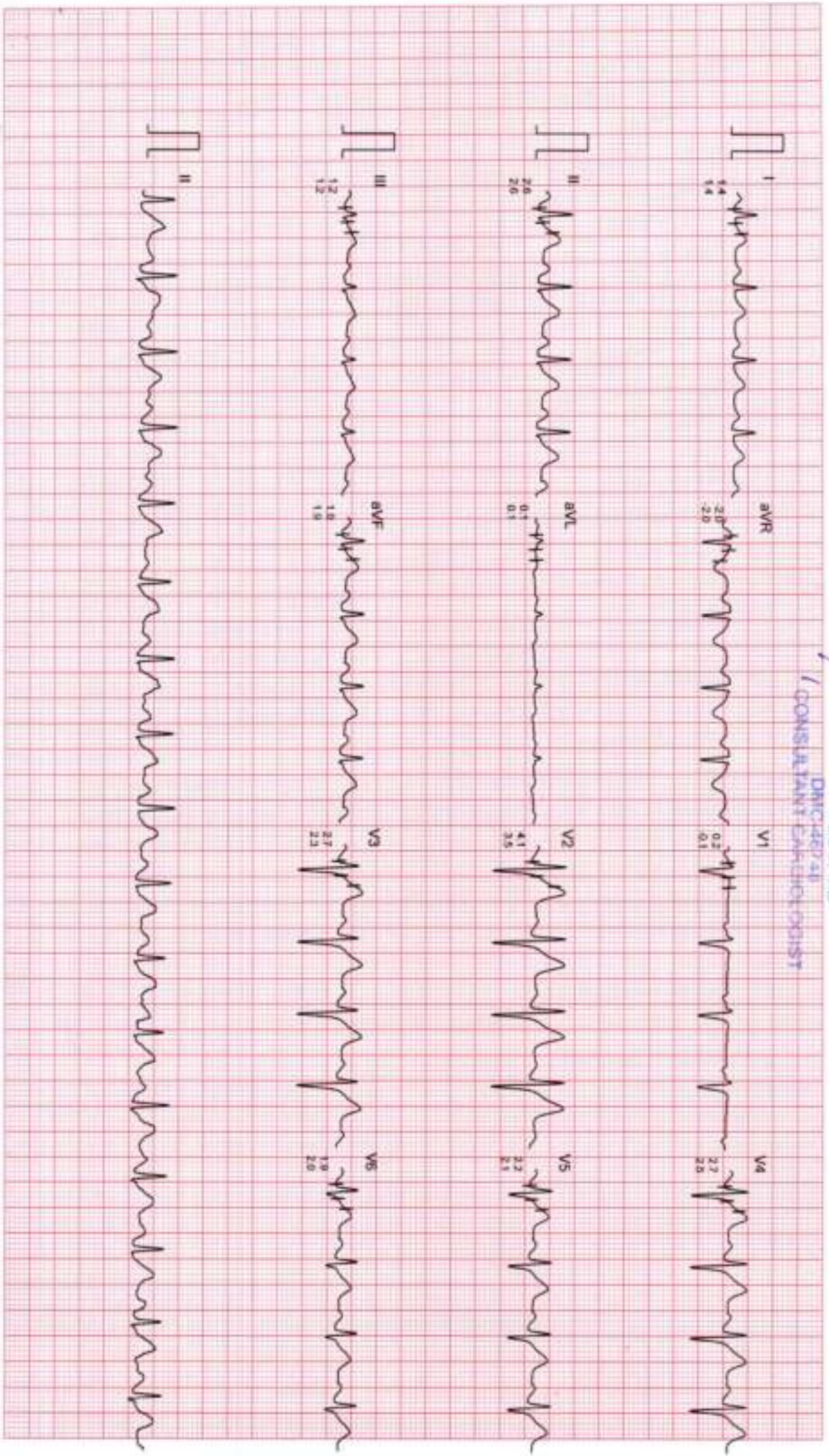
DR. D. R. RAJIV
MBBS MD



ST @ 10mm/mV
Borns Posell

LINKED MEDIUM

DR. D. R. RAJIV
CONSULTANT ELECTROCARDIOLOGIST



DR. CHARU KOHLI'S CLINIC

C-234, Defence Colony, New Delhi

Mr. ANIL SINGH BHANDARI
Age/Sex : 46/M
Recorded : 6-3-2024 9:32
Ref by :
Indication :

ID : 78
H/W : /

TREADMILL TEST SUMMARY REPORT

Protocol: BRUCE

History:

Medication :

Signature

PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP (X100)	II	ST LEVEL (mm)	V2	V5	METS
SUPINE												
HYPERTENT	0:02	0:02			105	110/70	115	2.6	4.1	2.2	2.2	4.80
VALSALVA					106	110/70	116	2.6	4.2	2.3	2.3	7.10
STANDING					106	110/70	116	2.6	4.2	2.3	2.3	10.00
					106	110/70	116	2.6	4.2	2.3	2.3	10.65
STAGE 1	2:59	2:59	2.70	10.00	130	110/70	143	2.2	3.8	2.1	2.1	4.80
STAGE 2	5:59	2:59	4.00	12.00	140	124/76	173	1.9	3.8	2.1	2.1	7.10
STAGE 3	8:59	2:59	5.40	14.00	151	149/82	220	0.9	2.9	1.1	1.1	10.00
STAGE 4	9:29	0:29	6.70	16.00	160	160/90	256	-1.1	1.4	0.4	0.4	10.65
PEAK EXERCISE	9:31	0:31			160	160/90	256	-1.1	1.4	0.4	0.4	10.69
RECOVERY	2:59	2:59	0.00	0.00	122	132/80	161	1.2	2.3	1.0	1.0	
RECOVERY	5:59	5:59	0.00	0.00	116	120/70	139	1.5	2.4	1.1	1.1	

RESULTS

Exercise Duration : 9:31 Minutes
Max Heart Rate : 160 bpm
Max Blood Pressure : 160/90 mmHg
Max Work Load : 10.69 METS
Reason of Termination :

IMPRESSIONS

Negative for PMS with the presentation of exercise

Cardiologist

Signature
DR. D. R. RAJIV
MBBS, MD
DMC-46748
CONSULTANT CARDIOLOGIST

Mr. ANIL SINGH BHANDARI

ID : 78

AGE/SEX : 46/M

RECORDED : 6-3-2024 9:32

RATE : 105 BPM

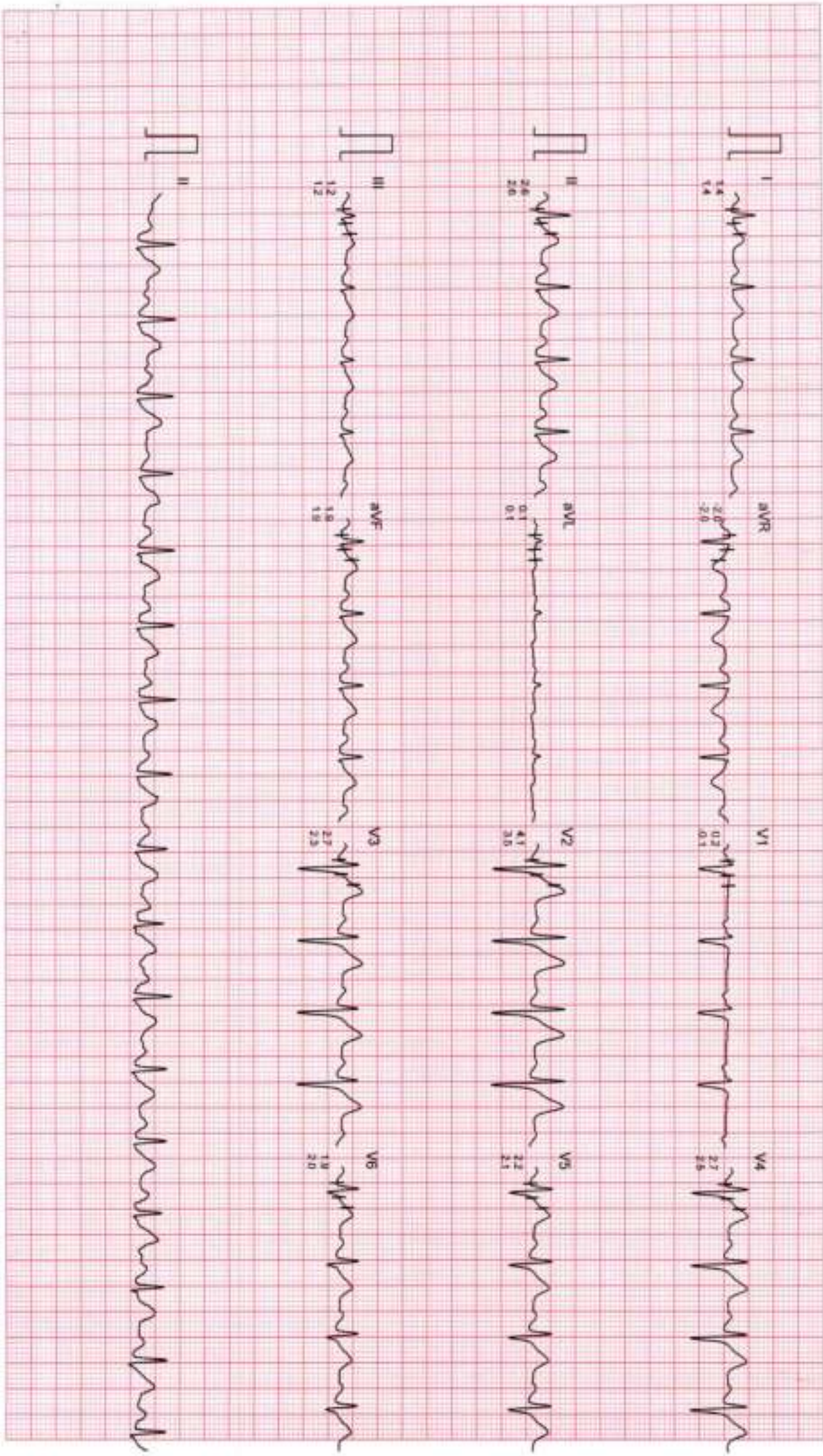
B.P. : 110/70 mmHg

DR. CHARU KOHLI'S CLINIC

SUPINE
PRETEST

ST @ 10mm/mV
80ms PostU

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph. 091-731-2620740, Telefax 091-731-2431214

