



Mediwheel  
...Your wellness partner

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 : MRS. SHARMA SWATI  
Contact Details : 8630133693  
Hospital Package Name : Mediwheel Full Body Health Checkup Female Below 40  
Location : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment  
Appointment Date : 05-04-2024

Member Information		
Booked Member Name	Age	Gender
MRS. SHARMA SWATI	33 year	Female

**Tests included in this Package -**

- Pap Smear
- Stool Test
- Gynae 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
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile

Thanks,  
Mediwheel Team

Please Download Mediwheel App





JP13 20180016343 UP07302910MT

MV 9/12/2018 MCWG 29/12/2018

Form 7/Rule 16(2)

UP

Address  
 14 SHANTI NIKETAN COLONY  
 Bulandshahr (NPP + OG)  
 Bulandshahr, UP - 203001

जारीकर्ता / Issuing Authority Sign  
 BULANDSHAHR

Holder's Signature

UNION OF INDIA Driving Licence UP NT

UP13 20180016343

जारी करने की तिथि / Date of Issue 29/12/2018

वैधता / Validity 28/12/2038

जन्म तिथि / Date of Birth 17/07/1990

Blood Group Unknown

नाम / Name SWATI SINGH

पिता/पति का नाम / Son/Daughter/Wife of DEVI SINGH

UP NT

Swati Singh



Manipal Hospital Ghaziabad

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad 201 002

0120 3535 353 / +91 88609 45566



URN : MH013282777

**OUTPATIENT RECORD**

Hospital No: MH013282777	Visit No: H18000002094
Name: MRS SWATI SHARMA	Age/Sex: 33 Yrs/Female
Doctor Name: HEALTH CHECK MGD	Specialty: HC SERVICE MGD
Date: 11/04/2024 11:04AM	

**OPD Notes :**

PRESENT OPHTHALMIC COMPLAINS - HEALTH CHECKUP  
SYSTEMIC/ OPHTHALMIC HISTORY - N/C

EXAMINATION DETAILS	RIGHT EYE	LEFT EYE
VISION	6/6P	6/6P
CONJ	NORMAL	NORMAL
CORNEA	CLEAR	CLEAR
LENS	CLEAR	CLEAR
OCULAR MOVEMENTS	FULL	FULL
NCT	15	16
FUNDUS EXAMINATION		
OPTIC DISC	C:D 0.3	C:D 0.3
MACULAR AREA	FOVEAL REFLEX PRESENT	FOVEAL REFLEX PRESENT

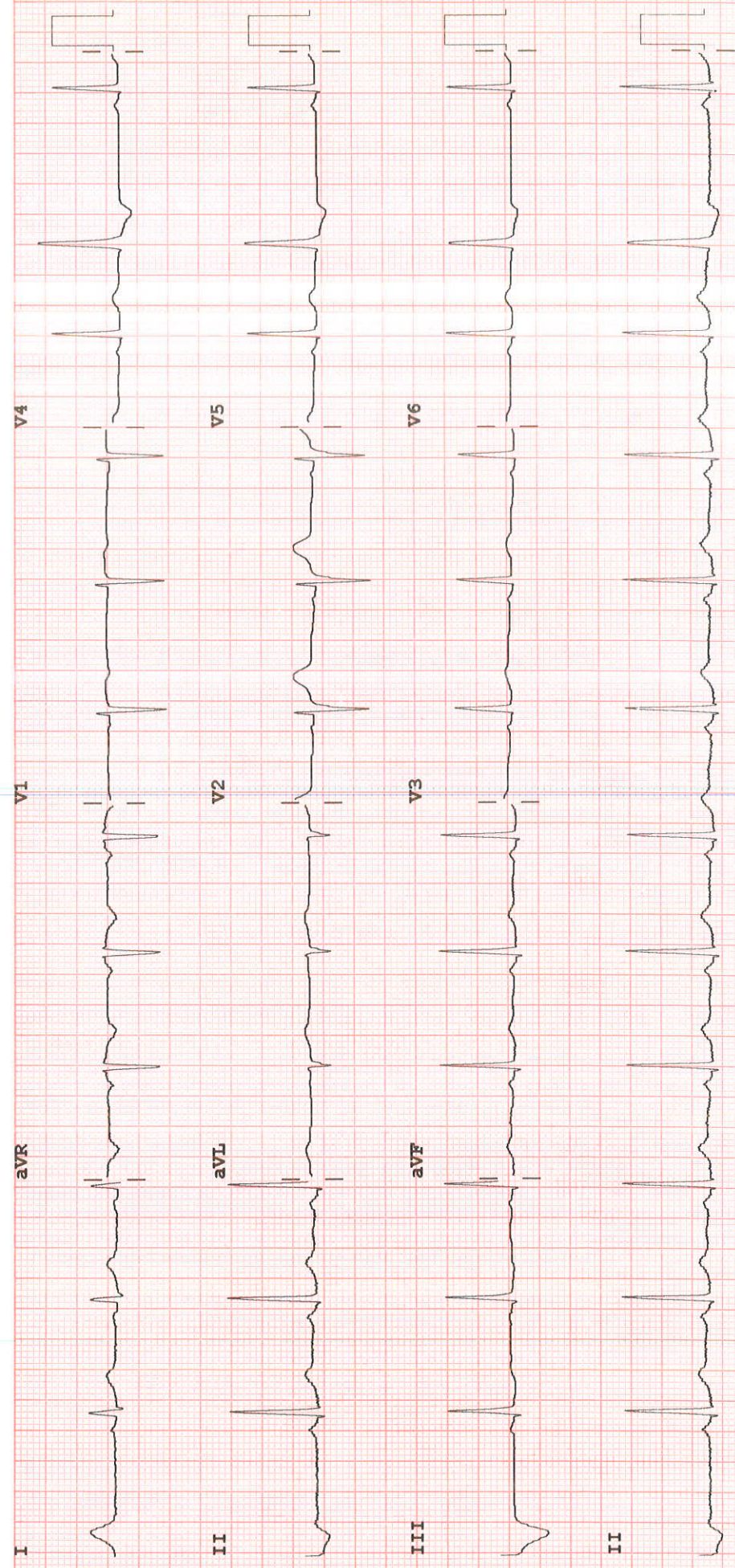
**POWER OF GLASS**  
Right eye: -1.00 Dsp -6/6  
Left eye: -0.75 Dsp -6/6

