



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. RANJAN RAVI
EC NO.	100518
DESIGNATION	BRANCH HEAD
PLACE OF WORK	SASARAM,GOURAKSHANI
BIRTHDATE	30-07-1982
PROPOSED DATE OF HEALTH CHECKUP	24-03-2024
BOOKING REFERENCE NO.	23M100518100099358E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **12-03-2024** till **31-03-2024** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

Handwritten notes:
C - 88
H - 177
12/3/24

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

Handwritten note:
Blind
on the

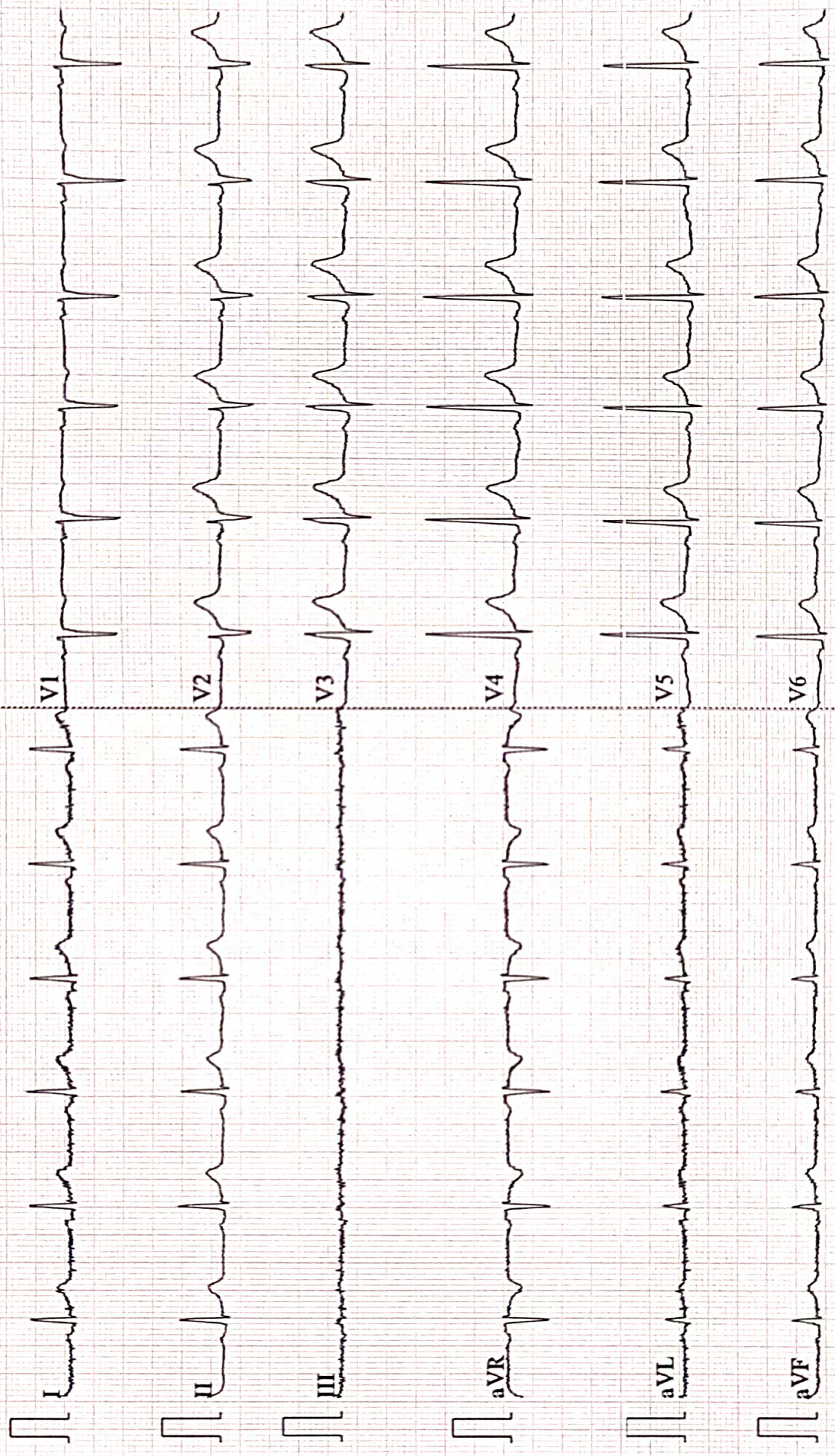
24 03 2024 07:16:27 AM

RANJAN RAVI
Male 41Years

Diagnosis Information:
Sinus Rhythm
Normal ECG

HR : 72 bpm
P : 101 ms
PR : 149 ms
QRS : 82 ms
QT/QTc : 363/400 ms
P/QRS/T : -17/36/40 °
RV5/SV1 : 1.499/0.954 mV

Ref-Phys. :
Report Confirmed by:





Name :- Mr. Ravi Ranjan
Refd by :- CORP.

Age/Sex:- 41Yrs/M
Date :-24/03/24

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Enlarged in size (16.7cm) with raised echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size (11.7 cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 9.2cm and Left Kidney measures 9.3cm.
- U. Bladder**:- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Prostate** :- Normal in size (16.0cc) & echotexture.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- *Hepatomegaly with Grade I Fatty Changes Liver.
Otherwise Normal Scan.*

Dr. Arun Kumar
MBBS, DMRD (Radio-Diagnosis)
Consultant Radiologist

AAROGYAM DIAGNOSTICS**PATNA****2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg Date: 24-Mar-2024 Technician : ARUN****Report****(GEM212170906)(R)Kardic by Allengers**

Stage	Time	Duration	Belt Speed (mph)	Elevation	METs	Rate	% THR Achieved	BP	RPP	PVC	Comments
Supine	00:04	0:01	00.0	00.0	01.0	80	45 %	120/80	096	00	
Standing	00:07	0:01	00.0	00.0	01.0	79	44 %	120/80	094	00	
HV	00:13	0:01	00.0	00.0	01.0	079	44 %	120/80	094	00	
Warm Up	00:26	0:01	01.0	00.0	01.0	081	45 %	120/80	097	00	
ExStart	03:00	0:07	01.7	10.0	01.1	118	66 %	120/80	141	00	
BRUCE/ Stage 1	06:00	3:00	01.7	10.0	04.7	155	87 %	125/85	193	00	
BRUCE/ Stage 2	09:00	3:00	02.5	12.0	07.1	181	101 %	130/90	235	00	
PeakEx	10:00	1:00	03.4	14.0	08.2	190	106 %	130/90	247	00	
Recovery	10:59	1:00	01.1	00.0	01.2	161	90 %	125/85	201	00	
Recovery	11:59	2:00	01.1	00.0	01.0	147	82 %	120/80	176	00	
Recovery	13:23	3:23	01.1	00.0	01.0	134	75 %	120/80	160	00	

Findings :

Exercise Time : 07:01
Max HR Attained : 190 bpm 106% of Target 179
Max BP Attained : (Sys) 130/90
Max WorkLoad Attained : 8.2 Fair response to induced stress
Max ST Dep Lead & Value : V5 & -1.2 mm in PeakEx mm
Test End Reasons : Test Complete

Report :