Mr. ANIL SINGH BHANDARI

I.D. : 78

AGE/SEX : 46/M

RECORDED : 6-3-2024 9:32

DR. CHARU KOHLI'S CLINIC

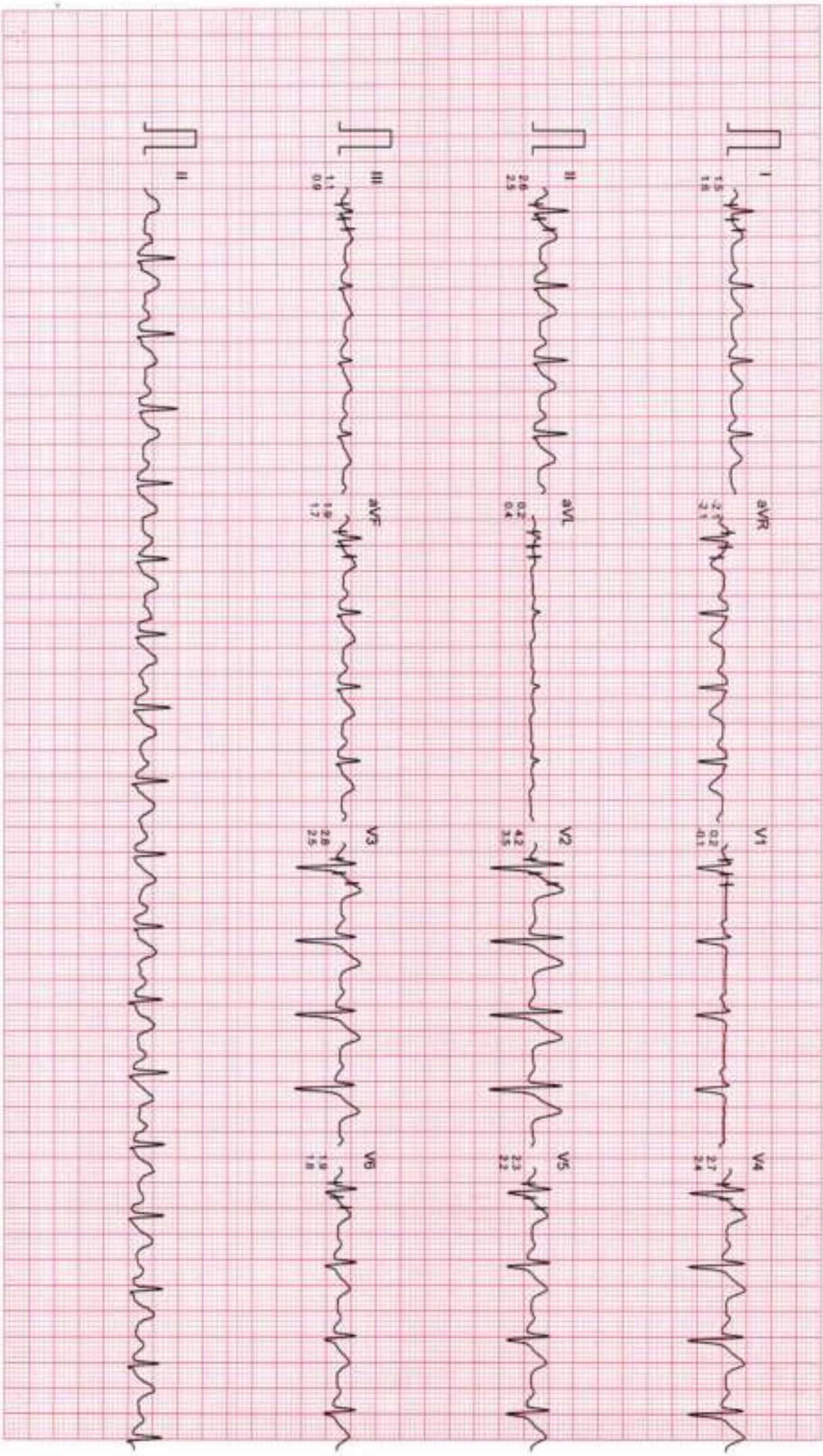
HYPERVENTILATION

PRETEST

STAGE TIME : 0:02

ST @ 10mm/mv
80ms PostJ

LINKED MEDIAN



Filtered

Computer Corrected Baseline

ZenithSec 10mm/mv

CardiCom, INDIA Ph. 091-731-2620740, Telefax 091-731-2431214

Mr. ANIL SINGH BHANDARI

I.D. : 78

AGE/SEX : 46M

RECORDED : 6-3-2024 9:32

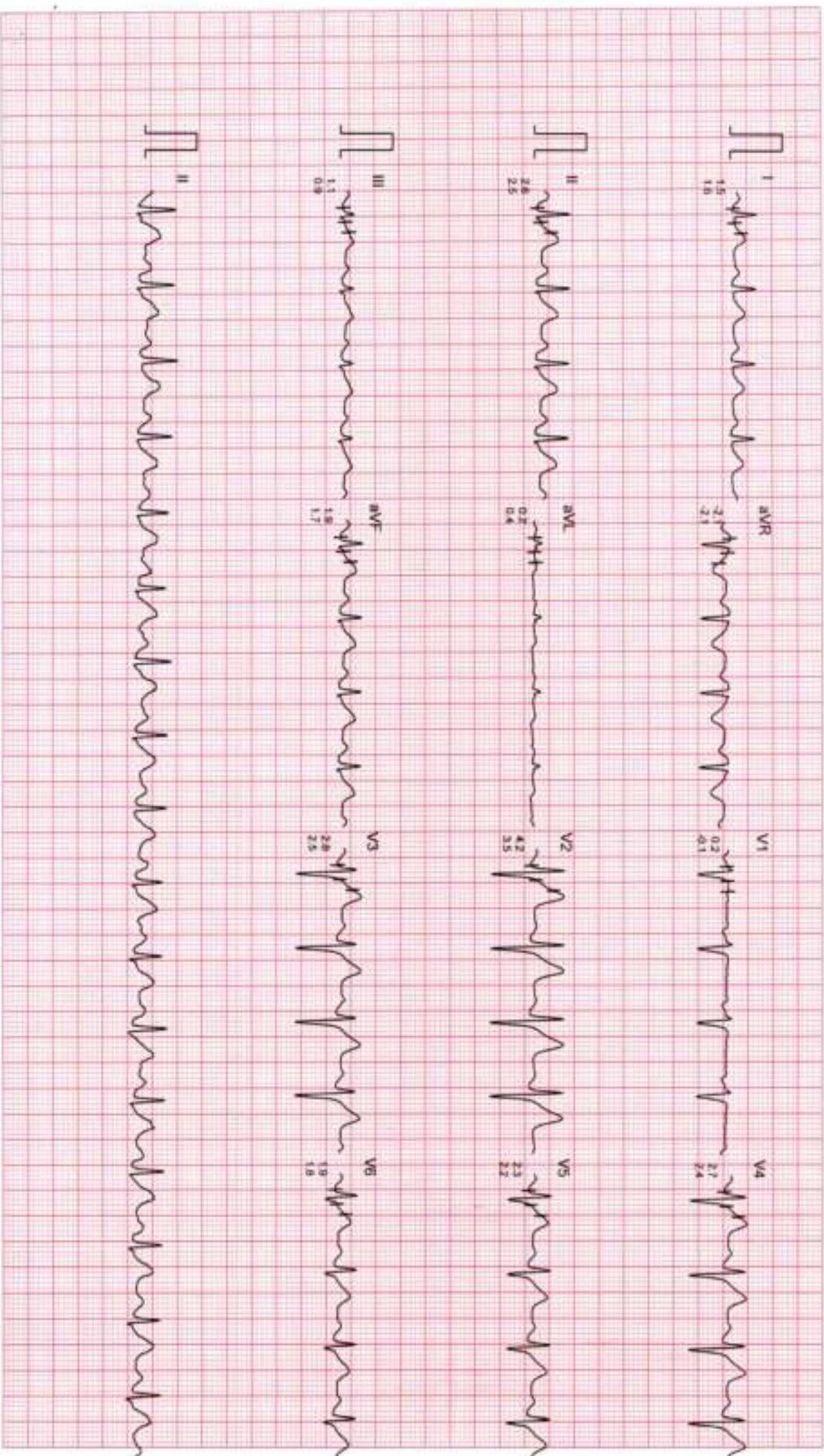
DR. CHARU KOHLI'S CLINIC

VALSALVA
PRETEST

ST @ 10mm/mV
50ms PostJ

RATE : 106 BPM
B.P. : 110/70 mmHg

LINKED MEDIUM



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph. 091-731-2620740 TeleFax 091-731-2431214