ADVISE / TREATMENT  
GLASSES  
E/D AQUALINA 4 TIMES DAILY BE  
REVIEW AFTER 6 MTH

HEALTH CHECK MGD



- OTHERWISE NORMAL ECG -  
Unconfirmed Diagnosis



PH100B CL P?

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

Dev:





## TMT INVESTIGATION REPORT

Patient Name	MRS SWATI SHARMA	Location	: Ghaziabad
Age/Sex	: 33Year(s)/male	Visit No	: V0000000001-GHZB
MRN No	MH013282777	Order Date	: 11/04/2024
Ref. Doctor	: HCP	Report Date	: 11/04/2024

<b>Protocol</b>	: Bruce	<b>MPHR</b>	: 187BPM
<b>Duration of exercise</b>	: 05min 36sec	<b>85% of MPHR</b>	: 159BPM
<b>Reason for termination</b>	: THR achieved	<b>Peak HR Achieved</b>	: 171BPM
<b>Blood Pressure (mmHg)</b>	: Baseline BP : 120/80mmHg	<b>% Target HR</b>	: 91%
	Peak BP : 140/90mmHg	<b>METS</b>	: 7.0METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	80	120/80	Nil	No ST changes seen	Nil
STAGE 1	3:00	154	130/90	Nil	No ST changes seen	Nil
STAGE 2	2:36	171	140/90	Nil	No ST changes seen	Nil
RECOVERY	4:15	98	130/80	Nil	No ST changes seen	Nil

**COMMENTS:**

- No ST changes in base line ECG.
- No ST changes at peak stage.
- No ST changes in recovery.
- Normal chronotropic response.
- Normal blood pressure response.

**IMPRESSION:**

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

**Dr. Bhupendra Singh**MD, DM (CARDIOLOGY), FACC  
Sr. Consultant Cardiology**Dr. Abhishek Singh**MD, DNB (CARDIOLOGY), MNAMS  
Sr. Consultant Cardiology**Dr. Sudhanshu Mishra**MD  
Cardiology Registrar

Manipal Hospital, Ghaziabad

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P +91 80 4936 0300 E info@manipalhospitals.com www.manipalhospitals.com

**RADIOLOGY REPORT**

NAME	MRS Swati SHARMA	STUDY DATE	11/04/2024 1:07PM
AGE / SEX	33 y / F	HOSPITAL NO.	MH013282777
ACCESSION NO.	R7217883	MODALITY	US
REPORTED ON	11/04/2024 1:49PM	REFERRED BY	HEALTH CHECK MGD

**USG ABDOMEN & PELVIS****FINDINGS**

LIVER: Liver is normal in size (measures 141 mm), shape and echotexture. Rest normal.

SPLEEN: Spleen is normal in size (measures 87 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 9 mm.

COMMON BILE DUCT: Appears normal in size and measures 2 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 103 x 35 mm.

Left Kidney: measures 101 x 49 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is minimally distended. Wall thickness is normal and lumen is echofree. Rest normal.

UTERUS: Uterus is anteverted, normal in size (measures 64 x 46 x 43 mm), shape and echotexture.

