

Fwd: HEALTH CHECKUP REPORT

Amrendra Nath Dubey <amrendra.nathduby@narayanahealth.org>

Fri 3/17/2023 4:12 PM

To: Tilak Raj Dhyani <tilak.raj@narayanahealth.org>; Dilip Kumar <dilip.kumar01@narayanahealth.org>

Cc: Vikas Tripathi <Vikas.Tripathi@narayanahealth.org>

Fyi

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Dear team,

Kindly please let us know that candidate visited or not, if visited then revert us with Health checkup report.

Member Name	Appointment Date
Ashutosh sachan	11/3/2023
kamla negi	16-03-2023
Mansukha Farhat	11/3/2023
MR. GOCHHAYAT MANOJA KUMAR	11/3/2023
MR. JAMAL SHAHID IZRAIL MANSOORI	11/3/2023
Vipin rani tomar	11/3/2023
MR. TOMAR RAVINDRA SINGH	11/3/2023
MRS. KUMARI ALKA	11/3/2023
MRS. SACHAN SAUMYA	11/3/2023
MS. MENON VEENA	16-03-2023
MS. SINGH MANISHA	10/3/2023
Rajiv kumar bhagat	11/3/2023
Sachin Singh	10/3/2023
Saiswari Gochhayat	11/3/2023
SHAIKH HABIB	16-03-2023
Surender singh negi	16-03-2023

Thanks & Regards.

Arcofemi Health Care Ltd. | F-703, Lado Sarai, Mehrauli | New Delhi – 110 030

Contact No. 011-41195959 Email id- report@mediwheel.in



GIPSA NETWORK-DECLARATION FORM (To be filled by the Hospitals)

Name of the Hospital:DHARAMSHILA NARAYANA SUPERSPECIALITY HOSPITAL..Date of admission.....
Address:Dharamshila Marg,Vasundhara Enclave ,Near New Ashok Nagar Metro Station New Delhi 110096.

PATIENT NAME/INSURED NAME(BLOCKLETTERS):.....AGE/SEX.....

(To be filled by the Insured/policy holder/Attendant)

1. Do you have an Insurance policy? YES/NO

(If yes, then please select: New India/ United India/ National Insurance/ Oriental Insurance/others)

Policy No _____
TPA Name _____
TPA card No: _____

2. Have you contacted TPA or Insurance Company for cashless facility? YES/NO

3) Whether patient opted for Eligible Room Category under Policy: YES/NO

If No, then kindly mention the opted room category:.....

On my own option, I wish to avail above facility and I hereby agree to pay on my free will, after being explained in detail Hospital authority in my own and understandable language about the above mentioned Facility/Procedure/Treatment ar associated cost of it, which is over and above the agreed tariff for the treatment. Further, if I opt to go for final bill reimbursement with insurance company, respective insurance company will reimburse only as per agreed tariff for the treatment and balance amount will be borne by me / patient only.

I have also been explained that when room service of a category other than eligible room rent is availed by the patient, n the difference in room rent but also an equal proportion of all other charges associated with the treatment shall be born me/ patient only

Signature:.....
Name of the Patient/Patient's attendant:

Signature:.....
Name of the Hospital Representative &Hospital Seal:

Mobile No.....
E-Mail.....
PAN / Form 60:
Aadhar Card Number.....

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Manisha Singh MRN : 15050000146782 Gender/Age : FEMALE , 31y (26/03/1991)

Collected On : 10/03/2023 11:18 AM Received On : 10/03/2023 11:32 AM Reported On : 10/03/2023 03:59 PM

Barcode : D62303100158 Specimen : Serum Consultant : Dr. Gaurav Jain(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8368343893