DR. CHARU KOHLI'S CLINIC

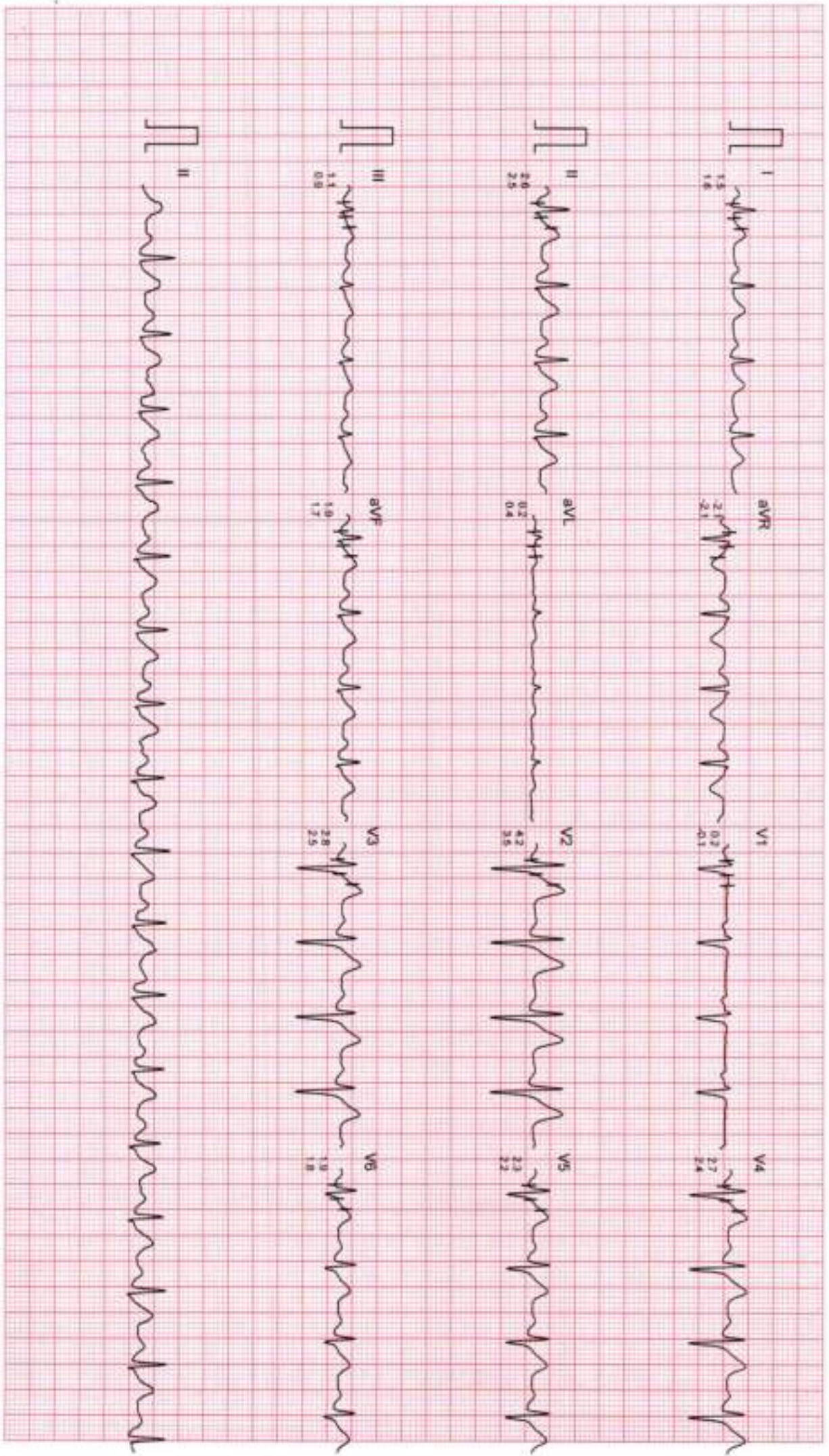
STANDING
PRETEST

ST @ 10mm/mV
80ms Postl

Mr. ANIL SINGH BHANDARI
I.D. : 78
AGE/SEX : 46/M
RECORDED : 6-3-2024 9:32

RATE : 106 BPM
B.P. : 110/70 mmHg

LINKED MEDIUM



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph. 091-731-2620740, Telefax 091-731-2431214

DR. CHARU KOHLI'S CLINIC

Mr. ANIL SINGH BHANDARI

ID : 78

AGE/SEX : 46M

RECORDED : 6-3-2024 9:32

BRUCE

EXERCISE 1

PHASE TIME : 2:59

STAGE TIME : 2:59

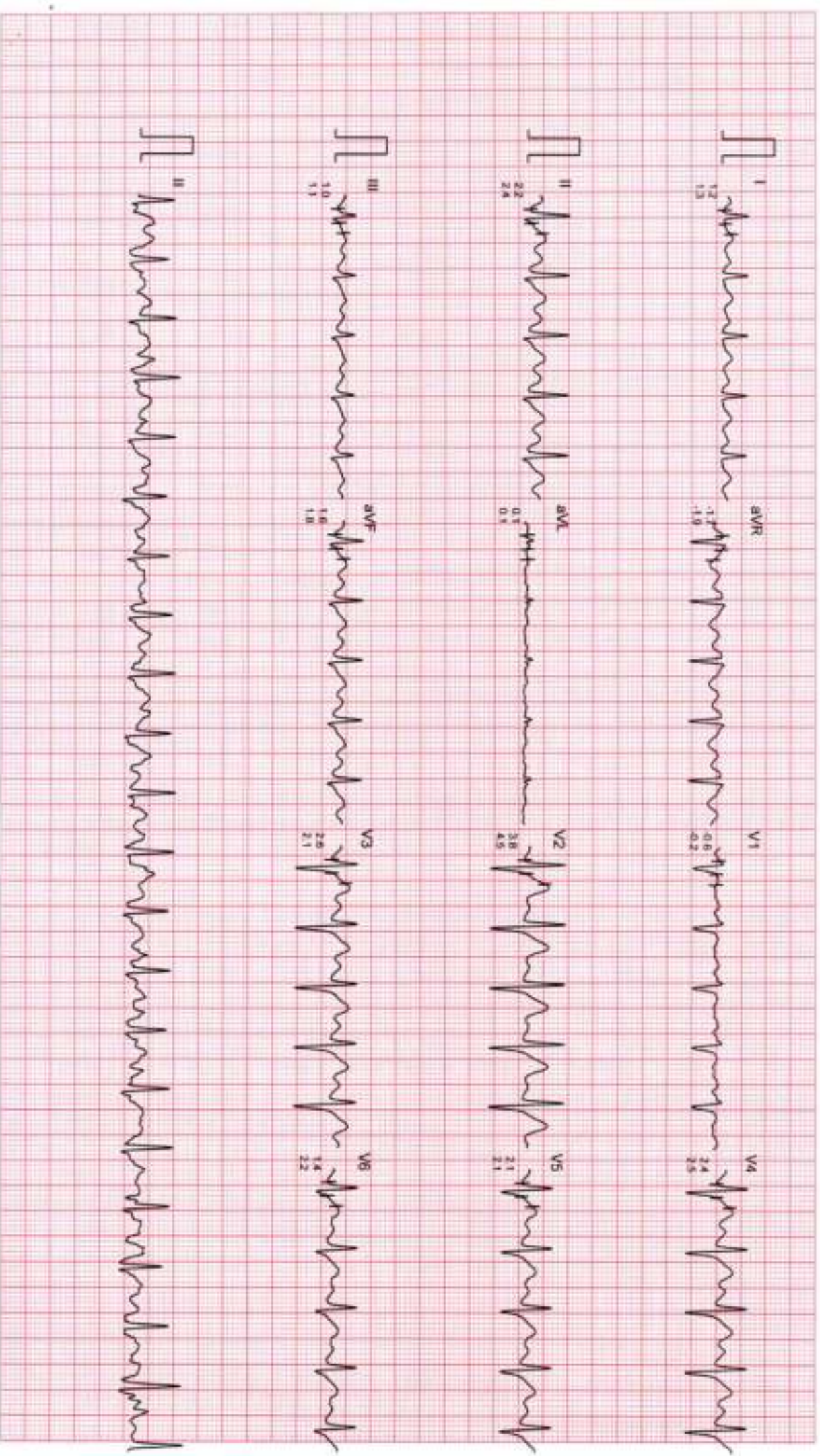
ST @ 10mm/mv

80ms PostJ

SPEED : 2.7 Km /Hr

GRADE : 10.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mv

CardiCom, INDIA Ph. 091-731-2620740, Telefax: 091-731-2431214

Mr. ANIL SINGH BHANDARI

I.D. : 78

AGE/SEX : 46/M

RECORDED : 6-3-2024 9:32

RATE : 140 BPM

B.P. : 124/76 mmHg

DR. CHARU KOHLI'S CLINIC

BRUCE

EXERCISE 2

PHASE TIME : 5:59

STAGE TIME : 2:59

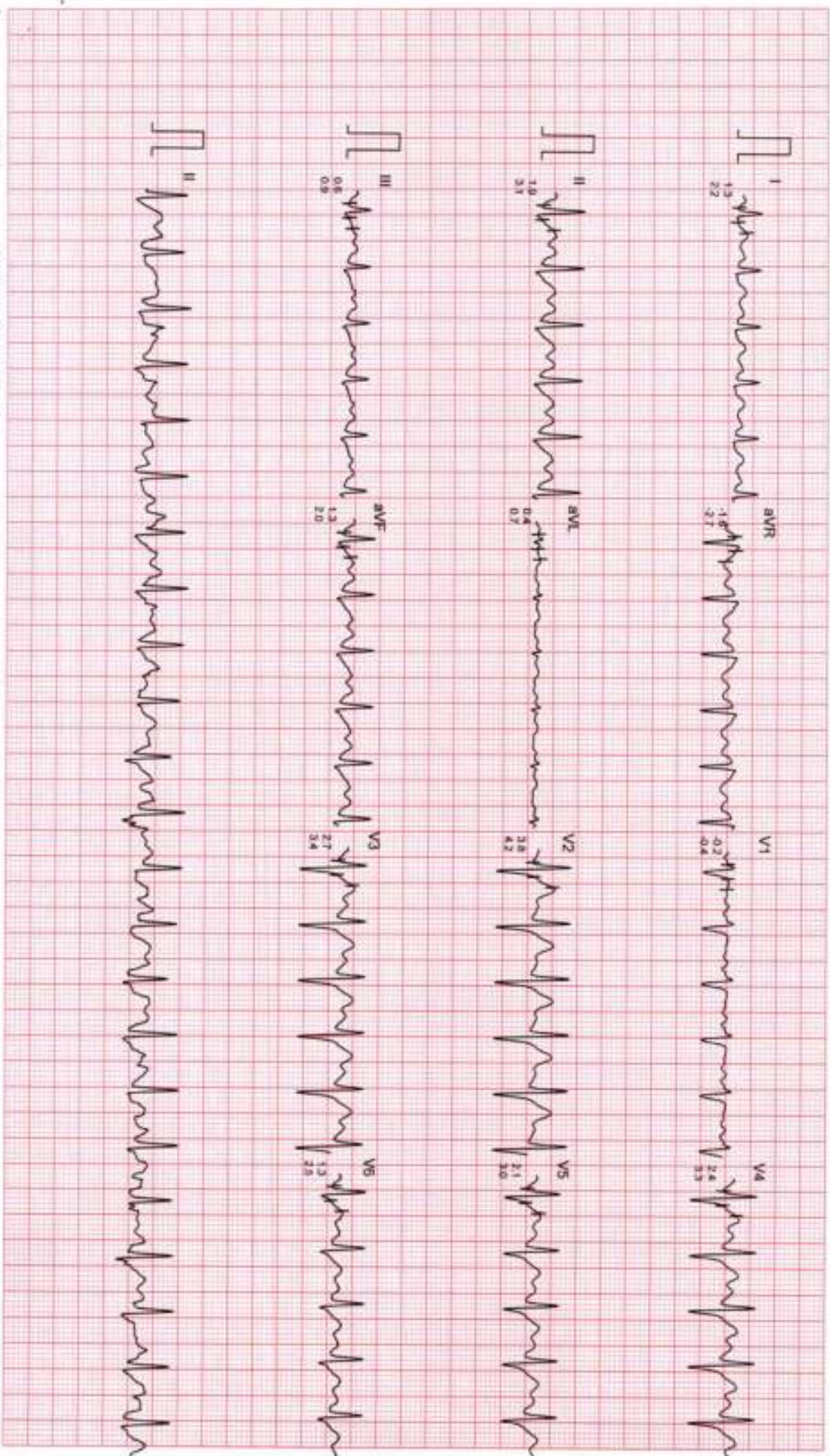
ST @ 10mm/mV

80ms PostJ

SPEED : 4.0 Km./Hr.