Endometrial thickness measures 3.1 mm. Cervix appears normal.

OVARIES: Both ovaries are normal in size, shape and echotexture. Rest normal.

Right ovary measures 29 x 23 x 13 mm with volume 4.5 cc.

Left ovary measures 27 x 27 x 15 mm with volume 5.7 cc.

BOWEL: Visualized bowel loops appear normal.

**IMPRESSION**

**-No significant abnormality noted.**

Recommend clinical correlation.



**Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS**

**CONSULTANT RADIOLOGIST**

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

**RADIOLOGY REPORT**

NAME	MRS Swati SHARMA	STUDY DATE	11/04/2024 11:24AM
AGE / SEX	33 y / F	HOSPITAL NO.	MH013282777
ACCESSION NO.	R7217882	MODALITY	CR
REPORTED ON	11/04/2024 11:27AM	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 noted.**

Recommend clinical correlation.

**Dr. Monica Shekhawat MBBS, DNB**  
**CONSULTANT RADIOLOGIST**

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





**LABORATORY REPORT**

Name : MRS SWATI SHARMA  
Registration No : MH013282777  
Patient Episode : H18000002094  
Referred By : HEALTH CHECK MGD  
Receiving Date : 11 Apr 2024 11:10

Age : 33 Yr(s) Sex :Female  
Lab No : 202404001715  
Collection Date : 11 Apr 2024 11:10  
Reporting Date : 11 Apr 2024 15:32

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>THYROID PROFILE, Serum</b>			<b>Specimen Type : Serum</b>
T3 - Triiodothyronine (ELFA)	1.090	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	7.770	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	3.020	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 : MRS SWATI SHARMA  
Registration No : MH013282777  
Patient Episode : H18000002094  
Referred By : HEALTH CHECK MGD  
Receiving Date : 11 Apr 2024 11:10

Age : 33 Yr(s) Sex :Female  
Lab No : 202404001715  
Collection Date : 11 Apr 2024 11:10  
Reporting Date : 11 Apr 2024 16:22

**BLOOD BANK**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing B 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-----

*Alka*

Dr. Alka Dixit Vats  
Consultant Pathologist



**LABORATORY REPORT**

Name : MRS SWATI SHARMA  
Registration No : MH013282777  
Patient Episode : H18000002094  
Referred By : HEALTH CHECK MGD  
Receiving Date : 11 Apr 2024 11:10

Age : 33 Yr(s) Sex :Female  
Lab No : 202404001715  
Collection Date : 11 Apr 2024 11:10  
Reporting Date : 11 Apr 2024 14:07

**HAEMATOLOGY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>COMPLETE BLOOD COUNT (AUTOMATED)</b>		<b>SPECIMEN-EDTA Whole Blood</b>	
RBC COUNT (IMPEDEANCE)	3.99	millions/cumm	[3.80-4.80]
HEMOGLOBIN	12.4	g/dl	[12.0-15.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	38.4	%	[36.0-46.0]
MCV (DERIVED)	96.2	fL	[83.0-101.0]
MCH (CALCULATED)	31.1	pg	[25.0-32.0]
MCHC (CALCULATED)	32.3	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	12.8	%	[11.6-14.0]
Platelet count	188	x 10 <sup>3</sup> cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	14.00	fL	
WBC COUNT (TC) (IMPEDEANCE)	6.71	x 10 <sup>3</sup> cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	47.0	%	[40.0-80.0]
<b>Lymphocytes</b>	<b>43.0 #</b>	%	<b>[20.0-40.0]</b>
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	3.0	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
<b>ESR</b>	<b>80.0 #</b>	<b>mm/1sthour</b>	<b>[0.0-</b>





**LABORATORY REPORT**

Name : MRS SWATI SHARMA  
Registration No : MH013282777  
Patient Episode : H18000002094  
Referred By : HEALTH CHECK MGD  
Receiving Date : 11 Apr 2024 11:10

Age : 33 Yr(s) Sex :Female  
Lab No : 202404001715  
Collection Date : 11 Apr 2024 11:10  
Reporting Date : 11 Apr 2024 16:35

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>Glycosylated Hemoglobin</b>			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	4.9	%	[0.0-5.6]
Method: HPLC			
As per American Diabetes Association (ADA)			
HbA1c in %			
Non diabetic adults $\geq 18$ years $< 5.7$			
Prediabetes (At Risk) 5.7-6.4			
Diagnosing Diabetes $\geq 6.5$			
Estimated Average Glucose (eAG)	94	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 : MRS SWATI SHARMA  
Registration No : MH013282777  
Patient Episode : H18000002094  
Referred By : HEALTH CHECK MGD  
Receiving Date : 11 Apr 2024 12:55