AAROGYAM DIAGNOSTICS

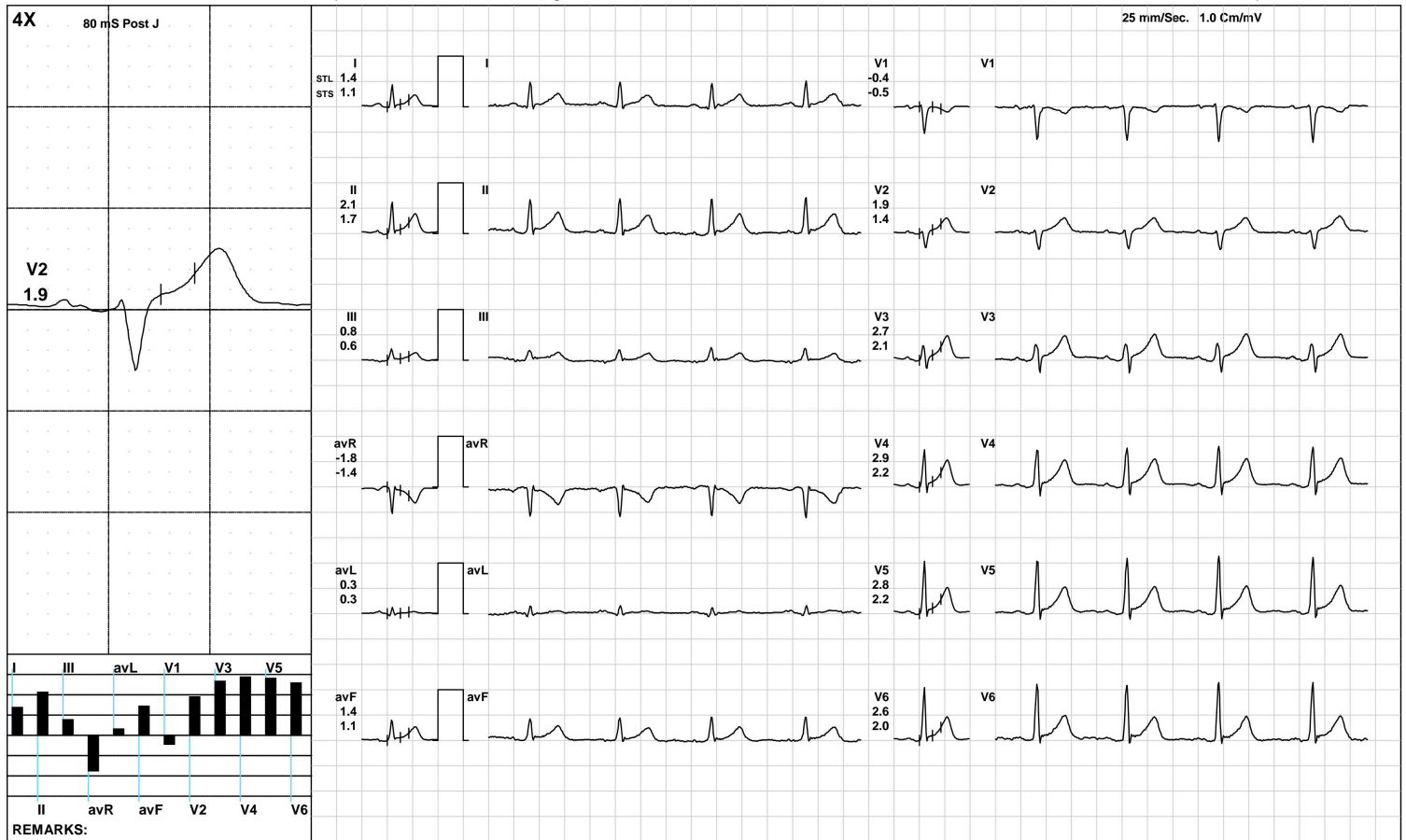
Supine



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 80

Date: 24-Mar-2024 10:17:54 AM METS: 1.0/ 80 bpm 44% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:04 0.0 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

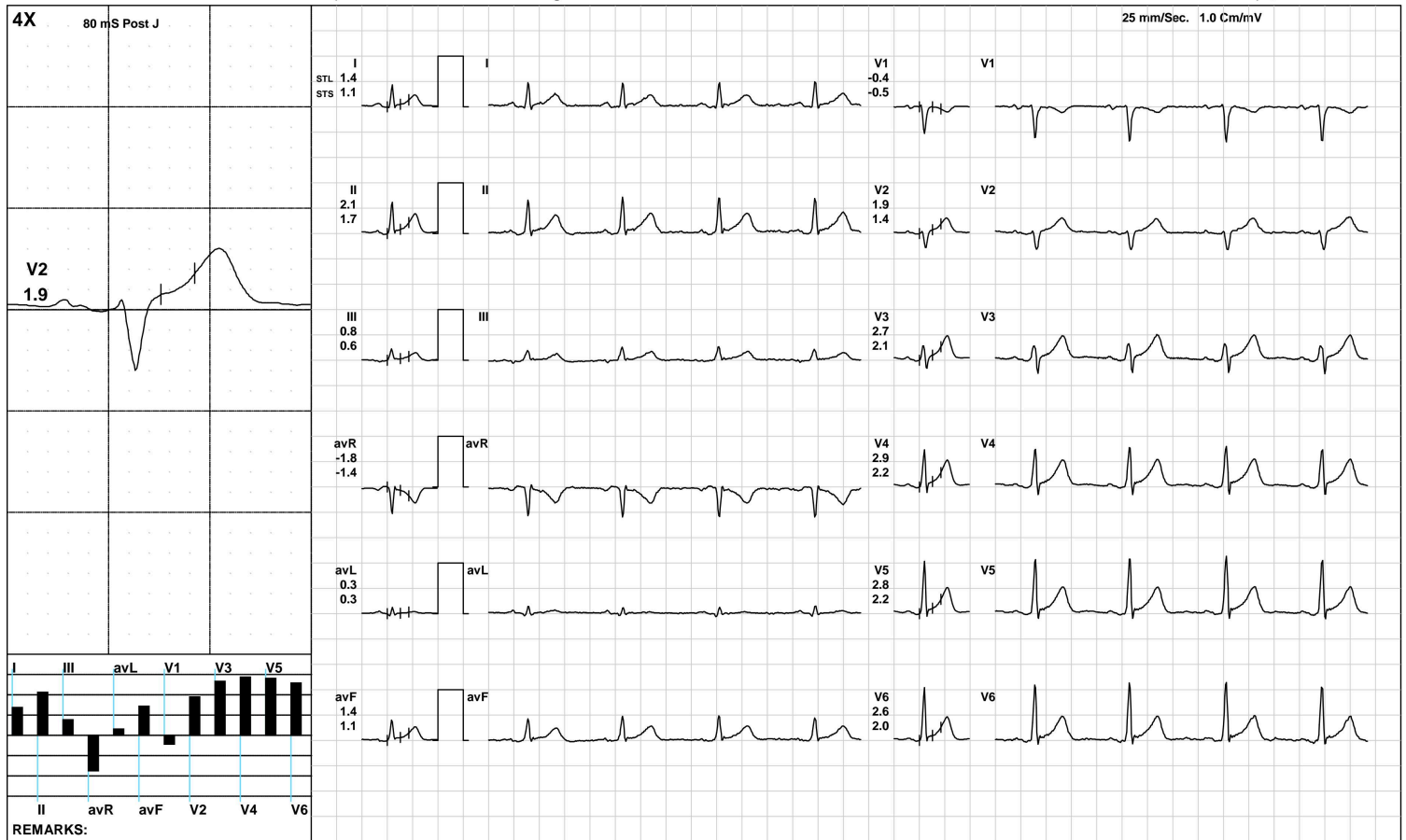
Standing



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 79

Date: 24-Mar-2024 10:17:54 AM METS: 1.0/ 79 bpm 44% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:07 0.0 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