GRADE : 12.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardCom, INDIA Ph. 091-731-2620740, TeleFax: 091-731-2431214

DR. CHARU KOHLI'S CLINIC

Mr. ANIL SINGH BHANDARI

ID : 78

AGE/SEX : 46M

RECORDED : 6-3-2024 9:32

RATE : 151 BPM

B.P. : 146/92 mmHg

BRUCE

EXERCISE 3

PHASE TIME : 8:59

STAGE TIME : 2:59

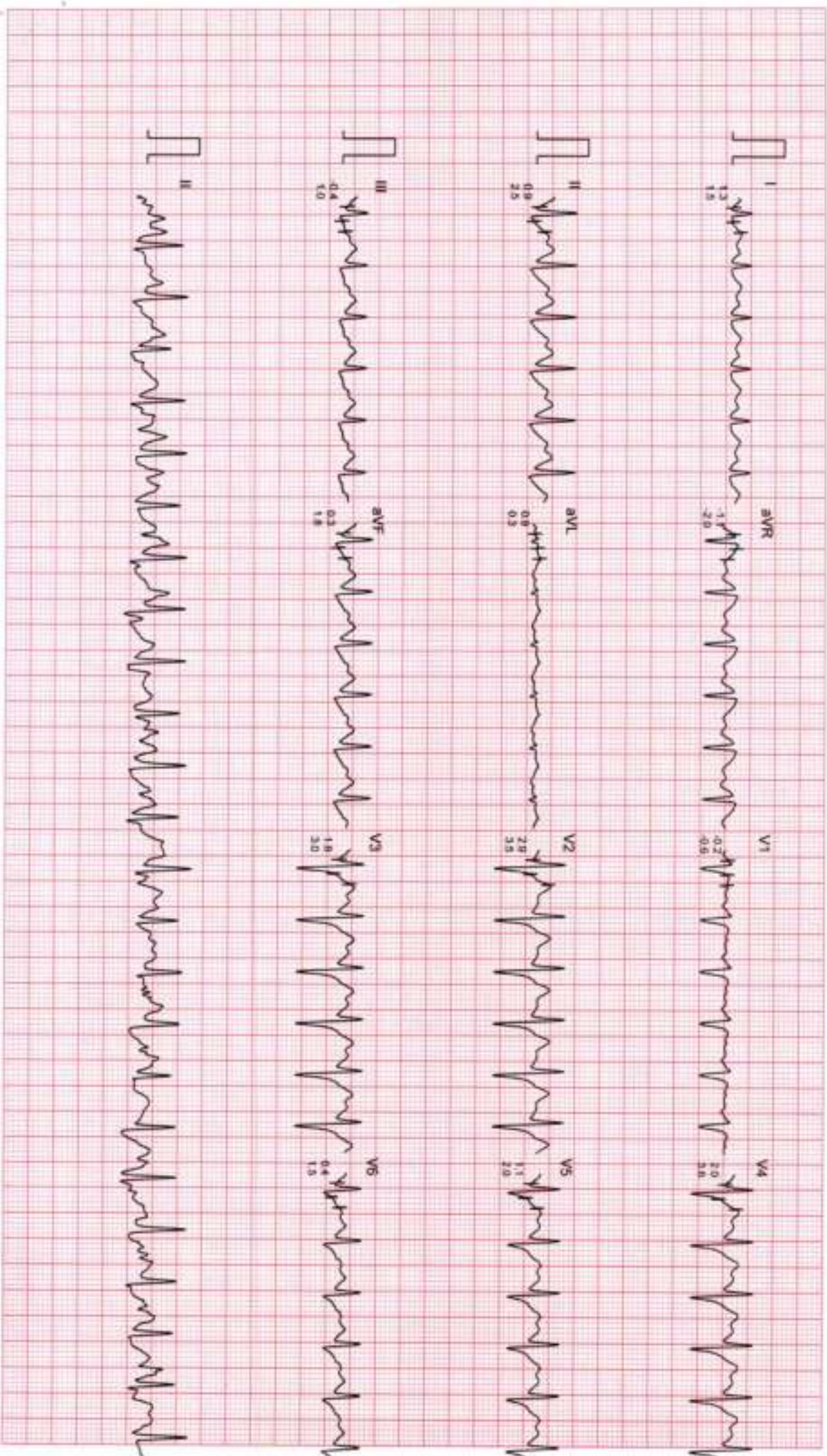
ST @ 10mm/mv

90ms PostJ

SPEED : 5.4 Km./Hr.

GRADE : 14.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mv

CardiCom, INDIA Ph. 091-731-26507/40, TeleFax:091-731-24312/4

MR. ANIL SINGH BHANDARI

ID : 78

AGE/SEX : 46/M

RECORDED : 6-3-2024 9:32

DR. CHARU KOHLI'S CLINIC

BRUCE

EXERCISE 4

PHASE TIME : 9:29

STAGE TIME : 0:29

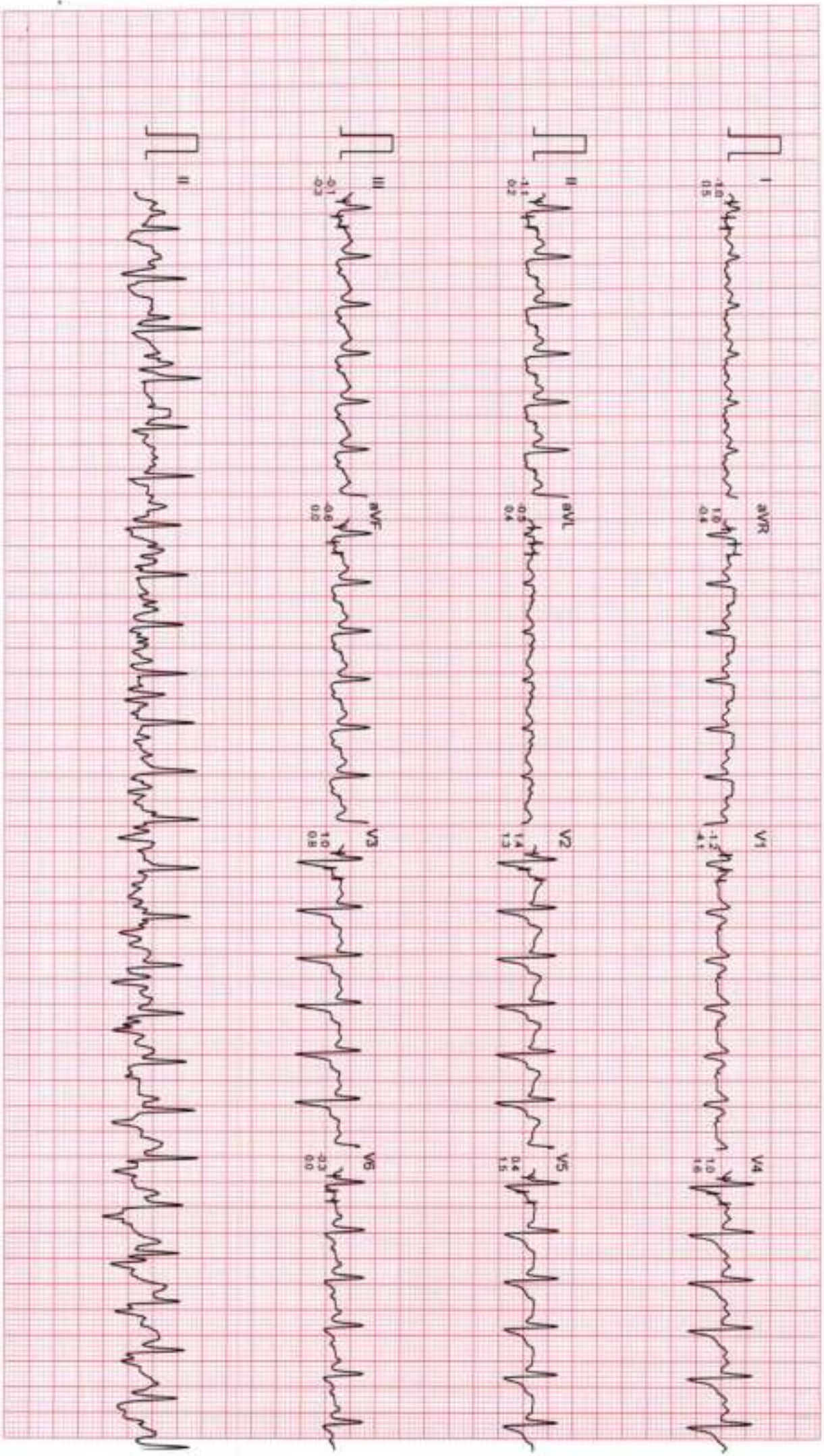
ST @ 10mm/mV

80ms PostJ

SPEED : 6.7 Km/Hr.

