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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. YASHANSHU
Contact Details : 9818069643
Hospital Package Name : Mediwheel Full Body Health Checkup Male Below 40
Location : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment
Appointment Date : 08-03-2024

Member Information		
Booked Member Name	Age	Gender
MR. YASHANSHU	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
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile

Thanks,
Mediwheel Team

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[Redacted]



Issue Date: 05/09/2014

यशंशु
Yashanshu
जन्म तिथि / DOB : 11/09/1989
पुरुष / Male



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मेरा आधार, मेरी पहचान

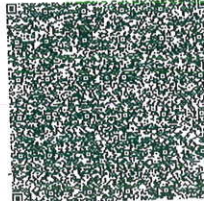


भारतीय विजय पहचान अधिकरण
[Redacted] of India



पता: S/O: कुशल पाल सिंह, मकान न-1102,
सेक्टर-9, पुराना विजय नगर, गाज़ियाबाद,
गाज़ियाबाद, उत्तर प्रदेश, 201009
Address: S/O: Kushal Pal Singh, H N0-1102,
SECTOR-9, OLD VIJAY NAGAR,
Ghaziabad, Ghaziabad, Uttar Pradesh,
201009

Print Date: 02/03/2022



9595 1233 6876



1947



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RADIOLOGY REPORT

NAME	MR YASHANSHU	STUDY DATE	08/03/2024 11:56AM
AGE / SEX	34 y / M	HOSPITAL NO.	MH008994675
ACCESSION NO.	R7015598	MODALITY	CR
REPORTED ON	08/03/2024 3:34PM	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*****

NAME	MR YASHANSHU	STUDY DATE	08/03/2024 11:40AM
AGE / SEX	34 y / M	HOSPITAL NO.	MH008994675
ACCESSION NO.	R7015599	MODALITY	US
REPORTED ON	08/03/2024 12:43PM	REFERRED BY	HEALTH CHECK MGD

**USG ABDOMEN & PELVIS
FINDINGS**

LIVER: appears enlarged in size (measures 153 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 106 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 4 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 108 x 42 mm.

Left Kidney: measures 119 x 44 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 33 x 31 x 21 mm with volume 11 cc. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Hepatomegaly with diffuse grade II fatty infiltration in liver.

Recommend clinical correlation.



**Dr. Prabhath Prakash Gupta MBBS, DNB, MNAMS
CONSULTANT RADIOLOGIST**

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



LABORATORY REPORT

Name	: MR YASHANSHU	Age	: 34 Yr(s) Sex :Male
Registration No	: MH008994675 RefHosp No. : ghzb-0000160858	Lab No	: 202403000924
Patient Episode	: H18000001875	Collection Date	: 08 Mar 2024 10:59
Referred By	: HEALTH CHECK MGD	Reporting Date	: 08 Mar 2024 13:34
Receiving Date	: 08 Mar 2024 10:59		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
THYROID PROFILE, Serum			Specimen Type : Serum
T3 - Triiodothyronine (ELFA)	1.230	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	9.880 #	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	2.020	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.



LABORATORY REPORT

Name : MR YASHANSHU Age : 34 Yr(s) Sex : Male
Registration No : MH008994675 RefHosp No. : ghzb-0000160858 Lab No : 202403000924
Patient Episode : H18000001875 Collection Date : 08 Mar 2024 10:59
Referred By : HEALTH CHECK MGD Reporting Date : 08 Mar 2024 13:28
Receiving Date : 08 Mar 2024 10:59

BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Blood Group & Rh Typing (Agglutination by gel/tube technique)			Specimen-Blood
Blood Group & Rh typing	A 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. Charu Agarwal
Consultant Pathologist



LABORATORY REPORT

Name	: MR YASHANSHU	Age	: 34 Yr(s) Sex :Male
Registration No	: MH008994675 RefHosp No. : ghzb-0000160858	Lab No	: 202403000924
Patient Episode	: H18000001875	Collection Date	: 08 Mar 2024 10:59
Referred By	: HEALTH CHECK MGD	Reporting Date	: 08 Mar 2024 13:21
Receiving Date	: 08 Mar 2024 10:59		

