

प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ोदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	PAYAL PRAKASH RANA
जन्म की तारीख	30-05-1995
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	09-12-2023
बुकिंग संदर्भ सं.	23D109668100078214S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MR. RANA PRAKASH MANSINHBHAI
कर्मचारी की क.कू.संख्या	109668
कर्मचारी का पद	SINGLE WINDOW OPERATOR A
कर्मचारी के कार्य का स्थान	BANASKANTHA,RO BANASKANTHA
कर्मचारी के जन्म की तारीख	25-03-1986

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ोदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 06-12-2023 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनबॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ोदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



बैंक ऑफ बरोडा  
Bank of Baroda

नाम Rana Prakash M  
Name

कर्मचारी कूट फ. 109668  
Employee Code No.

जाचिकर्ता प्राधिकारी  
Issuing Authority



धारक के हस्ताक्षर  
Signature of Holder

**DR. TAPAS RAVAL**  
**MBBS . D.O**  
**(FELLOW IN PHACO & MEDICAL**  
**RATINA)**  
**REG.NO.G-21350**

<b>UHID:</b>	<b>Date:</b> 09/12/23	<b>Time:</b> 1030
<b>Patient Name:</b> Prakashwani Rana	<b>Age /Sex:</b>	<b>Height:</b>
	<b>Weight:</b>	
<b>History:</b>	c/o Compny Health chust. pt have glass 104 56 year	
<b>Allergy History:</b>		
<b>Nutritional Screening:</b> Well-Nourished / Malnourished / Obese		
<b>Examination:</b>	Vn 6/18p 6/18d  Vn 2 glass 6/6 6/6 n/6  Cotus vision Normal	
<b>Diagnosis:</b>	Refractive error	

**DR. PRERAK TRIVEDI**  
**M.D., IDCCM**  
**CRITICAL CARE MEDICINE**  
**REG.NO.G-59493**

<b>UHID:</b>		<b>Date:</b> 9/12/23	<b>Time:</b> 2 PM
<b>Patient Name:</b> Prakash Rana		<b>Height:</b>	
<b>Age /Sex:</b> 57y/M	<b>LMP:</b>	<b>Weight:</b>	
<b>History:</b>		<b>History:</b>	
:C/O:  NAD		FBS - 108 DPBS - 162	
<b>Allergy History:</b> Nil		<b>Addiction:</b> Nil	
<b>Nutritional Screening:</b> Well-Nourished / Malnourished / Obese			
<b>Vitals &amp; Examination:</b>			
<b>Temperature:</b> Normal			
<b>Pulse:</b> 82/min			
<b>BP:</b> 118/82 mmHg			
<b>SPO2:</b> 98% on RA			
<b>Provisional Diagnosis:</b>			

**Advice:**

Life style modification  
 Diet + Exercise  
 Reduce weight 4-5 kg.

**Rx**

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

<b>Insulin Scale</b>	<b>RBS- hourly</b>	<b>Diet Advice:</b>	
< 150 -	300-350 -	<b>Follow-up:</b>	
150-200 -	350-400 -		
200-250 -	400-450 -	<b>Sign:</b>	
250-300 -	> 450 -		

**PATIENT NAME: PRAKASH M RANA**  
**GENDER/AGE: Male / 37 Years**  
**DOCTOR: DR. HASIT JOSHI**  
**OPDNO: OSP32518**

**DATE: 09/12/23**

**2D-ECHO**

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 35mm	
LEFT ATRIUM	: 34mm	
LV Dd / Ds	: 39/25mm	EF 64%
IVS / LVPW / D	: 11/10mm	
IVS	: INTACT	
IAS	: FLOPPY	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 0.8/0.6m/s	
AORTIC	: 1.3m/s	
PULMONARY	: 1.3m/s	
COLOUR DOPPLER	: NO MR/AR/TR	
RVSP	:	
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.	