GRADE : 16.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph. 091-731-2620740, Telex 9x091-731-2431214

MR. ANIL SINGH BHANDARI

ID : 78
AGE/SEX : 45/M
RECORDED : 6-3-2024 9:32

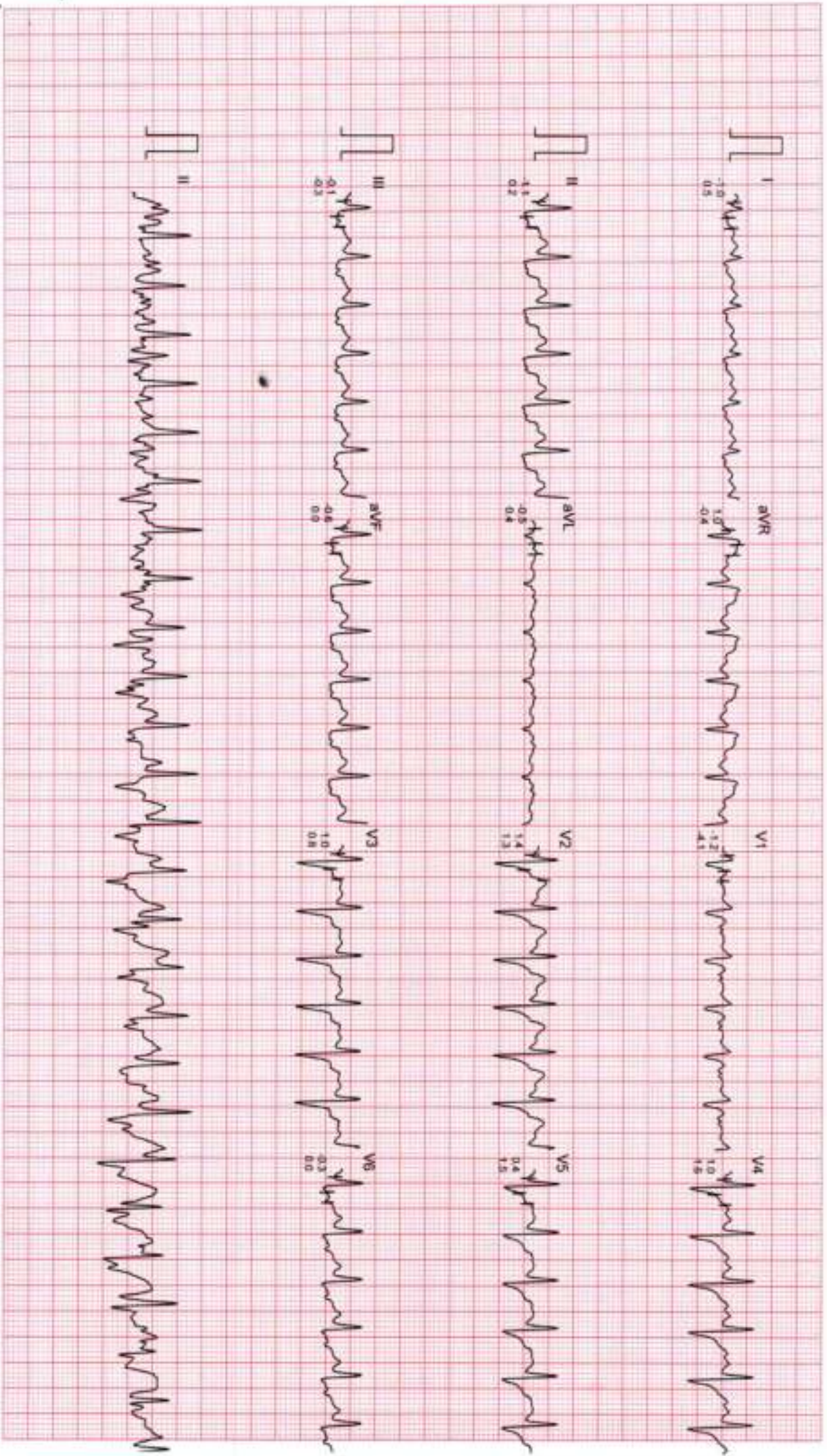
RATE : 160 BPM
B.P. : 160/90 mmHg

DR. CHARU KOHLI'S CLINIC

BRUCE
PEAK EXERCISE
PHASE TIME : 9:31
STAGE TIME : 0:31

ST @ 10min/IV
80ms PostJ
SPEED : 6.7 Km./Hr.
GRADE : 16.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

Zsennivoc 10min/IV

CardiConn, INDIA Ph. 091-731-2620740, TeleFax 091-731-2431214

DR. CHARU KOHLI'S CLINIC

Mr. ANIL SINGH BHANDARI

ID : 78

AGE/SEX : 46M

RECORDED : 6-3-2024 9:32

RATE : 142 BPM

B.P : 160/90 mmHg

BRUCE

RECOVERY

PHASE TIME : 0:59

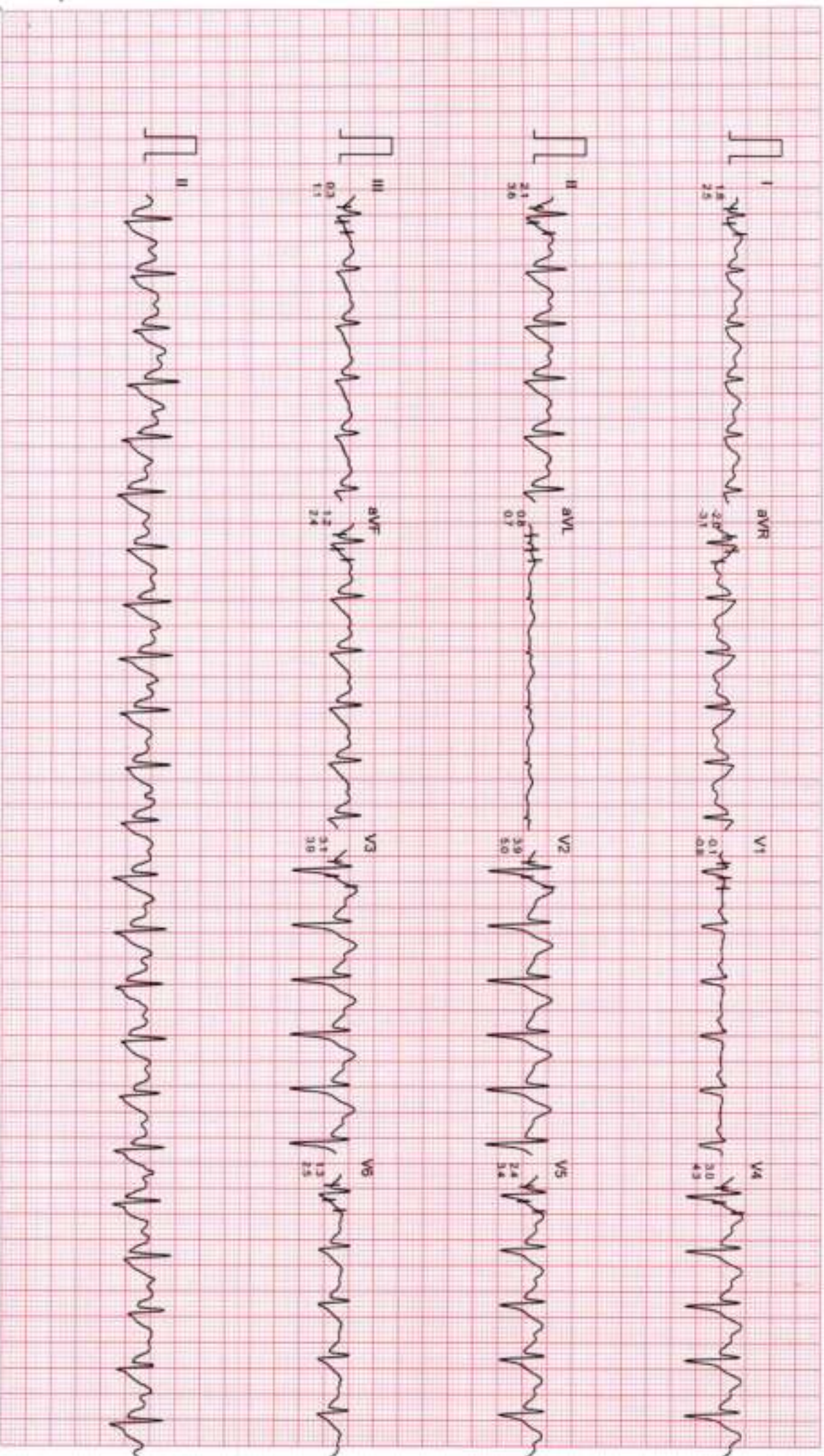
ST @ 10mm/mV

80ms PostL

SPEED : 0.0 Km./hr.