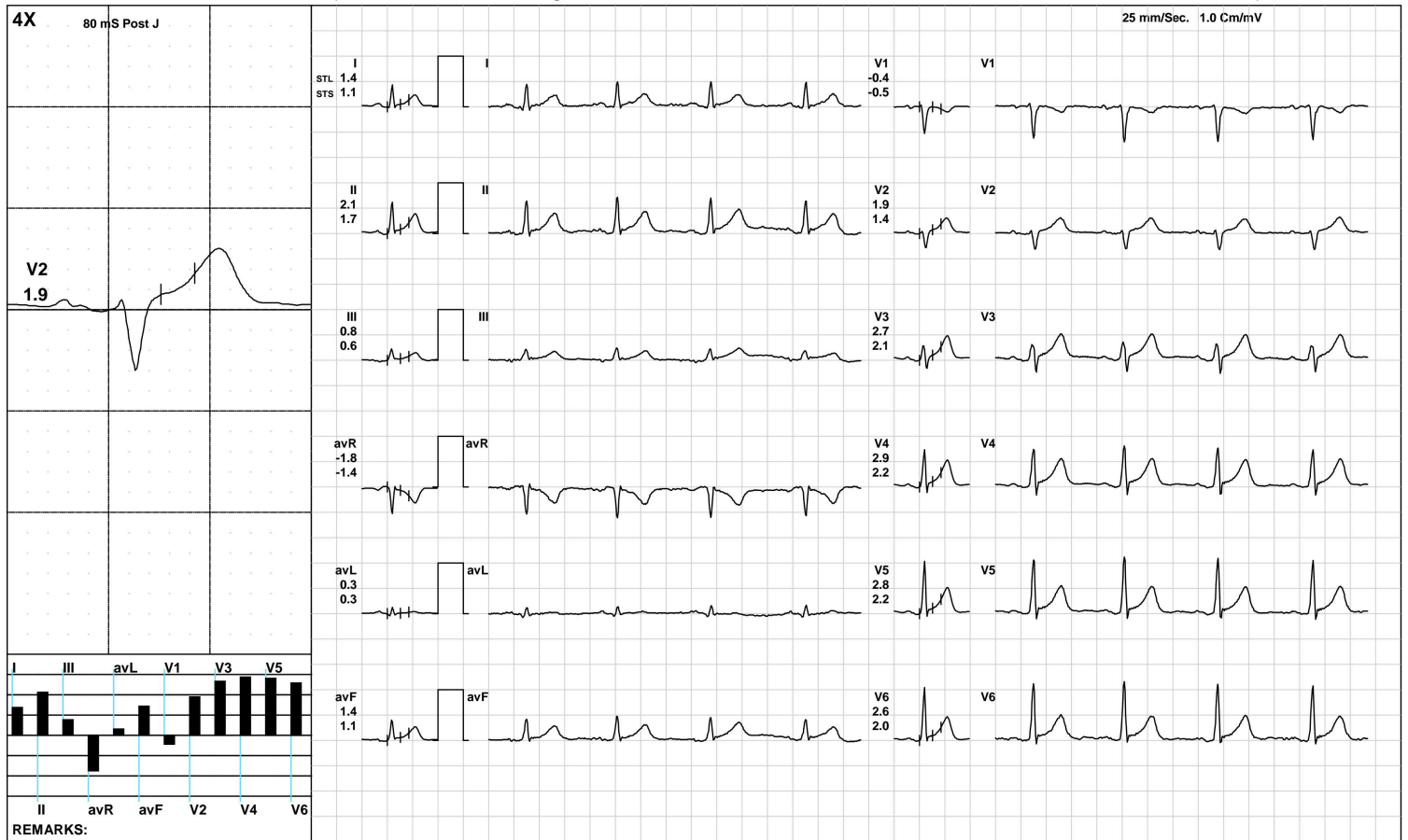
HV



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 79

Date: 24-Mar-2024 10:17:54 AM METS: 1.0/ 79 bpm 44% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:13 0.0 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

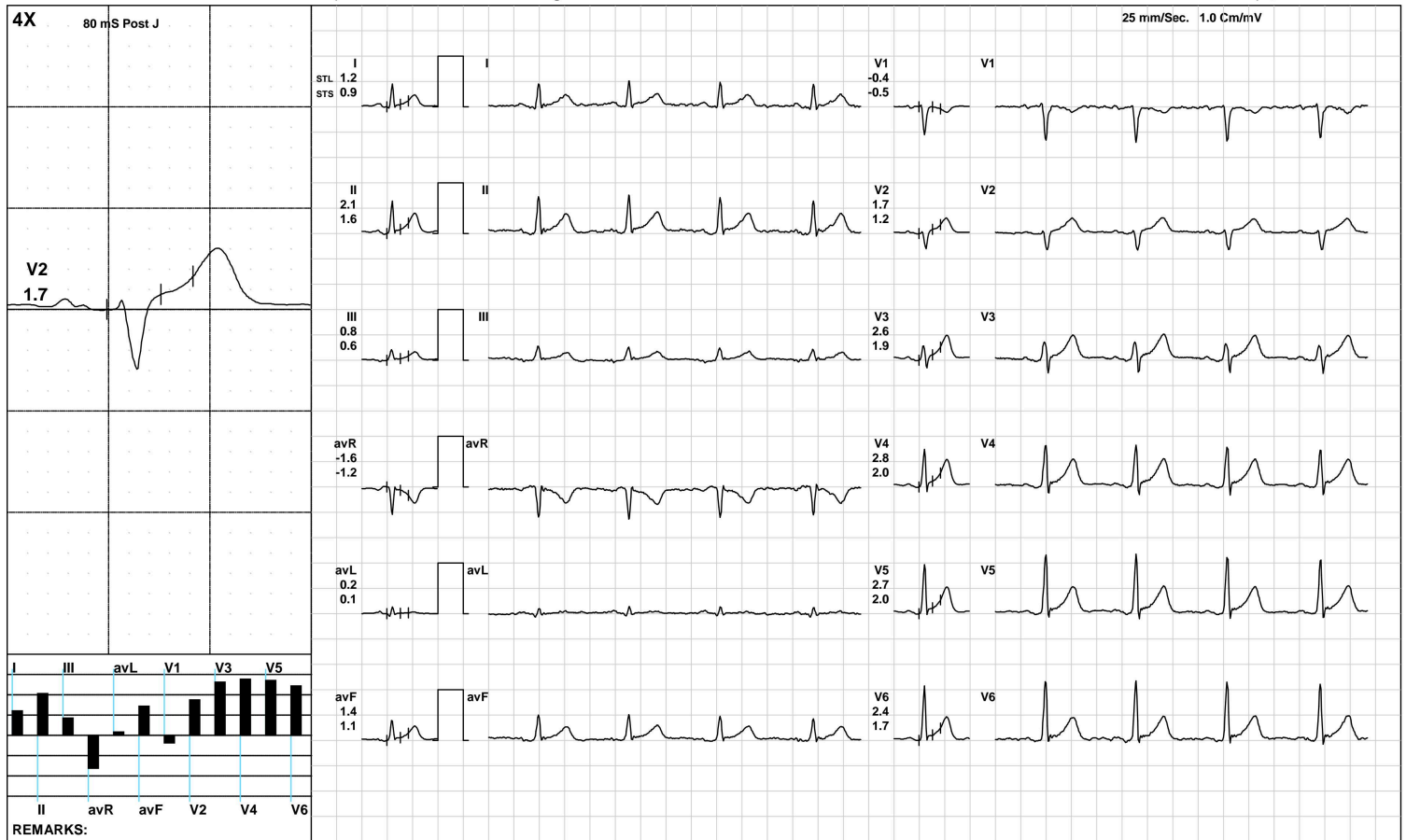
Warm Up



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 81

Date: 24-Mar-2024 10:17:54 AM METS: 1.0/ 81 bpm 45% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:26 1.0 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

ExStart



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 118

Date: 24-Mar-2024 10:17:54 AM METS: 1.1/ 118 bpm 65% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:07 1.7 mph, 10.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