**CARDIOLOGIST**  
**DR. HASIT JOSHI (9825012235)**



Aashka Hospitals Ltd.  
Between Sargasan and Reliance Cross Roads  
Sargasan, Gandhinagar - 382421, Gujarat, India  
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Emergency No.: +91-7575007707 / 9879752777  
www.aashkahospitals.in  
CIN: L85110GJ2012PLC072647



DR. SEJAL J AMIN  
B.D.S, M.D.S (PERIODONTIST)  
IMPLANTOLOGIST  
REG NO: A-12942

UHID:	Date: 9/12/23	Time:
Patient Name: Poojesh M Rana	Age/Sex: 37M	Height: Weight:
Chief Complain: → Receding gums since 4y		
History:		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination:		
Extra oral :		
Intra oral – Teeth Present : Continuous Eruption line → 45		
Teeth Absent :		
Diagnosis: <i>Se</i>		

*Syru*

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**PATIENT NAME: PRAKASH M RANA**  
**GENDER/AGE: Male / 37 Years**  
**DOCTOR:**  
**OPDNO: OSP32518**

**DATE: 09/12/23**

**X-RAY CHEST PA**

Both lung fields show increased broncho-vascular markings.  
**No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.**  
Both hilar shadows and C.P. angles are normal.  
Heart shadow appears normal in size. Aorta appears normal.  
Bony thorax and both domes of diaphragm appear normal.  
No evidence of cervical rib is seen on either side.

  
**DR. SNEHAL PRAJAPATI**  
**CONSULTANT RADIOLOGIST**

REPORT REPORT REPORT



09.12.2023 11:24:29 AM  
ASHIKA HOSPITAL LTD,  
SARGASAN  
GANDHINAGAR

Location: 1  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

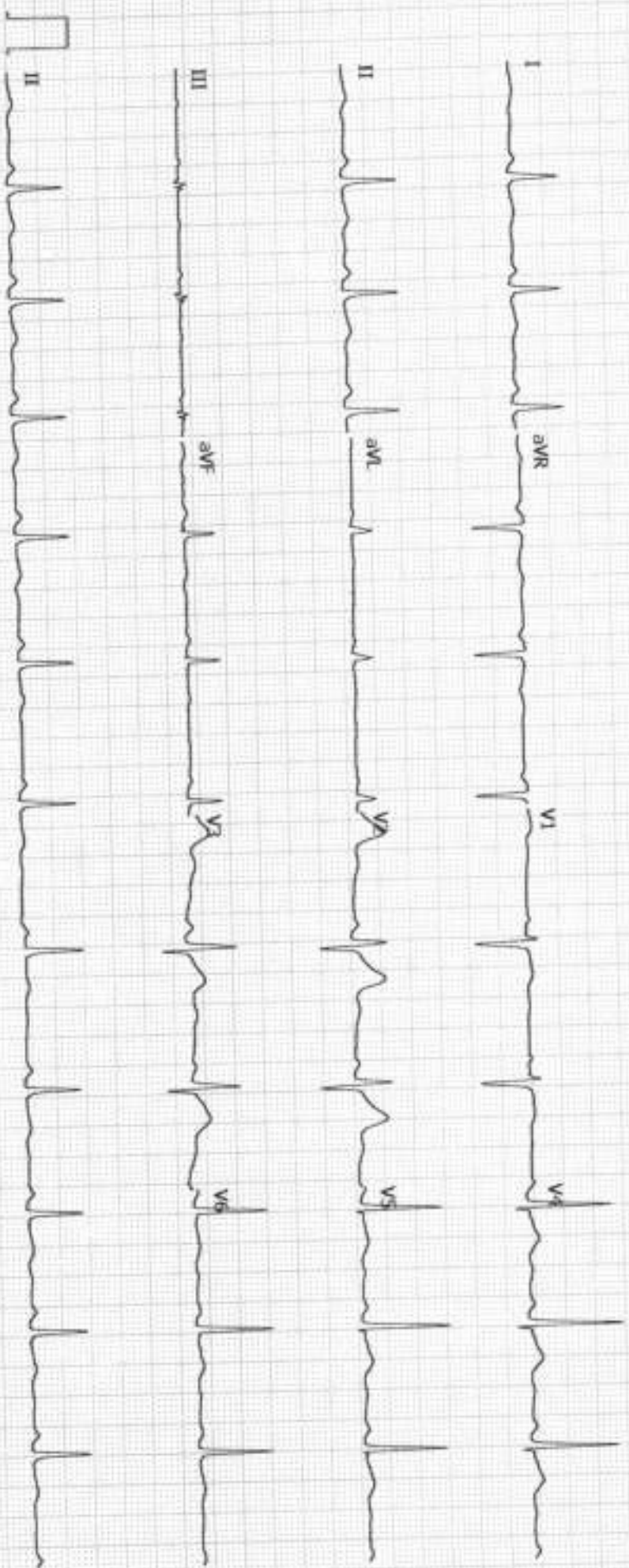
Room:

71 bpm  
- / - mmHg

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 84 ms  
QT / QTcdaz : 382 / 415 ms  
PR : 140 ms  
P : 98 ms  
RR / PP : 846 / 845 ms  
P / QRS / T : 45 / 42 / 27 degrees

Normal sinus rhythm with sinus arrhythmia  
Nonspecific T wave abnormality  
Abnormal ECG





## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 31202200168
Ref. By : Aashka hospital	Dis. At :	Pt. ID : 3182221
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type :	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O23248192

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Blood Glucose Fasting &amp; Postprandial</b>			
Plasma Glucose - F	108.81	mg/dL	70 - 100
Plasma Glucose - PP	162.82	mg/dL	70.0 - 140.0
<b>Haemogram (CBC)</b>			
HbC (Electrical Impedance)	5.81	millions/cu mm	4.50 - 5.50
MCV (RBC histogram)	77.7	fL	83.00 - 101.00
MCH (Calc)	25.6	pg	27.00 - 32.00
Lymphocyte	3145	/ $\mu$ L	1000.00 - 3000.00
<b>Lipid Profile</b>			
Cholesterol	217.73	mg/dL	110 - 200
HDL Cholesterol	41.2	mg/dL	48 - 77
Chol/HDL	5.28		0 - 4.1
LDL Cholesterol	151.24	mg/dL	0.00 - 100.00
<b>Liver Function Test</b>			
Gamma-Glutamyl Transferase	70.75	U/L	0 - 55

Abnormal Result(s) Summary End

Note (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

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## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 31202200168
Ref.By : Aashka hospital	Dis. At :	Pt. ID : 3182221
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Whole Blood EDTA	Mobile No. :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 09:24	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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### HAEMOGRAM REPORT

#### HB AND INDICES

Haemoglobin	14.9	G%	13.00 - 17.00
RBC (Electrical Impedance)	H 5.81	millions/cumm	4.50 - 5.50
PCV(Calc)	45.14	%	40.00 - 50.00
MCV (RBC histogram)	L 77.7	fL	83.00 - 101.00
MCH (Calc)	L 25.6	pg	27.00 - 32.00
MCHC (Calc)	32.9	gm/dL	31.50 - 34.50
RDW (RBC histogram)	13.80	%	11.00 - 16.00

#### TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	9250	/μL	4000.00 - 10000.00
Neutrophil	L% 58.0	%	EXPECTED VALUES 40.00 - 70.00
Lymphocyte	34.0	%	20.00 - 40.00
Eosinophil	2.0	%	1.00 - 6.00
Monocytes	6.0	%	2.00 - 10.00
Basophil	0.0	%	0.00 - 2.00

	[ Abs ]	EXPECTED VALUES
	5365	/μL 2000.00 - 7000.00
	H 3145	/μL 1000.00 - 3000.00
	185	/μL 20.00 - 500.00
	555	/μL 200.00 - 1000.00
	0	/μL 0.00 - 100.00