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (GOD/POD)	93	mg/dL	74.0-106.0
Post Prandial Blood Sugar (PPBS) (Enzyme Method (GOD/POD))	99 L	mg/dL	100.0-140.0
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Non LDL Selective Elimination, CHOD/POD)	234.1 H	mg/dL	<200.0
Triglycerides (LIPASE/GK/GPO/POD)	262.0 H	mg/dL	<150.0
HDL Cholesterol (HDLC) (Colorimetric (Phosphotungstic Acid Method))	38.4 L	mg/dL	40.0-60.0
Non-HDL Cholesterol	195.7 H	mg/dL	<130.0
LDL Cholesterol (Turbidometric /Microtip)	165.24 H	mg/dL	<100.0
VLDL Cholesterol (Calculated)	52.4 H	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	6.1 H	-	<4.5
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (ECLIA/ ELFA)	1.96	nmol/L	1.49-2.6
Thyroxine (T4) (ECLIA/ ELFA)	93.7	nmol/L	71.2-141.0
TSH (Thyroid Stimulating Hormone) (Electrochemiluminescence (ECLIA))	1.75	uIU/ml	0.465-4.68
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Azobilirubin Dyphylline)	0.81	mg/dL	0.2-1.3

Patient Name : Manisha Singh MRN : 15050000146782 Gender/Age : FEMALE , 31y (26/03/1991)

Conjugated Bilirubin (Direct) (Dual Wavelength Reflectance)	0.15	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Calculated)	0.66	mg/dL	0.1-1.0
Total Protein (Biuret Method)	7.90	gm/dL	6.3-8.2
Serum Albumin (Bromocresol Green (BCG))	4.60	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.31	gm/dL	2.3-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.39	-	0.9-2.0
SGOT (AST) (P - Phosphate)	30.8	U/L	14.0-36.0
SGPT (ALT) (P - Phosphate)	37.7 H	U/L	<35.0
Alkaline Phosphatase (ALP) (PNPP With Amp Buffer)	114.9	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (GCNA)	37.5	U/L	12.0-43.0



Dr. Amit Samadhiya
 JUNIOR CONSULTANT, MBBS, MD Biochemistry, DMC - 14287

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Spectrophotometry)	13.3	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.73	10 ⁶ /mm ³	4.5-6.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	42.3	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Calculated)	89	µm ³	83.0-101.0

Patient Name : Manisha Singh MRN : 15050000146782 Gender/Age : FEMALE , 31y (26/03/1991)

MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.2	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.6 L	g/dL	32.0-36.0
Red Cell Distribution Width (RDW) (Calculated)	14.3 H	%	11.5-14.0
Platelet Count (Electrical Impedance)	158	10 ³ /mm ³	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	8.3	10 ³ /mm ³	4.0-11.0

DIFFERENTIAL COUNT (DC)

Neutrophils (DHSS)	69.1	%	40.0-80.0
Lymphocytes (DHSS)	25.5	%	20.0-40.0
Monocytes (DHSS)	3.7	%	2.0-10.0
Eosinophils (DHSS)	1.5	%	1.0-6.0
Basophils (DHSS)	0.2	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	5.74	10 ³ /mm ³	2.0-7.5
Absolute Lymphocyte Count (Calculated)	2.12	x10 ³ cells/ μ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.31	x10 ³ cells/ μ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.13	x10 ³ cells/ μ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.02	x10 ³ cells/ μ l	0.02-0.1

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	20.0	mm/hr	0.0-20.0
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--End of Report--

Patient Name : Manisha Singh MRN : 15050000146782 Gender/Age : FEMALE , 31y (26/03/1991)

Prachi

Dr. Prachi

MBBS,MD Pathology, JUNIOR CONSULTANT, Reg no DMC - 70512

Note

- * Abnormal results are highlighted.
- * Results relate to the sample only.
- * Kindly correlate clinically.



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Manisha Singh MRN : 15050000146782 Gender/Age : FEMALE , 31y (26/03/1991)

Collected On : 10/03/2023 11:18 AM Received On : 10/03/2023 11:32 AM Reported On : 11/03/2023 08:26 AM

Barcode : D62303100158 Specimen : Serum Consultant : Dr. Gaurav Jain(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8368343893

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (Enzymatic Method)	5.1	%	Normal: 4.0-5.6 Pre Diabetes: 5.7-6.4 Diabetes: => 6.5 ADA Recommendation 2017
Estimated Average Glucose	99.67	-	-

Interpretation:

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

Interpretation Notes

- 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 as compared to blood and urinary glucose determinations. Target goals of < 7.0 % may be beneficial in patients. Please co-relate with Blood Sugar Fasting.