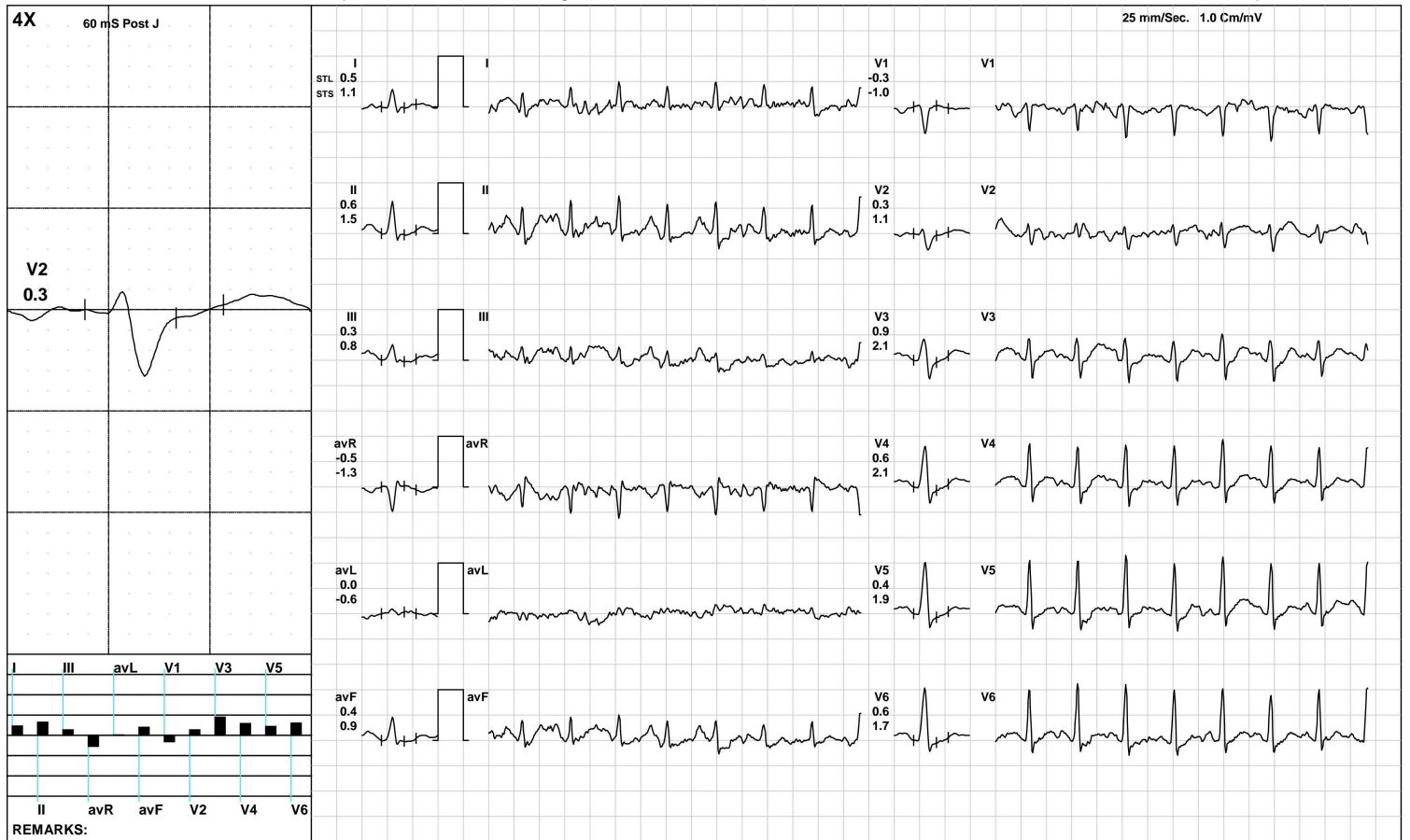
BRUCE/:Stage 1(3:00)



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 155

Date: 24-Mar-2024 10:17:54 AM METS: 4.7/ 155 bpm 86% of THR BP: 125/85 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 03:00 1.7 mph, 10.0%



(GEM212170906)(R)Kardic by Allengers

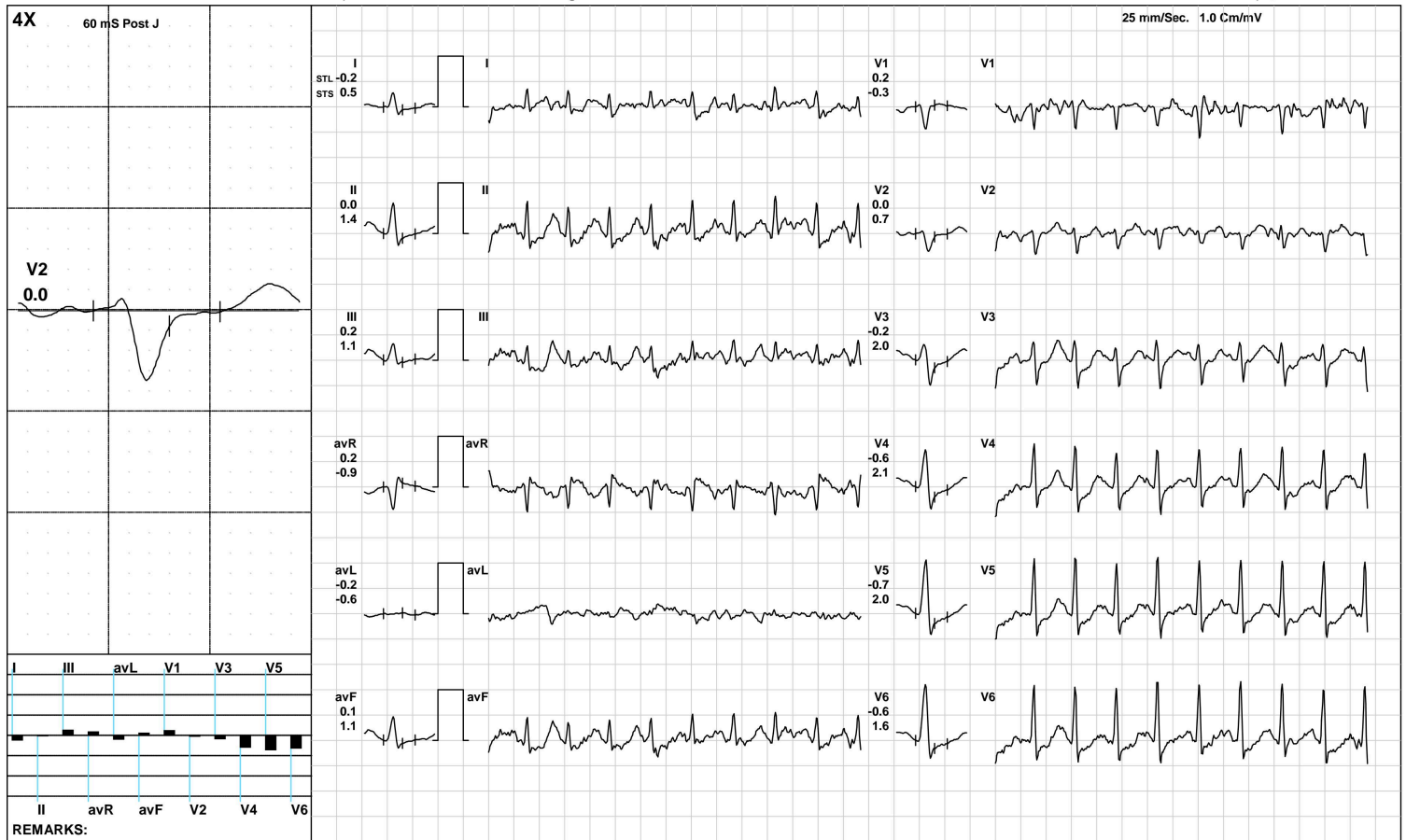
AAROGYAM DIAGNOSTICS

BRUCE/:Stage 2(3:00)



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 181

Date: 24-Mar-2024 10:17:54 AM METS: 7.1/ 181 bpm 101% of THR BP: 130/90 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz ExTime: 06:00 2.5 mph, 12.0%