#### PLATELET COUNT (Optical)

Platelet Count	312000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.71		0.78 - 3.53

#### SMEAR STUDY

RBC Morphology	Microcytic hypochromic RBCS.
WBC Morphology	Total WBC count within normal limits.
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

Note: (LL-Very Low, L-Low, H-High, HH-Very High) A-Abnormal

Dr. Shreya Shah  
M.D. (Pathologist)

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## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 31202200168
Ref.By : Aashka hospital	Dis. At :	Pt. ID : 3182221
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 10:11	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR Westergren Method	06	mm after 1hr	3 - 15	

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah  
M.D. (Pathologist)

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 CAP  
ACCREDITED  
COLLEGE OF AMERICAN PATHOLOGISTS

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 ☎ 079-40408181 / 61618181    ✉ contact@supratechlabs.com    🌐 www.neubergsupratech.com



## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 31202200168
Ref.By : Aashka hospital	Dis. At :	Pt. ID : 3182221
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 09:21	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### HAEMATOLOGY INVESTIGATIONS

#### BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group )

ABO Type	O
Rh Type	POSITIVE

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

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M.D. (Pathologist)

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## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 31202200168
Ref. By : Aashka hospital	Dis. At :	Pt. ID : 3182221
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 09:41	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour	Pale yellow
Transparency	Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.010	1.005 - 1.030
pH	6.00	5 - 8
Leucocytes (ESTERASE)	Negative	Negative
Protein	Negative	Negative
Glucose	Negative	Negative
Ketone Bodies Urine	Negative	Negative
Urobilinogen	Negative	Negative
Bilirubin	Negative	Negative
Blood	Negative	Negative
Nitrite	Negative	Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

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M.D. (Pathologist)

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## LABORATORY REPORT



Name : **PRAKASH M RANA** Sex/Age : **Male / 37 Years** Case ID : **31202200168**  
 Ref.By : **Aashka hospital** Dis. At : Pt. ID : **3182221**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : **09-Dec-2023 08:56** Sample Type : **Spot Urine** Mobile No :  
 Sample Date and Time : **09-Dec-2023 08:56** Sample Coll. By : Ref Id1 : **OSP32518**  
 Report Date and Time : **09-Dec-2023 09:41** Acc. Remarks : **Normal** Ref Id2 : **O23248192**

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Note: (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

**Dr. Shreya Shah**  
M.D. (Pathologist)

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## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 31202200168
Ref.By : Aashka hospital	Dis. At :	Pt. ID : 3182221
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 12:04	Acc. Remarks : Normal	Ref Id2 : O23248192
TEST	RESULTS	UNIT BIOLOGICAL REF RANGE
		REMARKS

### BIOCHEMICAL INVESTIGATIONS

#### Blood Glucose Level (Fasting & Post Prandial)

<b>Plasma Glucose - F</b> <i>Photometric, Hexokinase</i>	H	108.81	mg/dL	70 - 100
<b>Plasma Glucose - PP</b> <i>Photometric, Hexokinase</i>	H	162.82	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.

<100 mg/dL : Normal level

100-<126 mg/dL: Impaired fasting glucose guidelines

>=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

**Dr. Shreya Shah**  
M.D. (Pathologist)

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**Neuberg Supratech Reference Laboratories Private Limited**

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## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 31202200168
Ref. By : Aashka hospital	Dis. At :	Pt. ID : 3182221
Bill. Loc. : Aashka hospital		Pl. Loc :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Serum	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 11:23	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Lipid Profile

<b>Cholesterol</b> <small>Colorimetric, CHOD-POD</small>	H	217.73	mg/dL	110 - 200
<b>HDL Cholesterol</b>	L	41.2	mg/dL	48 - 77
<b>Triglyceride</b> <small>Glycerol Phosphate Oxidase</small>		126.45	mg/dL	<150
<b>VLDL</b> <small>Calculated</small>		25.29	mg/dL	10 - 40
<b>Chol/HDL</b> <small>Calculated</small>	H	5.28		0 - 4.1
<b>LDL Cholesterol</b> <small>Calculated</small>	H	151.24	mg/dL	0.00 - 100.00