RENAL PACKAGE - 2 (RFT FASTING)

Fasting Blood Sugar (FBS) (GOD/POD)	93.0	mg/dL	74.0-106.0
Blood Urea Nitrogen (BUN) (Urease, UV)	6.3 L	mg/dL	7.0-17.0

SERUM CREATININE

Serum Creatinine (Enzymatic Two Point Rate - Creatinine Amidohydrolase)	0.53	mg/dL	0.5-1.04
eGFR (Calculated)	134.6	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.

Page 1 of 4

Dharamshila Narayana Superspeciality Hospital

(A Unit of Dharamshila Cancer Foundation and Research Centre)
(Hospital Reg. No.: DHS/NH/144 | PAN No.: AAATD0451G | GST No. 07AAATD0451G1Z7)

Hospital Address: Vasundhara Enclave, Near New Ashok Nagar Metro Station, Delhi 110 096

Tel +91 11 6904-5555 | www.narayanahealth.org | info.dnsh@narayanahealth.org

Appointments
1800-309-0309

Emergencies
73700-73700

Patient Name : Manisha Singh MRN : 15050000146782 Gender/Age : FEMALE , 31y (26/03/1991)

Serum Sodium (ISE Direct)	141.5	mmol/L	137.0-145.0
Serum Potassium (ISE Direct)	5.17 H	mmol/L	3.5-5.1
Serum Chloride (ISE Direct)	105.5	mmol/L	98.0-107.0
Serum Bicarbonate Level (Phosphoenolpyruvate Carboxylase /Mdh Enzymatic End Piont Assay)	26.7	mmol/L	22.0-30.0
Serum Calcium (Arsezano III Dye Binding Method)	9.32	mg/dL	8.4-10.2
Serum Magnesium (Formazan Dye)	2.14	mg/dL	1.6-2.3
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	4.60	mg/dL	3.5-8.5
Serum Phosphorus (Phosphomolybdate Reduction)	3.09	mg/dL	2.5-4.5



Dr. Amit Samadhiya
 JUNIOR CONSULTANT, MBBS, MD Biochemistry, DMC - 14287

BLOOD BANK LAB

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group	"O"	-
RH Typing	Positive	-



Dr. Manoj Rawat
 Consultant & HOD, Blood Bank Center
 Consultant & HOD Blood Center, DMC - 38026

Patient Name : Manisha Singh MRN : 15050000146782 Gender/Age : FEMALE , 31y (26/03/1991)

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	Pale Yellow	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Double Indicator Method)	6.0	-	4.8-7.5
Sp. Gravity (PKa Change Ionic Concentration Method)	1.010	-	1.002-1.030
Protein (Protein Error Method)	Nil	-	Nil
Urine Glucose (GOD/POD)	Nil	-	Nil
Ketone Bodies	Negative	-	-
Blood Urine (Pseudo Peroxidase Method)	Nil	-	-
MICROSCOPIC EXAMINATION			
Pus Cells	1-2	/hpf	1-2
RBC	Nil	/hpf	0 - 3
Epithelial Cells	2-3	/hpf	2-3
Urine For Sugar (Fasting)	Nil	-	-
Urine For Sugar (Post Prandial)	Nil	-	-

--End of Report--

Prachi

Patient Name : Manisha Singh MRN : 15050000146782 Gender/Age : FEMALE , 31y (26/03/1991)

Dr. Prachi

MBBS,MD Pathology, JUNIOR CONSULTANT, Reg no DMC - 70512

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Patient Name	Manisha Singh	Requested By	DR. GAURAV JAIN
MRN	15050000146782	Procedure DateTime	2023-03-10 12:46:27
Age/Sex	31Y 11M/Female	Hospital	NH-Dharamshila

Investigation No.