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDEANCE)	4.99	millions/cumm	[4.50-5.50]
HEMOGLOBIN	14.1	g/dl	[13.0-17.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	44.6	%	[40.0-50.0]
MCV (DERIVED)	89.4	fL	[83.0-101.0]
MCH (CALCULATED)	28.3	pg	[25.0-32.0]
MCHC (CALCULATED)	31.6	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	12.8	%	[11.6-14.0]
Platelet count	267	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	11.0		
WBC COUNT (TC) (IMPEDEANCE)	9.31	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	66.0	%	[40.0-80.0]
Lymphocytes	24.0	%	[20.0-40.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	3.0	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
ESR	12.0 #	mm/1sthour	[0.0-



LABORATORY REPORT

Name	: MR YASHANSHU	Age	: 34 Yr(s) Sex :Male
Registration No	: MH008994675 RefHosp No. : ghzb-0000160858	Lab No	: 202403000924
Patient Episode	: H18000001875	Collection Date	: 08 Mar 2024 10:59
Referred By	: HEALTH CHECK MGD	Reporting Date	: 08 Mar 2024 17:15
Receiving Date	: 08 Mar 2024 10:59		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin)

6.0 # %

[0.0-5.6]

Method: HPLC

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) 126 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	
Reaction[pH]	7.0	(4.6-8.0)
Specific Gravity	1.005	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)



LABORATORY REPORT

Name	: MR YASHANSHU	Age	: 34 Yr(s) Sex :Male
Registration No	: MH008994675 RefHosp No. : ghzb-0000160858	Lab No	: 202403000924
Patient Episode	: H18000001875	Collection Date	: 08 Mar 2024 11:51
Referred By	: HEALTH CHECK MGD	Reporting Date	: 08 Mar 2024 14:00
Receiving Date	: 08 Mar 2024 11:51		

CLINICAL PATHOLOGY

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	
Bacteria	NIL	
OTHERS	NIL	

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	188	mg/dl	[<200] Moderate risk:200-239 High risk:>240
Method:Oxidase,esterase, peroxide			
TRIGLYCERIDES (GPO/POD)	105	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	52	mg/dl	[35-65]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	21	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	115.0	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189 <4.0 Optimal 4.0-5.0 Borderline >6 High Risk
Above optimal-100-129			
T.Chol/HDL.Chol ratio (Calculated)	3.6		
LDL.CHOL/HDL.CHOL Ratio (Calculated)	2.2		<3 Optimal 3-4 Borderline >6 High Risk



LABORATORY REPORT

Name	: MR YASHANSHU	Age	: 34 Yr(s) Sex :Male
Registration No	: MH008994675 RefHosp No. : ghzb-0000160858	Lab No	: 202403000924
Patient Episode	: H18000001875	Collection Date	: 08 Mar 2024 10:59
Referred By	: HEALTH CHECK MGD	Reporting Date	: 08 Mar 2024 12:47
Receiving Date	: 08 Mar 2024 10:59		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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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	24.9	mg/dl	[15.0-40.0]
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Method: GLDH, Kinatic assay

BUN, BLOOD UREA NITROGEN	11.6	mg/dl	[8.0-20.0]
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Method: Calculated

CREATININE, SERUM	0.95	mg/dl	[0.70-1.20]
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Method: Jaffe rate-IDMS Standardization

URIC ACID	6.3	mg/dl	[4.0-8.5]
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Method:uricase PAP

SODIUM, SERUM	135.20 #	mmol/L	[136.00-144.00]
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POTASSIUM, SERUM	4.18	mmol/L	[3.60-5.10]
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SERUM CHLORIDE	102.4	mmol/L	[101.0-111.0]
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Method: ISE Indirect

eGFR (calculated)	104.0	ml/min/1.73sq.m	[>60.0]
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Technical Note

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.