GRADE : 0.0 %

LINKED MEDIUM



Filtered

Computer Corrected Baseline

Zoom/Sec: 10mm/mV

CardiCom, INDIA Ph. 091-731-2620740, Telefax: 091-731-2431214

DR. CHARU KOHLI'S CLINIC

Mr. ANIL SINGH BHANDARI

I.D. : 78

AGE/SEX : 46/M

RECORDED : 6-3-2024 9:32

RATE : 122 BPM

B.P. : 132/80 mmHg

BRUCE

RECOVERY

PHASE TIME : 2:59

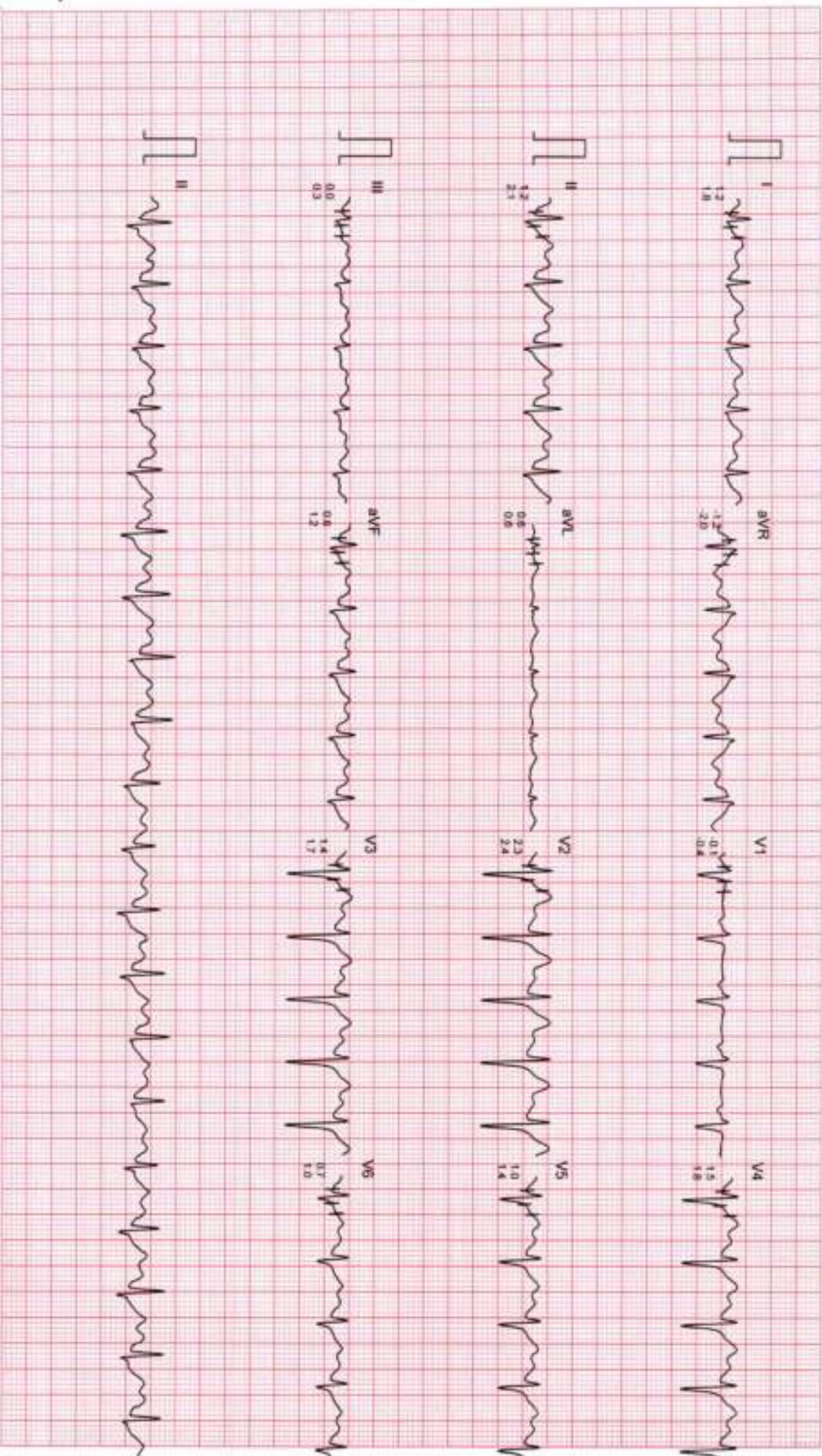
ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km./hr.

GRADE : 0.0 %

LINKED MEDIUM



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardCom, INDIA Ph. 091-731-2620740, Telex: 091-731-2431214

DR. CHARU KOHLI'S CLINIC

Mr. ANIL SINGH BHANDARI

ID : 78

AGE/SEX : 46M

RECORDED : 6-3-2024 9:32

BRUCE

RECOVERY

PHASE TIME : 5:59

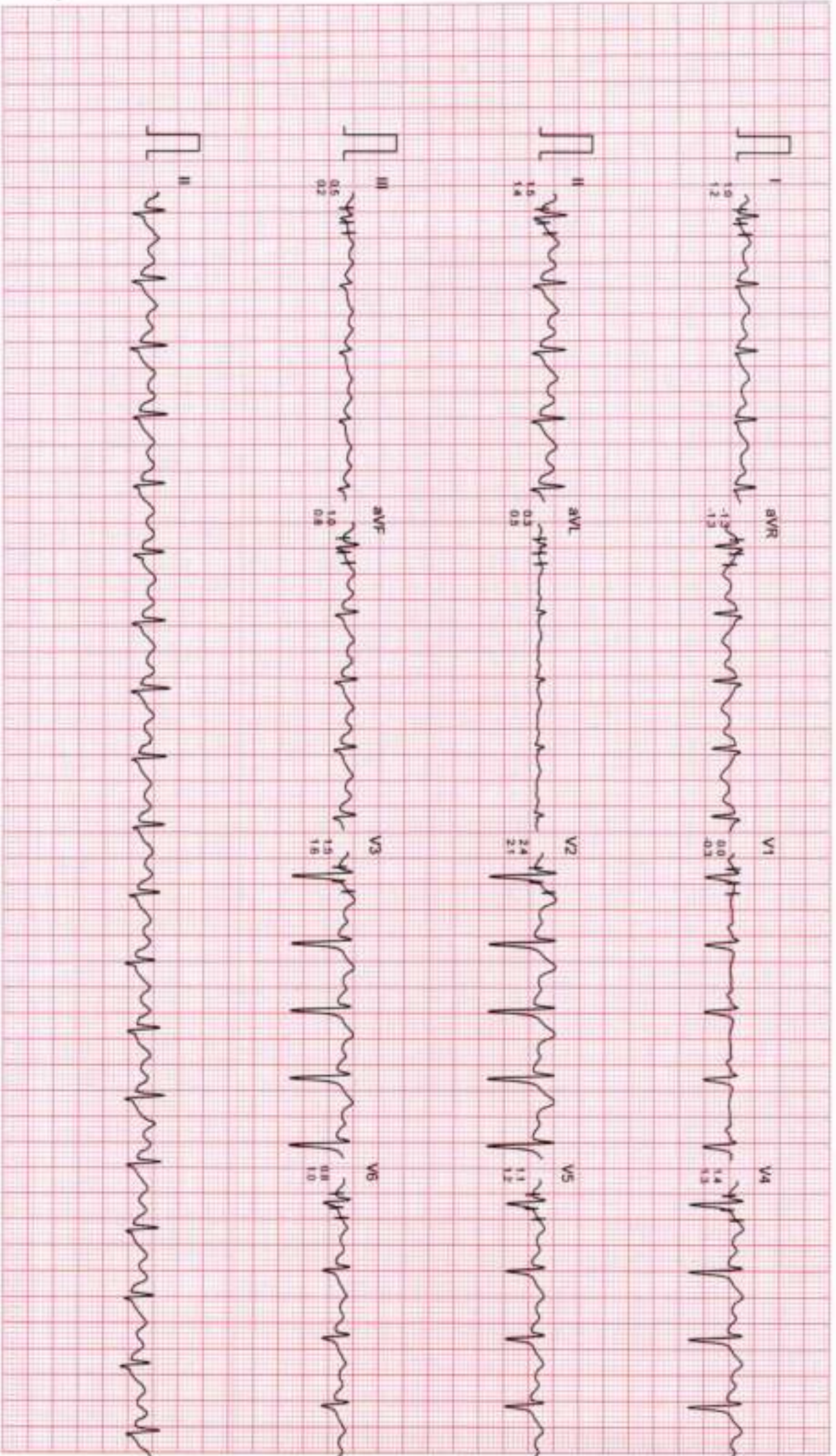
ST @ 10mm/mV

80ms PostU

SPEED : 0.0 Km/HR

GRADE : 0.0 %

LINKED MEDIAN

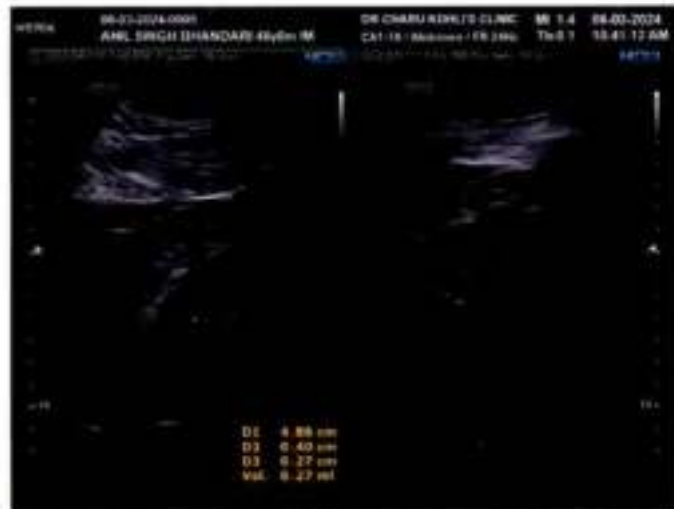
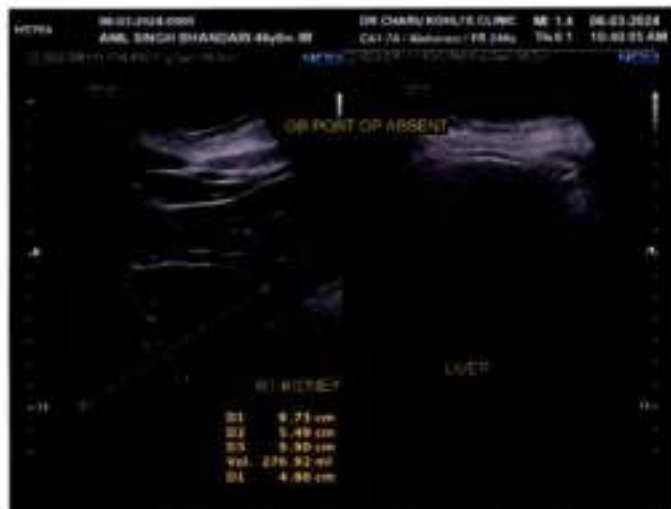
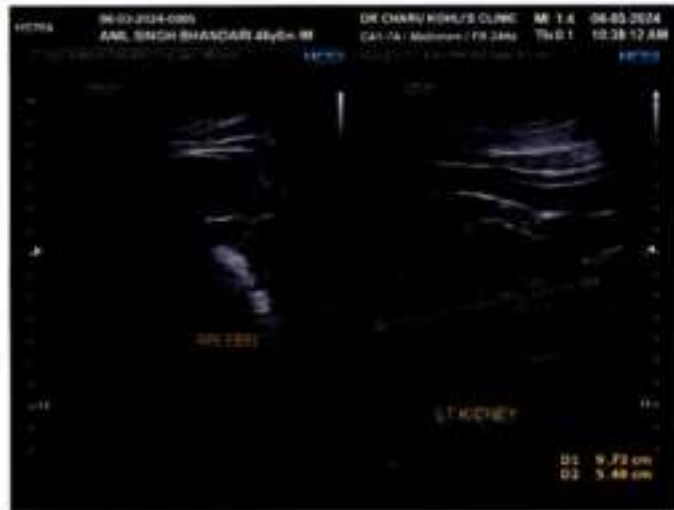


Filtered

Computer Corrected Baseline

ZenonSec 10mm/mV

CardCom, INDIA Ph- 091-731-2620740, Telex-ax:3991-731-2431214



NAME: ANIL SINGH BHANDARI
DATE: March 6, 2024

WHOLE ABDOMEN SCAN

Liver is normal in size and echotexture is maintained. Normal intrahepatic biliary radicles and normal appearing venous channels noted. No focal lesion in either lobes. Portal vein is normal. No sub-diaphragmatic collection or pleural effusion.