(GEM212170906)(R)Kardic by Allengers

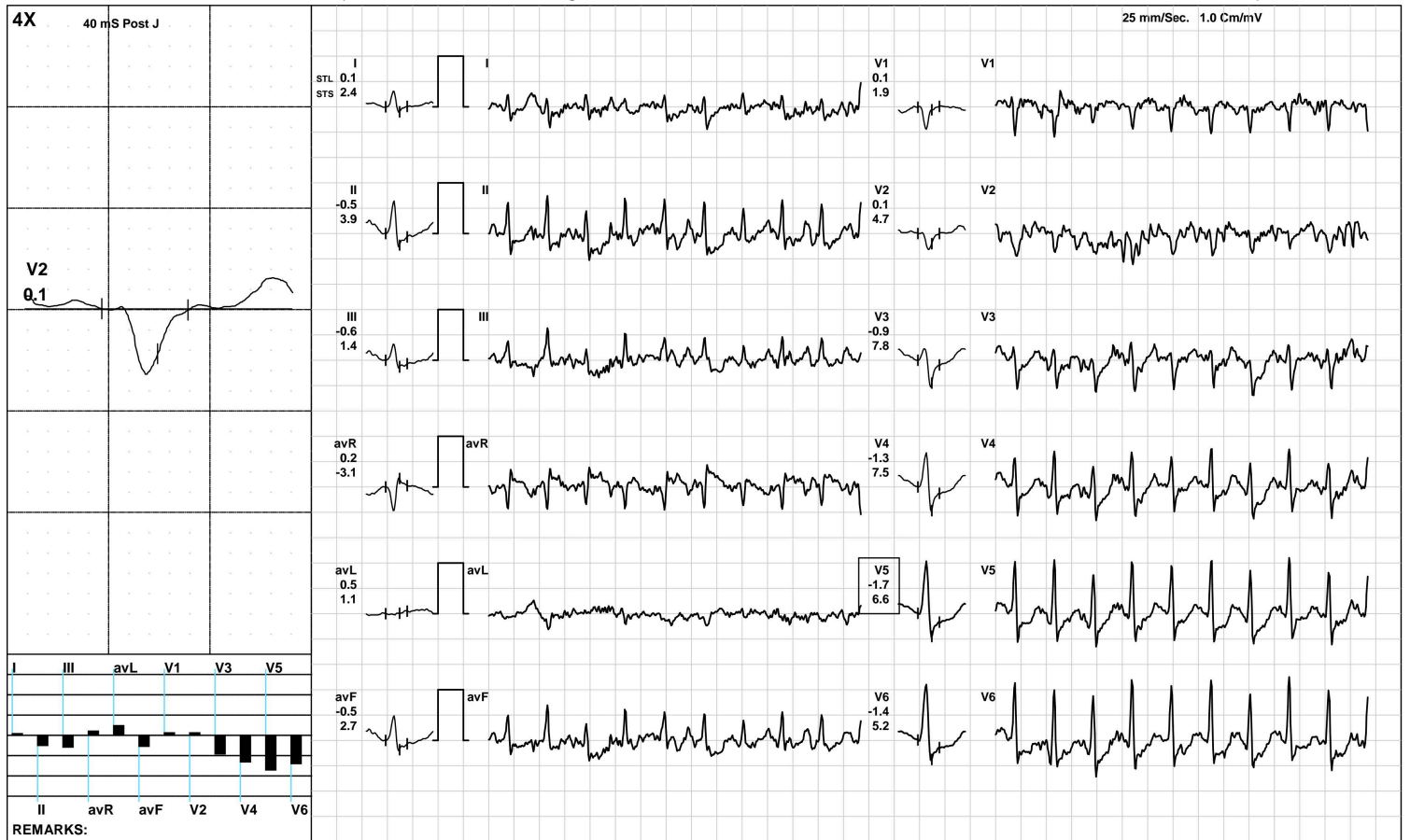
AAROGYAM DIAGNOSTICS



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 190

Date: 24-Mar-2024 10:17:54 AM METS: 8.2/ 190 bpm 106% of THR BP: 130/90 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 07:00 3.4 mph, 14.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

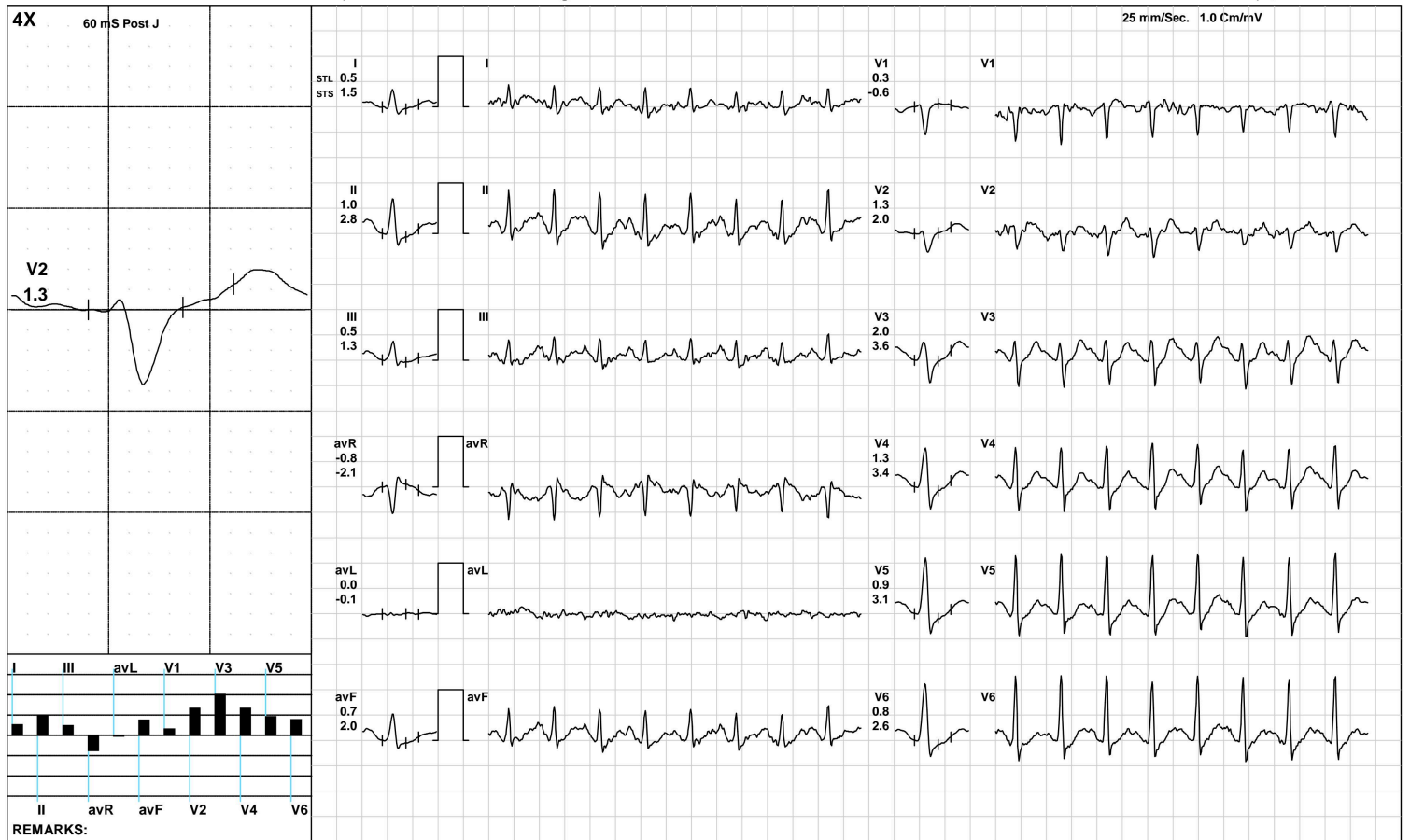
2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 161

Recovery(1:00)



Date: 24-Mar-2024 10:17:54 AM METS: 1.2/ 161 bpm 89% of THR BP: 125/85 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 07:01 1.1 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