#### NEW ATP III GUIDELINES (MAY 2001). MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shreya Shah  
M.D. (Pathologist)

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## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 31202200168
Ref. By : Aashka hospital	Dis. At :	Pt. ID : 3182221
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Serum	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 11:39	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Liver Function Test

<b>S.G.P.T.</b> <i>UV with PSP</i>	49.31	U/L	16 - 63	
<b>S.G.O.T.</b> <i>UV with PSP</i>	32.88	U/L	15 - 37	
<b>Alkaline Phosphatase</b> <i>Enzymatic, PNPP-AMP</i>	101.05	U/L	46 - 116	
<b>Gamma Glutamyl Transferase</b> <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	H 70.75	U/L	0 - 55	
<b>Proteins (Total)</b> <i>Colorimetric, Buret</i>	7.85	gm/dL	6.40 - 8.30	
<b>Albumin</b> <i>Bromocresol purple</i>	4.74	gm/dL	3.4 - 5	
<b>Globulin</b> <i>Calculated</i>	3.11	gm/dL	2 - 4.1	
<b>A/G Ratio</b> <i>Calculated</i>	1.5		1.0 - 2.1	
<b>Bilirubin Total</b> <i>Photometry</i>	0.67	mg/dL	0.3 - 1.2	
<b>Bilirubin Conjugated</b> <i>Diazotization reaction</i>	0.25	mg/dL	0 - 0.50	
<b>Bilirubin Unconjugated</b> <i>Calculated</i>	0.42	mg/dL	0 - 0.8	

Note: (LL-Very Low, L-Low, H-High, HH-Very High A-Abnormal)

Dr. Shreya Shah  
M.D. (Pathologist)

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ACCREDITED  
COLLEGE of AMERICAN PATHOLOGISTS

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079-40408181 / 61618181 contact@supratechlabs.com www.neubergsupratech.com



## LABORATORY REPORT



Name : PRAKASH M RANA	Sex/Age : Male / 37 Years	Case ID : 312022001C
Ref. By : Aashka hospital	Dis. At :	PL ID : 3182221
Bill. Loc. : Aashka hospital		PL Loc :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Serum	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 11:24	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <small>GLDH</small>	9.4	mg/dL	8.90 - 20.60	
Creatinine	0.82	mg/dL	0.50 - 1.50	
Uric Acid <small>Uricase</small>	5.95	mg/dL	3.5 - 7.2	

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

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Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 09-Dec-2023 08:56	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 09-Dec-2023 08:56	Sample Coll. By :	Ref Id1 : OSP32518
Report Date and Time : 09-Dec-2023 10:28	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Glycated Haemoglobin Estimation</b>				
HbA1C	5.87		% of total Hb 4.80 - 6.00	
Estimated Avg Glucose (3 Mths) Calculated	121.77	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

**Interpretation :**

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.  
 Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.  
 Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.  
 Patients with Hemozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.  
 In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.  
 The A1c target should be individualised based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh) A-Abnormal

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Report Date and Time : 09-Dec-2023 10:23	Acc. Remarks : Normal	Ref Id2 : O23248192

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Thyroid Function Test</b>				
Triiodothyronine (T3)	111.15	ng/dL	70 - 204	
Thyroxine (T4) CMA	8.78	ng/dL	4.87 - 11.72	
TSH CMA	1.61	µIU/mL	0.4 - 4.2	

### INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves. Incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

### CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

### TSH ref range in pregnancy

First trimester  
Second trimester  
Third trimester

### Reference range (microIU/ml)

0.24 - 2.00  
0.43-2.2  
0.8-2.5

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

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### Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Graves' Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

----- End Of Report -----

# For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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