Gall bladder is post operative absent.
CBD: not dilated ; apparently echofree.

Both the kidneys are normal in size, position and echopattern with normal corticomedullary differentiation.

RK: 9.90 x 4.86 cm & shows microlith measuring 4.0mm & 2.7 mm.
LK: 9.73 x 5.49 cm

Pancreas is of normal size & echopattern. No focal lesion or peri-pancreatic collection.

Spleen is of normal size and echopattern. No focal lesion or calcification. Splenic vein is not dilated.

Aorta and IVC are normal. No retroperitoneal lymphadenopathy.

Urinary bladder shows normal distension and shows normal wall-thickness. No calculus or mass.


Prostate is normal in size measures 3.38 x 3.48 x 2.89 cm, volume measures 17.79 cc echopattern is homogenous.

Bowel loops are normal.

No free fluid is seen in abdomen.

IMPRESSION:

Right renal microliths noted with post op absent gb, otherwise sonological study is within normal limits


Dr Charu Kohli
MBBS DMRD
DMC8388

DR. CHARU KOHLI
CONSULTANT RADIOLOGIST
DMC - 8388
DR. CHARU KOHLI'S CLINIC

IMPORTANT: Owing to technical limitations ,in case of any error in the study ,the Doctor cannot be held responsible for claim of damages of any nature,and this report is not valid for any Medicolegal aspect.
Every modern technology has its own limitations , in case of discrepancy/difference in opinion advised- repeat scan/ second opinion



Registration No.	102320789	Mobile No.	9871728817
Patient Name	Mr. ANIL SINGH BHANDARI	Registration Date/Time	06/03/2024 08:44:45
Age / Sex	46 Yrs Male ^{Male}	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 16:25:16
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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HAEMATOLOGY

Complete Blood Count (CBC)

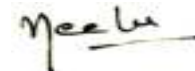
Haemoglobin (Hb) ,EDTA <i>Method : Colorimetric</i>	12.8	g/dL	13.0 - 17.0
Total Leucocyte Count (TLC) ,EDTA <i>Method : Electric impedance</i>	10.7	10 ⁹ /L	04.0 - 11.0
Red Blood Cell (RBC) ,EDTA <i>Method : Electric impedance</i>	4.49	10 ⁶ /uL	4.50 - 5.50
Hematocrit (HCT /PCV) ,EDTA <i>Method : Pulse height detection</i>	39.5	%	40.0 - 50.0
Mean Corp Volume (MCV) ,EDTA <i>Method : Calculated</i>	88.0	fL	83.0 - 101.0
Mean Corp Hb (MCH) ,EDTA <i>Method : Calculated</i>	28.5	pg	27.0 - 32.0
Mean Corp Hb Conc (MCHC) ,EDTA <i>Method : Calculated</i>	32.3	g/dL	31.5 - 34.5
Platelet Count(PLT) ,EDTA <i>Method : Electric impedance/Microscopy</i>	158.00	10 ³ /uL	150.00 - 410.00

ADVISE: PLATELET REPORTED AFTER MANUAL REVIEW OF THE SLIDE.

RDW- CV% ,EDTA	14.1	%	11.6 - 14.0
Differential Leucocyte Count <i>Method : Microscopy</i>			
Neutrophil ,EDTA	73.0	%	40.0 - 80.0
Lymphocyte ,EDTA	20.0	%	20.0 - 45.0
Eosinophil ,EDTA	2.0	%	1.0 - 6.0
Monocyte ,EDTA	5.0	%	2.0 - 10.0
Basophil ,EDTA	0.0	%	0.0 - 2.0

Page No: 1 of 12

Checked By :- POOJA



DR. NEELU CHHABRA
MD. PATHOLOGIST

At Your Home: Collection of Blood Samples, ECG, Digital X-Ray

Occupational Health Service • Diagnostic & Preventive • Health Assessment • Periodic Preventive Health Camps • Corporate Health Checks

Ultrasound | Digital X Ray | DEKA | Mammography | Path Lab | ECHO | TMT | Healthchecks | PFT | Holter | Audiometry



Registration No.	102320789	Mobile No.	9871728817
Patient Name	Mr. ANIL SINGH BHANDARI	Registration Date/Time	06/03/2024 08:44:45
Age / Sex	46 Yrs Male Male	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 16:08:01
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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ESR ,EDTA Method : Westergreen	15	mm/1st hr.	00 - 15
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Registration No.	102320789	Mobile No.	9871728817
Patient Name	Mr. ANIL SINGH BHANDARI	Registration Date/Time	06/03/2024 08:44:45
Age / Sex	46 Yrs Male ^{Male} s	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 17:34:02
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

Blood Group ABO ,EDTA

Method : Forward Grouping

"A"

Rh Typing ,EDTA

Method : Forward Grouping

POSITIVE

HbA1c ,EDTA

Method : Photometric method

6.9 %

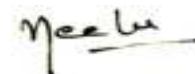
INTERPRETATIONS:-

NORMAL RANGE **4.00 - 5.60** %

Pre Diabetic/ Higher chance of getting diabetes	5.70	- 6.20	%
Good Diabetic Control	6.20	- 6.80	%
Fair Diabetic Control	6.80	- 7.60	%
Uncontrolled Diabetes -action suggested	>7.6		%

Note:-

Glycosylated Haemoglobin is a specific component of HBA1C and is the blood glucose bound to it. This test is an index of carbohydrate in balance during the preceeding two months. The estimation is of greater importance for specific group of patient. This result are not affected by time, meal intake exercise, diabetic drugs, emotional Stress etc. HbA1c should be routinely monitored ideally at least every 3 months.





Registration No.	102320789	Mobile No.	9871728817
Patient Name	Mr. ANIL SINGH BHANDARI	Registration Date/Time	06/03/2024 08:44:45
Age / Sex	46 Yrs Male ^{Male}	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 16:25:16
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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BIOCHEMISTRY

LIPID PROFILE

Total Lipids ,Serum Plain	593	mg/dl	400 - 700
Serum Cholesterol ,Serum Plain <i>Method : CHOD-POD</i>	195	mg/dl	0 - 200
Serum Triglycerides ,Serum Plain <i>Method : GPO-POD</i>	203	mg/dl	60 - 165
Serum HDL Cholesterol ,Serum Plain <i>Method : Direct Method</i>	39	mg/dl	40 - 70
Serum LDL Cholesterol ,Serum Plain <i>Method : Calculated</i>	115.4	mg/dl	30.0 - 100.0
Serum VLDL Cholesterol ,Serum Plain <i>Method : Calculated</i>	40.6	mg/dl	24.0 - 45.0
Total CHO/HDL Cholesterol Ratio ,Serum Plain <i>Method : Calculated</i>	5.00		
LDL/HDL Cholesterol Ratio ,Serum Plain <i>Method : Calculated</i>	2.96		

Guidelines for Total Blood Cholesterol Levels on 11 to 12 hour fasting samples.

Desirable : Less than 200 mg/dl

Borderline High Risk : 200 to 239 mg/dl

High Risk : 240 mg/dl and over, on repeated values

Optimal Level for Cardiac Patients : Less than 200 mg/dl

HDL-C : High HDL has generally been found to be protective, decreasing the risk of coronary Artery disease (CAD) in most people. However, some recent studies have shown that in some people with high HDL, the HDL is not protective and may, in fact result in higher risk for CAD than in people with normal HDL levels. In one study it was shown that people with CAD and high HDL had underlying genetic anomalies in enzymes important in lipid turnover. Another study showed that high levels of abnormally large HDL particles were associated with increased risk of CAD. Factors that elevate HDL concentrations include chronic alcoholism, treatment with oral estrogen replacement therapy, extensive aerobic exercise, and treatment with niacin, statins, or fibrates. Smoking reduces levels of HDL cholesterol, while quitting smoking leads to a rise in the plasma HDL level.

Triglycerides
Female 40 - 140
Male 60 - 165

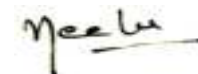
Adult levels:

Optimal <100 mg/dL
Near Optimal/ above optimal 100 -129 mg/dL
Borderline high 130 - 159 mg/dL
High 160 - 189 mg/dL
Very High ≥190 mg/dL

KIDNEY FUNCTION TEST (KFT)

Blood Urea ,Serum Plain <i>Method : Urease -UV</i>	32.8	mg/dl	15.0 - 45.0
Serum Creatinine ,Serum Plain <i>Method : Modified Jaffe's</i>	0.80	mg/dl	0.40 - 1.50

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Registration No.	102320789	Mobile No.	9871728817
Patient Name	Mr. ANIL SINGH BHANDARI	Registration Date/Time	06/03/2024 08:44:45
Age / Sex	46 Yrs Male Male	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 17:37:12
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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Serum Uric Acid ,Serum Plain <i>Method : Uricase- POD</i>	5.59	mg/dl	3.40 - 7.00
Serum Sodium ,Serum Plain <i>Method : ISE Direct</i>	143.0	mmol/L	135.0 - 148.0
Serum Potassium ,Serum Plain <i>Method : ISE Direct</i>	4.50	mmol/L	3.50 - 5.00
Serum Chloride ,Serum Plain <i>Method : ISE DIRECT</i>	103.00	mmol/L	97.00 - 107.00
Serum Calcium ,Serum Plain <i>Method : Arsenazo III</i>	8.90	mg/dl	New Born : 7.8 - 11.2 mg/dl Adult : 8.2 - 10.6 mg/dl



Registration No.	102320789	Mobile No.	9871728817
Patient Name	Mr. ANIL SINGH BHANDARI	Registration Date/Time	06/03/2024 08:44:45
Age / Sex	46 Yrs Male ^{Male}	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 16:25:16
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

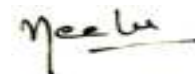
Test Name	Value	Unit	Biological Ref Interval
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LIVER PROFILE / LFT