LABORATORY REPORT

Name	: MR YASHANSHU	Age	: 34 Yr(s) Sex :Male
Registration No	: MH008994675 RefHosp No. : ghzb-0000160858	Lab No	: 202403000924
Patient Episode	: H18000001875	Collection Date	: 08 Mar 2024 10:59
Referred By	: HEALTH CHECK MGD	Reporting Date	: 08 Mar 2024 12:48
Receiving Date	: 08 Mar 2024 10:59		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL <i>Method: D P D</i>	0.67	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT <i>Method: DPD</i>	0.14	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) <i>Method: Calculation</i>	0.53	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) <i>Method: BIURET</i>	6.90	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) <i>Method: BCG</i>	4.23	g/dl	[3.50-5.20]
GLOBULINS (SERUM) <i>Method: Calculation</i>	2.70	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO <i>Method: Calculation</i>	1.58		[1.00-2.50]
AST (SGOT) (SERUM) <i>Method: IFCC W/O P5P</i>	39.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) <i>Method: IFCC W/O P5P</i>	81.70 #	U/L	[17.00-63.00]
Serum Alkaline Phosphatase <i>Method: AMP BUFFER IFCC)</i>	98.0 #	IU/L	[32.0-91.0]
GGT	53.0 #	U/L	[7.0-50.0]



LABORATORY REPORT

Name : MR YASHANSHU Age : 34 Yr(s) Sex :Male
Registration No : MH008994675 RefHosp No. : Lab No : 202403000924
ghzb-0000160858
Patient Episode : H18000001875 Collection Date : 08 Mar 2024 10:59
Referred By : HEALTH CHECK MGD Reporting Date : 08 Mar 2024 12:48
Receiving Date : 08 Mar 2024 10:59

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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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. Charu Agarwal
Consultant Pathologist



LABORATORY REPORT

Name	: MR YASHANSHU	Age	: 34 Yr(s) Sex :Male
Registration No	: MH008994675 RefHosp No. : ghzb-0000160858	Lab No	: 202403000925
Patient Episode	: H18000001875	Collection Date	: 08 Mar 2024 10:59
Referred By	: HEALTH CHECK MGD	Reporting Date	: 08 Mar 2024 12:48
Receiving Date	: 08 Mar 2024 10:59		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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GLUCOSE-Fasting

Specimen: Plasma

GLUCOSE, FASTING (F)	100.0	mg/dl	[70.0-110.0]
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Method: Hexokinase

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-----

Dr. Charu Agarwal
Consultant Pathologist



LABORATORY REPORT

Name : MR YASHANSHU
 Registration No : MH008994675 RefHosp No. :
 ghzb-0000160858
 Patient Episode : H118000001875
 Referred By : HEALTH CHECK MGD
 Receiving Date : 08 Mar 2024 15:04

Age : 34 Yr(s) Sex :Male
 Lab No : 202403000926
 Collection Date : 08 Mar 2024 15:04
 Reporting Date : 08 Mar 2024 16:09