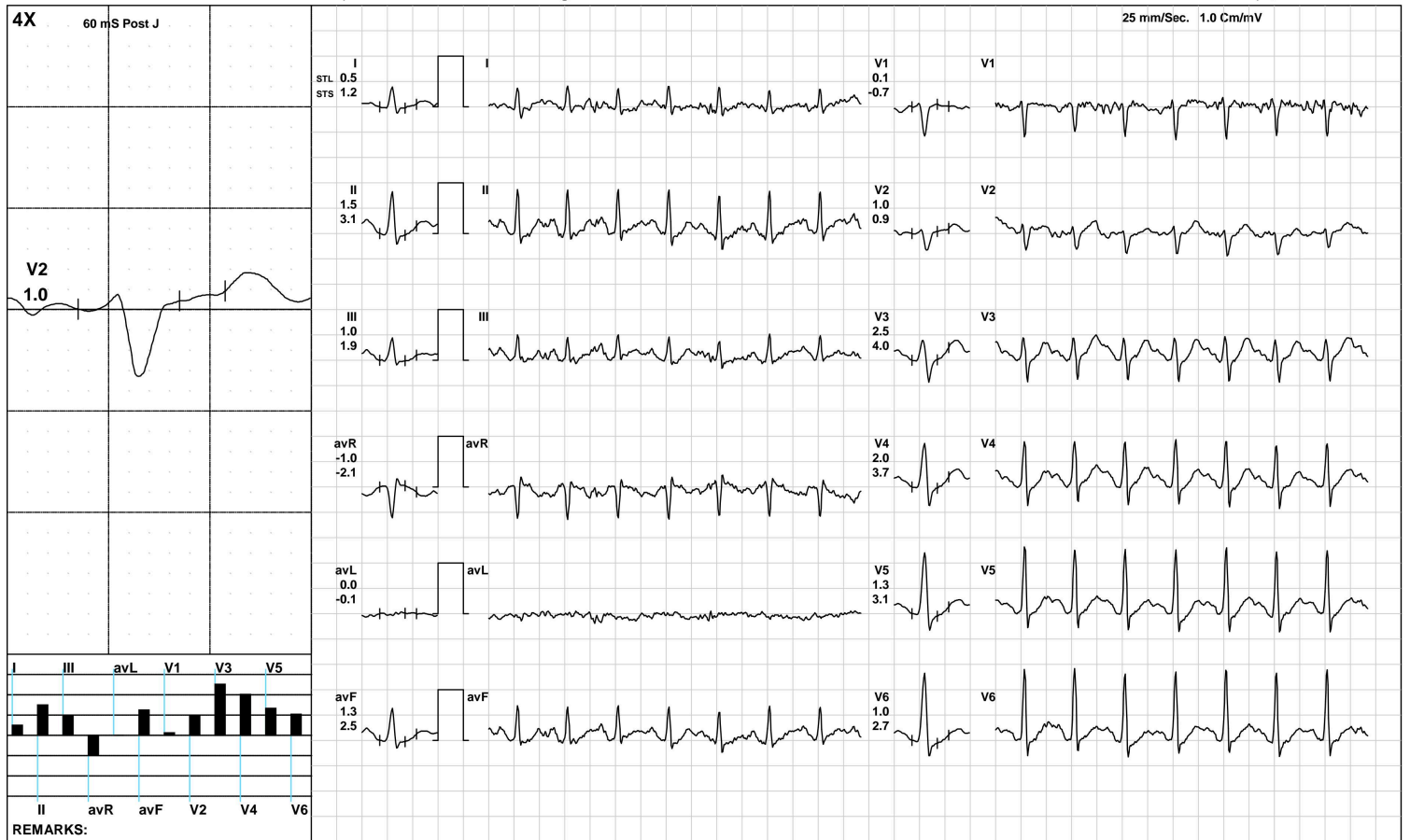
2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 147

Recovery(2:00)



Date: 24-Mar-2024 10:17:54 AM METS: 1.0/ 147 bpm 82% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 07:01 1.1 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

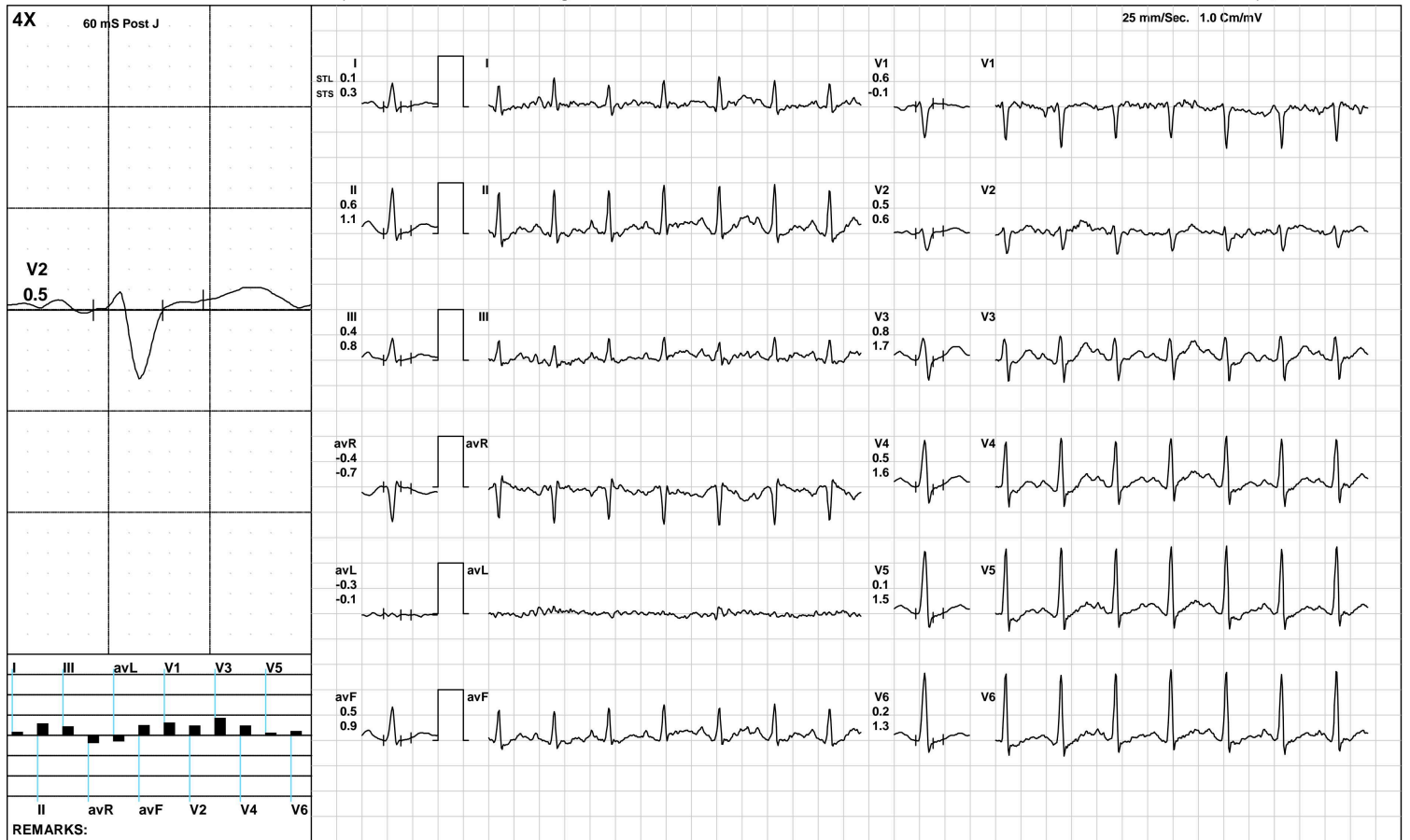
2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 134

Recovery(3:23)



Date: 24-Mar-2024 10:17:54 AM METS: 1.0/ 134 bpm 74% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 07:01 1.1 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