Serum Bilirubin (Total) ,Serum Plain <i>Method : DSA Method</i>	0.37	mg/dl	0.00 - 1.20
Serum Bilirubin (Direct) ,Serum Plain <i>Method : DSA Method</i>	0.12	mg/dl	0.00 - 0.30
Serum Bilirubin (Indirect) ,Serum Plain <i>Method : Calculated Parameter</i>	0.25	mg/dl	0.00 - 0.60
SGOT ,Serum Plain <i>Method : IFCC/KINETIC</i>	15.7	IU/l	Males : Upto 46 IU/l Females : Upto 40 IU/l
SGPT ,Serum Plain <i>Method : IFCC/KINETIC</i>	33.8	IU/l	Upto 49 IU/l
Serum Alkaline Phosphatase ,Serum Plain <i>Method : DEA Method</i>	93.0	IU/l	30.0 - 120.0
Serum Total Protein ,Serum Plain <i>Method : Biuret Method</i>	7.02	gm/dl	6.00 - 8.50
Serum Albumin ,Serum Plain <i>Method : BCG Method</i>	4.22	gm/dl	3.20 - 5.50
Globulin ,Serum Plain <i>Method : Calculated</i>	2.80	gm/dl	2.00 - 4.10
A/G Ratio ,Serum Plain <i>Method : Calculated</i>	1.51		1.00 - 2.10
Serum GGTP ,Serum Plain <i>Method : G-Glutamyl Transferase</i>	23.0	U/L	0.0 - 50.0

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Registration No.	102320789	Mobile No.	9871728817
Patient Name	Mr. ANIL SINGH BHANDARI	Registration Date/Time	06/03/2024 08:44:45
Age / Sex	46 Yrs Male ^{Male}	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 16:25:16
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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Blood Sugar (Fasting) ,Plasma F **120.0** mg/dl 70.0 - 110.0
Method : GOD POD

Blood Sugar (PP) ,Plasma PP **164.1** mg/dl 70.0 - 140.0
Method : GOD POD

Comment :-

Excluding alimentary hypoglycemia, renal glycosuria, hereditary fructose intolerance and galactosemia. possible cause of PP reactive hypoglycemia (PRH) (low post prandial glucose level) include high sensitivity, exaggerated response to insulin like peptide -1, defect in counter regulation very lean or anxious individuals, after massive weight reduction and women with lower body over weight etc..





Registration No.	102320789	Mobile No.	9871728817
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Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 17:15:00
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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IMMUNOASSAY

TOTAL THYROID PROFILE

Total T3 ,Serum Plain	1.38	ng/mL	0.69 - 2.15
Total T4 ,Serum Plain	9.75	ug/dl	5.20 - 12.70
TSH	1.60	uIU/ml	0.30 - 4.50

Comment :

Age Group	Biological Reference Range
1-2 Days	3.2-3.43 uIU/ml
3-4 Days	0.7-15.4 uIU/ml
15 Days - 5 Months	1.7-9.1 uIU/ml
5 Months - 2 Years	0.7-6.4 uIU/ml
2 Years - 12 Years	0.64-6.27 uIU/ml
12 Years - 18 Years	0.51-4.94 uIU/ml
> 18 Years	0.35-5.50 uIU/ml

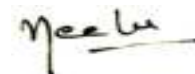
Adults

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates + 50 %, hence time of the day has influence on the measured serum TSH concentration. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

Newborn

In a very low birth weight baby (particularly premature neonates) immaturity of the hypothalamic-pituitary - thyroid axis may mask primary congenital hypothyroidism. It is recommended that the test be repeated two weeks after birth in babies 1000-1500 gm and at four weeks in those <1000 gm. Specimen collection prior to 24 hours of age, after blood transfusion and prematurity can affect this screening.

Nearly 90% of CH cases are detected by newborn screening. A small number of children may test normal on the newborn screen but later develop hypothyroidism.





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Age / Sex	46 Yrs Male ^{Male}	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 17:15:00
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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Vitamin B12 (Cynocobalamin) ,Serum Plain **267.0** pg/mL 200.0 - 1100.0
Method : CLIA

Comments:-

Vitamin B12 along with folate is essential for DNA synthesis and myelin formation. Vitamin B12 deficiency can be because of nutritional deficiency, malabsorption and other gastrointestinal causes. The test is ordered primarily to help diagnose the cause of macrocytic/megaloblastic anemia .

Decreased levels are seen in:

Anaemia, normal near term pregnancy, vegetarianism, partial gastrectomy/ileal damage, celiac disease, with oral contraceptive use, parasitic competition, pancreatic deficiency, treated epilepsy, smoking, hemodialysis and advancing age.

Increased levels are seen in:

Renal failure, hepatocellular disorders, myeloproliferative disorders and at times with excess supplementation of vitamins pills.

Vitamin D (25 Hydroxy) ,Serum Plain **15.60** ng/mL 30.00 - 100.00

Normal Range

Deficiency < 10 ng/ml
Insufficiency 10 - 29 ng/ml
Sufficiency 30 - 100 ng/ml
Toxicity >100 ng/ml

Comments

Cholecalciferol (Vitamin D3) is synthesized in the skin from 7 dehydrocholesterol in response to sunlight; some part also comes from diet and supplements. Ergocalciferol(vitamin D2) comes essentially from diet and supplements. Both cholecalciferol and ergocalciferol are converted in liver to 25 OH Vitamin D which is considered the best indicator of Vitamin D nutritional status. Vitamin D toxicity is recognized, but is a rare occurrence.

Total PSA ,Serum Plain **0.40** ng/ml 0.00 - 4.00

Increased Value is seen in Benign Prostatic Hypertrophy(BPH), Prostatitis, or Prostate Cancer .

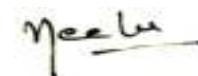
When total PSA concentration is <2.0 ng/ml, the probability of prostate cancer in asymptomatic men is low.

When total PSA concentration is >10.0 ng/mL, the probability of cancer is high and prostate biopsy is generally recommended.

The Total PSA range of 4.0 to 10.0 ng/ml has been described as a diagnostic "gray zone," in which the Free:Total PSA ratio helps to determine the relative risk of prostate cancer.

Therefore, some urologists recommend using the Free:Total ratio to help select which men should undergo biopsy.

However even a negative result of prostate biopsy does not rule-out prostate cancer. Up to 20% of men with negative biopsy results have subsequently been found to have cancer.





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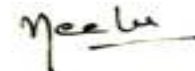
Test Name	Value	Unit	Biological Ref Interval
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Higher total PSA levels and lower percentages of free PSA are associated with higher risks of prostate cancer. Based on free:total PSA ratio: the percent probability of finding prostate cancer on a needle biopsy by age in years:

Free PSA as a percent of Total PSA	Probabilty of carcinoma prostate when Total PSA is 4.1 - 10.0 ng / ml
>=	26.8 %
20 - 25	16 %
15 - 20	20 %
10 - 15	28 %
0 - 10	56 %

Comments:-

False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy. PSA total and free levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies and nonspecific protein binding. Results obtained with different assay kits cannot be used interchangeably. All results should be correlated with clinical findings and results of other investigations





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Age / Sex	46 Yrs Male Male	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 13:33:39
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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CLINICAL PATHOLOGY

URINE ROUTINE EXAMINATION

URE PHYSICAL EXAMINATION

Colour ,URINE	Pale Yellow	Pale Yellow
Volume ,URINE	20 mL	
Appearance ,URINE	Clear	Clear

URE CHEMICAL EXAMINATION

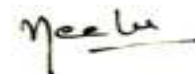
Reaction ,URINE	Acidic	Acidic
Ph (Strip Method) ,URINE	6.0	5.0
Specific Gravity ,URINE	1.015	1.000
Protein (Strip Method) ,URINE	Nil	Nil
Glucose (Strip Method) ,URINE	Nil	Nil

URE MICROSCOPY EXAMINATION

Pus Cells ,URINE	1 - 2 /HPF	0 - 1
Epithelial Cells ,URINE	2 - 4 /HPF	0 - 1
RBC's ,URINE	Nil /HPF	Nil
Casts ,URINE	Nil	
Crystals ,URINE	Nil	
Bacteria ,URINE	Absent	Absent
Mucus Thread ,URINE	Nil	Nil
Other ,URINE	Nil	

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Patient Name	Mr. ANIL SINGH BHANDARI	Registration Date/Time	06/03/2024 08:44:45
Age / Sex	46 Yrs Male Male	Sample Collected Date/Time	06/03/2024 11:59:49
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	06/03/2024 16:27:17
Collected At	DCKC	Printed Date/Time	06/03/2024 18:40:05

Test Name	Value	Unit	Biological Ref Interval
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URE SUGAR (FASTING) ,URINE

NIL

URE SUGAR PP ,URINE


NIL

*** End of Report ***



New Delhi, Delhi, India
C-234, Chakrabarti Vithi Rd, Block C, Defence Colony, New Delhi, Delhi 110049, India
Lat 28.570753°
Long 77.229894°
06/03/24 08:41 AM GMT +05:30



 **GPS Map Camera**



सत्यमेव जयते

भारत सरकार

GOVERNMENT OF INDIA



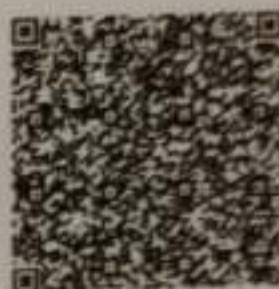
अनिल सिंह भंडारी

Anil Singh Bhandari

जन्म तिथि/ DOB:

02/03/1978

पुरुष / MALE



8585 7974 8093

मेरा आधार, मेरी पहचान

GPS Map Camera

New Delhi, Delhi, India

C-234, Chakrabarti Vithi Rd, Block C, Defence Colony, New Delhi, Delhi 110049, India

Lat 28.570753°

Long 77.229894°

06/03/24 08:40 AM GMT +05:30



Google

R



ANIL SINGH BHANDARI 46Y/M



Dr. Charu Kohli s Clinic

C-234 Defence Colony, New Delhi-1 10024

Ph 41550792 ,24336960, 24332759

E- mail: drcharukohli@yahoo.com

NAME : ANIL SINGH BHANDARI

AGE/SEX : 46Y/M

DATE : 06.03.2024

X - RAY CHEST PA VIEW :

Cardiac shadow is normal.

Aorta is normal.

Bilateral lung fields are clear.

Both costophrenic angles are clear.

Bilateral domes of diaphragm are normal.

No bony injury noted.

IMPRESSION: Normal chest skiagram

DR. CHARU KOHLI
MBBS, DMRD
Consultant Radiologist

IMPORTANT: Owing to technical limitations in case of any error in the study, the Doctor cannot be held responsible for claim of damages of any nature and this report is not valid for any Medico-legal aspect.