BIOCHEMISTRY

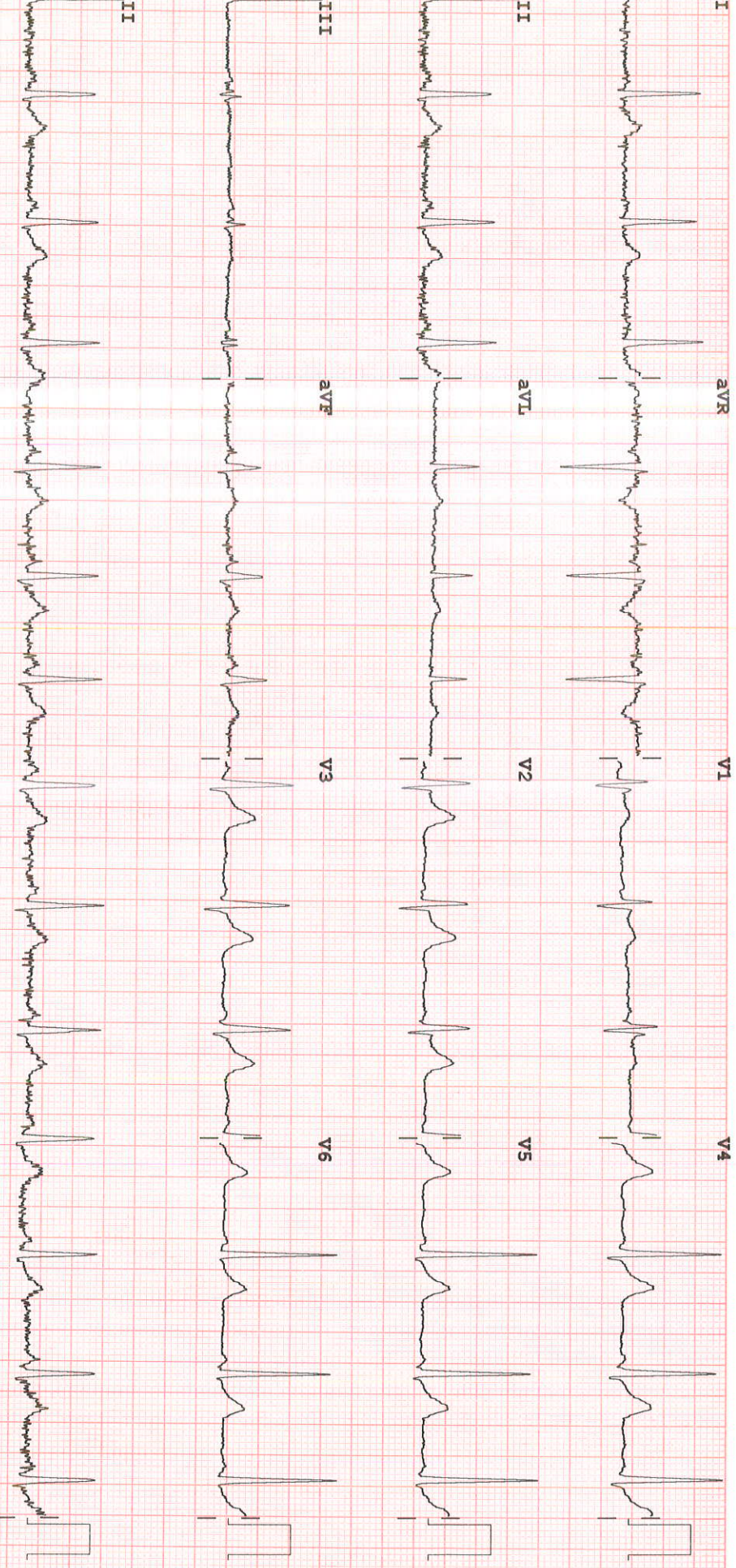
TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE Specimen:Plasma GLUCOSE, POST PRANDIAL (PP), 2 HOURS Method: Hexokinase	145.0 #	mg/dl	[80.0-140.0]
Note: Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption , post exercise			

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

Dr. Alka Dixit Vats
 Consultant Pathologist

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Dev:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60 ~ 0.15-100 Hz

PH100B CL P?



INVESTIGATION REPORT

Patient Name	MR YASHANSHU	Location	Ghaziabad
Age/Sex	34Year(s)/male	Visit No	: V00000000001-GHZB
MRN No	MH8994675	Order Date	:08/03/2024
Ref. Doctor	Dr. ABHISHEK SINGH	Report Date	:08/03/2024

Echocardiography

Final Interpretation

1. No RWMA, LVEF=60%.
2. Normal CCD.
3. No MR, No AR.
4. Trace TR, Normal PASP.
5. No intracardiac clot/mass/pericardial pathology.
6. IVC normal

Chambers & valves:

- **Left Ventricle:** It is normal sized.
- **Left Atrium:** It is normal sized.
- **Right Atrium:** It is normal sized.
- **Right Ventricle:** It is normal sized.
- **Aortic Valve:** It appears normal.
- **Mitral Valve:** Opens normally. Subvalvular apparatus appear normal.
- **Tricuspid Valve:** Trace TR, Normal PASP.
- **Pulmonic Valve:** It appears normal.
- **Main Pulmonary artery & its branches:** Appear normal.
- **Pericardium:** There is no pericardial effusion.

Description:

- LV is normal size with normal contractility.

Manipal Hospital, Ghaziabad

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

P : 0120-3535353

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