ST Measurements



2633 / MR. RANJAN RAVI / 41 Yrs / M / 177 Cms / 88 Kg / HR : 78

Date: 24-Mar-2024 10:17:54 AM

Protocol : BRUCE/

	I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6	I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6	STS(mv/sec)
STL(mm)Supine	1.4	2.1	0.8	-1.8	0.3	1.4	-0.4	1.9	2.7	2.9	2.8	2.6	1.1	1.7	0.6	-1.4	0.3	1.1	-0.5	1.4	2.1	2.2	2.2	2.0	
60 @mS Standing	1.4	2.1	0.8	-1.8	0.3	1.4	-0.4	1.9	2.7	2.9	2.8	2.6	1.1	1.7	0.6	-1.4	0.3	1.1	-0.5	1.4	2.1	2.2	2.2	2.0	
HV	1.4	2.1	0.8	-1.8	0.3	1.4	-0.4	1.9	2.7	2.9	2.8	2.6	1.1	1.7	0.6	-1.4	0.3	1.1	-0.5	1.4	2.1	2.2	2.2	2.0	
Warm Up	1.2	2.1	0.8	-1.6	0.2	1.4	-0.4	1.7	2.6	2.8	2.7	2.4	0.9	1.6	0.6	-1.2	0.1	1.1	-0.5	1.2	1.9	2.0	2.0	1.7	
ExStart	0.9	2.6	1.4	-1.7	-0.2	2.2	-0.1	1.4	3.0	2.8	2.7	2.4	1.0	2.6	1.5	-1.8	-0.3	2.1	-0.5	1.4	2.9	3.0	3.0	2.5	
Stage 1	0.2	-0.1	-0.4	-0.1	0.1	-0.2	0.7	1.3	0.4	0.2	-0.2	-0.1	0.8	2.1	1.3	-1.4	-0.7	1.7	-0.4	0.6	2.5	2.5	2.3	2.3	
Stage 2	0.3	0.4	0.0	-0.4	0.2	0.2	0.1	0.6	0.5	0.3	-0.1	0.0	0.4	2.2	1.6	-1.4	-0.3	1.9	-0.2	1.1	2.2	2.1	1.7	1.6	
PeakEx	-0.2	0.2	0.4	0.0	-0.4	0.4	0.1	-0.1	-0.2	-0.8	-1.2	-0.9	0.2	0.6	0.4	-0.4	-0.4	0.5	0.2	0.7	2.1	1.6	1.8	1.6	
Recovery	0.5	1.0	0.5	-0.8	0.0	0.7	0.3	1.3	2.0	1.3	0.9	0.8	1.5	2.8	1.3	-2.1	-0.1	2.0	-0.6	2.0	3.6	3.4	3.1	2.6	
Recovery	0.5	1.5	1.0	-1.0	0.0	1.3	0.1	1.0	2.5	2.0	1.3	1.0	1.2	3.1	1.9	-2.1	-0.1	2.5	-0.7	0.9	4.0	3.7	3.1	2.7	
Recovery	0.1	0.6	0.4	-0.4	-0.3	0.5	0.6	0.5	0.8	0.5	0.1	0.2	0.3	1.1	0.8	-0.7	-0.1	0.9	-0.1	0.6	1.7	1.6	1.5	1.3	

	I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6
STI(μVs)												
Supine	11.1	17.9	6.9	-14.6	2.1	12.4	-3.8	15.0	22.5	24.4	23.9	21.5
Standing	11.1	17.9	6.9	-14.6	2.1	12.4	-3.8	15.0	22.5	24.4	23.9	21.5
HV	11.1	17.9	6.9	-14.6	2.1	12.4	-3.8	15.0	22.5	24.4	23.9	21.5
Warm Up	11.1	18.8	7.7	-15.0	1.7	13.1	-4.1	15.1	23.6	25.3	24.8	22.2
ExStart	5.4	13.6	5.2	-9.6	-0.7	10.9	-0.8	8.8	17.1	15.7	14.1	12.5
Stage 1	-0.8	-4.9	-5.2	2.8	2.0	-4.5	5.1	6.0	-2.7	-4.0	-6.1	-5.2
Stage 2	0.7	-2.0	-2.0	1.0	0.9	-2.0	0.1	-0.1	-2.1	-3.0	-4.9	-3.8
PeakEx	-2.5	1.0	3.0	0.7	-2.7	2.2	1.4	-1.8	-4.9	-7.2	-9.4	-7.6
Recovery	0.0	-0.2	-0.3	0.1	0.1	-0.3	3.2	3.6	3.5	0.2	-1.4	-1.3
Recovery	1.2	3.2	2.0	-2.2	0.5	2.6	1.4	4.2	7.0	4.7	2.2	1.2
Recovery	0.5	1.8	1.2	-1.2	-1.3	1.5	3.7	2.2	2.8	0.7	-1.1	-0.5

AAROGYAM DIAGNOSTICS

Median Measurement Summary



PATNA

2633 / MR. RANJAN RAVI / 41 Yrs / Male / 177 Cm / 88 Kg

Time	HR	PR Int	QRS Wid	QRS Axis	QTC	P(μV)	R(μV)	S(μV)	T(μV)	Min. J Leads	for Min. Post	RR Var	VEB	Missed Beats
(Min.)	(bpm)	(mS)	(mS)	(Deg.)	(mS)	(Max)	(Max)	(Min)	(Max)	(μV)	(L & PJ)	(μV)	(%)	(Counts)
00:30	105	112	80	44	444	123	1192	-652	539	50	V1	-106	0.00	0
01:00	115	174	72	47	477	207	1170	-642	492	-64	V1	-31	0.00	0
01:30	118	150	70	56	332	189	1133	-631	354	-34	V1	-43	0.00	0
02:00	121	152	82	53	470	212	1105	-612	356	-43	V1	-25	0.00	0
02:30	121	152	72	47	472	256	1052	-670	399	-23	III	-12	0.00	0
03:00	121	158	70	43	468	250	1081	-653	387	-22	avL	-9	0.00	0
03:30	133	52	-120	61	146	-954	1067	-931	-1039	-942	V4	-953	0.00	0
04:00	140	134	150	55	328	202	1087	-574	242	-18	V1	-37	0.00	0
04:30	150	124	70	53	335	302	1067	-566	251	-59	avL	-43	0.00	0
05:00	148	124	68	50	432	207	1062	-570	257	-9	III	-31	0.00	0
05:30	152	116	68	56	330	214	1073	-576	255	-240	V5	-43	0.00	0
06:00	152	110	68	44	427	218	1033	-542	228	-244	V5	-40	0.00	0
06:30	163	112	74	58	339	183	1057	-413	206	-137	V5	-43	0.00	0
07:00	170	100	66	54	398	223	1036	-516	161	-289	V5	-98	0.00	0
07:30	175	96	98	51	406	207	1085	-508	192	-262	V6	-102	0.00	0
08:00	178	78	74	48	415	209	1077	-488	203	-188	V6	-89	0.00	0
08:30	178	98	74	63	175	244	1064	-509	-221	-235	V5	-101	0.00	0
09:00	180	90	74	64	388	233	1098	-523	222	-210	V6	-108	0.00	0
09:30	187	74	72	66	203	241	1212	-570	278	-280	V6	-157	0.00	0
10:00	190	80	70	78	195	269	1079	-570	-311	-326	V6	-213	0.00	0
10:30	174	92	72	63	359	257	1104	-535	324	-233	V6	-110	0.00	0
11:00	160	94	76	64	430	280	1223	-581	398	-167	V6	-26	0.00	0
11:30	152	106	74	57	434	295	1276	-487	418	-23	V1	-7	0.00	0
12:00	146	120	78	58	425	284	1328	-640	410	68	V5	-35	0.00	0
12:30	140	128	54	57	151	268	1336	-682	-373	92	V5	-31	0.00	0

AAROGYAM DIAGNOSTICS

PATNA

2633 / MR. RANJAN RAVI / 41 Yrs / Male / 177 Cm / 88 Kg

Median Measurement Summary

Time	HR	PR Int	QRS Wid	QRS Axis	QTC	P(μV)	R(μV)	S(μV)	T(μV)	Min. J Leads	for Min. Post RR Var	VEB	Missed Beats		
(Min)	(bpm)	(mS)	(mS)	(Deg)	(mS)	(Max)	(Max)	(Min)	(Max)	(μV)	(J & PJ)	(μV)	(%)	(Counts)	(Counts)
13:00	136	126	56	56	152	237	1338	-683	-353	-22	V6	-38	0.00	0	0