ULTRASONOGRAPHY WHOLE ABDOMEN

Liver : Shows a normal contour & echopattern. Normal sized intrahepatic biliary and vascular channels are seen. No focal lesion. The common bile duct and portal vein are normal.

Gall bladder : Normal in size with normal wall thickness and contents.

The pancreas : The pancreas shows normal contour, echogenicity and size.

The spleen : is normal in size, contour and echopattern.

The right kidney : The right kidney has a normal contour & echopattern in the cortex, medulla and pelvicalyceal system.

The left kidney : The left kidney has a normal contour & echopattern in the cortex, medulla and pelvicalyceal system.

Urinary bladder is normal in wall & contents.

Uterus is normal in size and echogenicity of the myometrium.

Endometrial stripe is normal.

Both the ovaries are normal in size and echopattern.

Adnexa are clear.

No ascites seen.

Impression : Normal Study.



Dr. HARMEET KAUR
MBBS MD (Radiodiagnosis)
CONSULTANT RADIOLOGIST

Transthoracic Echo color Doppler Report

Patient's Name	Mrs. Manisha Singh	Age/Sex	31Years/Female
Ref By:	Dr. Gaurav Jain	Date:	10/03/2023
MRN No.	15050000146782	PVT/MRD/IPD	Mediwheel full body Health Check Up

Final Interpretation

1. Normal sized cardiac chamber dimensions.
2. No Regional wall motion abnormality, LVEF = 55%.
3. MIP - Normal
4. Normal RV systolic function.
5. No MR, No AR, No PR, Trace TR (PASP - 30mmHg).
6. No clot/vegetation/pericardial effusion.
7. IVC normal with >50% collapsibility with respiration.

Morphology :-

- ❖ Left Ventricle: It is normal sized.
- ❖ Left Atrium: It is normal sized.
- ❖ Right Atrium: It is normal sized.
- ❖ Right Ventricle: It is normal sized. RV systolic function is normal.
- ❖ Aortic Valve: Aortic valve appears tricuspid & cusps are normal.
- ❖ Mitral Valve: open normally, Subvalvular apparatus appears normal.
- ❖ Tricuspid valve: It appears normal.
- ❖ Pulmonic Valve: It appears normal.
- ❖ Main Pulmonary artery & its branches: Appear normal.
- ❖ Pericardium: There is no pericardial effusion.

DOPPLER/COLOUR FLOW

<u>VALVE</u>	<u>MAX. VELOCITY cm/sec</u>	<u>PG/MG mmHg</u>	<u>REGURGITATION</u>
MITRAL	E- 99cm/sec, A- 55cm/sec		No MR
AORTIC	119		No AR
TRICUSPID	243	(PASP -30 mmHg)	Trace TR
PULMONARY	91		No PR

Contd.....


M MODE & 2D Measurements

	Observed values	Normal values
Aortic root diameter	24	20-34(mm)
Left atrium size	21	19-40(mm)
Left Ventricular Size diastole	47	ED 37-56(mm)
Left Ventricular Size systole	30	ES 22-40 (mm)
Inter ventricular Septum diastole	08	ED 6-10(mm)
Posterior Wall thickness diastole	08	ED 6-10(mm)
End Diastolic Volume	105	
End Systolic Volume	35	
LV Ejection Fraction (%)	55%	55%-75%

2D EXAMINATION DESCRIPTION

2D and M Mode examination done in multiple views revealed fair movement of both mitral leaflets. Aortic valve has three cusps & cusps are normal. Tricuspid valve leaflets move normally. Pulmonary valve is normal. Ascending Aorta is normal. Interatrial septum and interventricular septum are intact.

Dimension of left atrium and left ventricle are normal. No regional wall motion abnormality seen. Global LVEF is 55%. No intracardiac mass or thrombus seen.


Dr. Pradeep Kumar Nayak
Senior Consultant - Cardiology

Dr. Rakesh Bachloo
Consultant - Cardiology

Note:- This is a professional opinion based on imaging finding and not the diagnosis. Not valid for medico-legal purposes. In case of any discrepancy due to machine error or typing error, please get it rectified immediately.