ISO 9001 : 2015

AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, P.C. Colony, Opp. Madhuban Complex,
Near Malahi Pakari Chowk, Kankarbagh, Patna – 20

9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	24/03/2024	Srl No.	2	Patient Id	2403240002
Name	Mr. RANJAN RAVI	Age	41 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
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HAEMATOLOGY

HB A1C	5.2	%	
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EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

URINE ROUTINE

QUANTITY	20	ml.
COLOUR	PALE YELLOW	
TRANSPARENCY	CLEAR	
SPECIFIC GRAVITY	1.015	
PH	6.0	
ALBUMIN	NIL	



ISO 9001 : 2015

AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, P.C. Colony, Opp. Madhuban Complex,
Near Malahi Pakari Chowk, Kankarbagh, Patna – 20

9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	24/03/2024	Srl No.	2	Patient Id	2403240002
Name	Mr. RANJAN RAVI	Age	41 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	1-2	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	0-1	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

**** End Of Report ****

Dr.R.B.RAMAN
MBBS, MD
CONSULTANT PATHOLOGIST

Patient Name	: Mr.RAVCI RANJAN	Collected	: 24/Mar/2024 01:55PM
Age/Gender	: 41 Y 0 M 0 D /M	Received	: 25/Mar/2024 11:45AM
UHID/MR No	: DEKR.0000000141	Reported	: 25/Mar/2024 01:19PM
Visit ID	: DEKROPV145	Status	: Final Report
Ref Doctor	: Dr.SELF	Client Name	: PCC AMBEDKAR CHOWK HANUMAN NAG
IP/OP NO	:	Patient location	: AMBEDKAR CHOWK,HANUMAN NAGAR,Patna

DEPARTMENT OF HAEMATOLOGY
XPERT HEALTH BASIC

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE BLOOD COUNT (CBC) , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.7	g/dL	13-17	Spectrophotometer
PCV	40.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.79	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	85	fL	83-101	Calculated
MCH	26.6	pg	27-32	Calculated
MCHC	31.3	g/dL	31.5-34.5	Calculated
R.D.W	17.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,000	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	40.1	%	40-80	Electrical Impedance
LYMPHOCYTES	52.6	%	20-40	Electrical Impedance
EOSINOPHILS	2.1	%	1-6	Electrical Impedance
MONOCYTES	4.8	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
CORRECTED TLC	6,000	Cells/cu.mm		Calculated
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2406	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3156	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	126	Cells/cu.mm	20-500	Calculated
MONOCYTES	288	Cells/cu.mm	200-1000	Calculated
BASOPHILS	24	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	0.76		0.78- 3.53	Calculated
PLATELET COUNT	152000	cells/cu.mm	150000-410000	Electrical impedance



Dr.Ashish Ranjan Singh
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:HA06699485

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DEPARTMENT OF BIOCHEMISTRY

XPERT HEALTH BASIC

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	68	mg/dL	70-100	GOD - POD

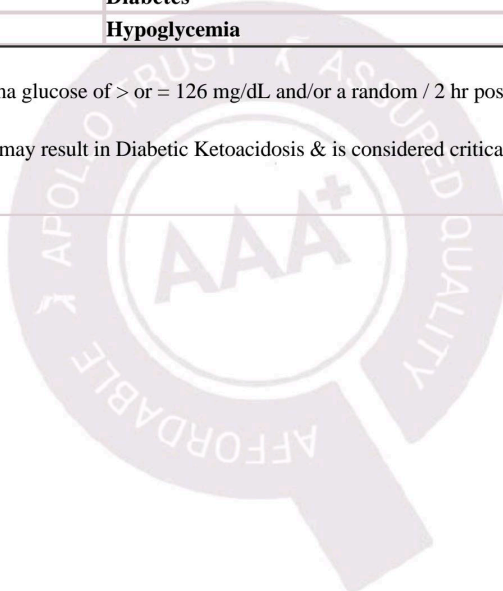
Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

1. The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.



Ashish

Dr.Ashish Ranjan Singh
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:BI18963263

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DEPARTMENT OF BIOCHEMISTRY

CAMP RANDOM SUGAR

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, RANDOM , SODIUM FLUORIDE PLASMA (R)	60	mg/dL	70 - 140	Glucose oxidase




Dr.Ashish Ranjan Singh
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DEPARTMENT OF BIOCHEMISTRY
XPERT HEALTH BASIC

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	280	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	153	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	70	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	210	mg/dL	<130	Calculated
LDL CHOLESTEROL	179.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	30.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.00		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.02		<0.11	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100; Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220
ATHEROGENIC INDEX(AIP)	<0.11	0.12 – 0.20	>0.21	

Note:

- 1) Measurements in the same patient on different days can show physiological and analytical variations.
- 2) NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- 3) Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.

Page 4 of 9



Dr.Ashish Ranjan Singh
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:BI18963264

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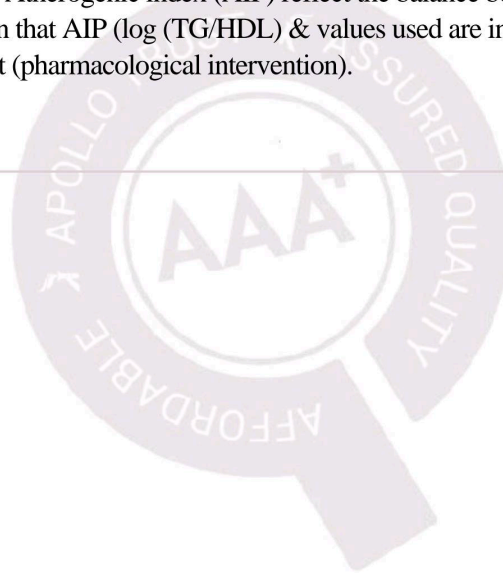


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DEPARTMENT OF BIOCHEMISTRY

XPERT HEALTH BASIC

- 4) Low HDL levels are associated with coronary heart disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- 5) As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- 6) VLDL, LDL Cholesterol Non-HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 400 mg/dl. When Triglycerides are more than 400 mg/dl LDL cholesterol is a direct measurement.
- 7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).



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DEPARTMENT OF BIOCHEMISTRY
XPERT HEALTH BASIC

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.58	mg/dL	0.20-1.20	Colorimetric
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.46	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	66	U/L	21-72	UV with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	37.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	67.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.87	g/dL	6.3-8.2	Biuret
ALBUMIN	5.36	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	2.51	g/dL	2.0-3.5	Calculated
A/G RATIO	2.14		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. • Disproportionate increase in AST, ALT compared with ALP. • Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated. • ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

- 3. Synthetic function impairment:** • Albumin- Liver disease reduces albumin levels. • Correlation with PT (Prothrombin Time) helps.

Page 6 of 9



Dr.Ashish Ranjan Singh
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DEPARTMENT OF BIOCHEMISTRY
XPERT HEALTH BASIC

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.83	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	23.70	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	11.1	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.57	mg/dL	3.5-8.5	Uricase
CALCIUM	9.69	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.05	mg/dL	2.5-4.5	PMA Phenol
SODIUM	138.32	mmol/L	135-145	Direct ISE
POTASSIUM	5.1	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	97.87	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.87	g/dL	6.3-8.2	Biuret
ALBUMIN	5.36	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	2.51	g/dL	2.0-3.5	Calculated
A/G RATIO	2.14		0.9-2.0	Calculated



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DEPARTMENT OF IMMUNOLOGY
XPERT HEALTH BASIC

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.14	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.83	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	4.988	µIU/mL	0.34-5.60	CLIA

Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

*** End Of Report ***

Page 8 of 9



Dr.Ashish Ranjan Singh
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:IM07219695

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DEPARTMENT OF IMMUNOLOGY
XPERT HEALTH BASIC

Result/s to Follow:
COMPLETE URINE EXAMINATION (CUE)



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M.B.B.S,M.D(Pathology)
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