Age : 33 Yr(s) Sex :Female  
Lab No : 202404001715  
Collection Date : 11 Apr 2024 12:55  
Reporting Date : 11 Apr 2024 15:30

**CLINICAL PATHOLOGY**

**MICROSCOPIC EXAMINATION (Automated/Manual)**

Pus Cells	2-3/hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	2-3 /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	

**Serum LIPID PROFILE**

Serum TOTAL CHOLESTEROL	147	mg/dl	[<200]
Method:Oxidase,esterase, peroxide			Moderate risk:200-239
			High risk:>240
TRIGLYCERIDES (GPO/POD)	106	mg/dl	[<150]
			Borderline high:151-199
			High: 200 - 499
			Very high:>500
HDL- CHOLESTEROL	56	mg/dl	[35-65]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	21	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	70.0	mg/dl	[<120.0]
			Near/
Above optimal-100-129			
			Borderline High:130-159
			High Risk:160-189
T.Chol/HDL.Chol ratio (Calculated)	2.6		<4.0 Optimal
			4.0-5.0 Borderline
			>6 High Risk
LDL.CHOL/HDL.CHOL Ratio (Calculated)	1.3		<3 Optimal
			3-4 Borderline
			>6 High Risk



**LABORATORY REPORT**

<b>Name</b>	: MRS SWATI SHARMA	<b>Age</b>	: 33 Yr(s) Sex :Female
<b>Registration No</b>	: MH013282777	<b>Lab No</b>	: 202404001715
<b>Patient Episode</b>	: H18000002094	<b>Collection Date</b>	: 11 Apr 2024 11:10
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 11 Apr 2024 13:17
<b>Receiving Date</b>	: 11 Apr 2024 11:10		

**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	16.7	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
<b>BUN, BLOOD UREA NITROGEN</b>	<b>7.8 #</b>	<b>mg/dl</b>	<b>[8.0-20.0]</b>
Method: Calculated			
<b>CREATININE, SERUM</b>	<b>0.68 #</b>	<b>mg/dl</b>	<b>[0.70-1.20]</b>
Method: Jaffe rate-IDMS Standardization			
URIC ACID	4.9	mg/dl	[4.0-8.5]
Method:uricase PAP			

SODIUM, SERUM	137.90	mmol/L	[136.00-144.00]
---------------	--------	--------	-----------------

POTASSIUM, SERUM	4.50	mmol/L	[3.60-5.10]
SERUM CHLORIDE	104.3	mmol/L	[101.0-111.0]
Method: ISE Indirect			

eGFR (calculated)	115.3	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** : MRS SWATI SHARMA  
**Registration No** : MH013282777  
**Patient Episode** : H18000002094  
**Referred By** : HEALTH CHECK MGD  
**Receiving Date** : 11 Apr 2024 11:10

**Age** : 33 Yr(s) Sex :Female  
**Lab No** : 202404001715  
**Collection Date** : 11 Apr 2024 11:10  
**Reporting Date** : 11 Apr 2024 13:17

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>LIVER FUNCTION TEST</b>			
BILIRUBIN - TOTAL <i>Method: D P D</i>	0.77	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT <i>Method: DPD</i>	0.15	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) <i>Method: Calculation</i>	0.62	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) <i>Method: BIURET</i>	7.20	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) <i>Method: BCG</i>	4.32	g/dl	[3.50-5.20]
GLOBULINS (SERUM) <i>Method: Calculation</i>	2.90	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO <i>Method: Calculation</i>	1.50		[1.00-2.50]
AST (SGOT) (SERUM) <i>Method: IFCC W/O P5P</i>	30.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) <i>Method: IFCC W/O P5P</i>	43.00	U/L	[14.00-54.00]
<b>Serum Alkaline Phosphatase</b> <i>Method: AMP BUFFER IFCC)</i>	<b>113.0 #</b>	<b>IU/L</b>	<b>[32.0-91.0]</b>
GGT	35.0	U/L	[7.0-50.0]



**LABORATORY REPORT**

Name : MRS SWATI SHARMA  
Registration No : MH013282777  
Patient Episode : H18000002094  
Referred By : HEALTH CHECK MGD  
Receiving Date : 11 Apr 2024 11:10  
Age : 33 Yr(s) Sex :Female  
Lab No : 202404001715  
Collection Date : 11 Apr 2024 11:10  
Reporting Date : 11 Apr 2024 13:17

**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.

Page 6 of 8

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

**Dr. Charu Agarwal**  
Consultant Pathologist



**LABORATORY REPORT**

Name : MRS SWATI SHARMA  
Registration No : MH013282777  
Patient Episode : H18000002094  
Referred By : HEALTH CHECK MGD  
Receiving Date : 11 Apr 2024 11:10

Age : 33 Yr(s) Sex :Female  
Lab No : 202404001716  
Collection Date : 11 Apr 2024 11:10  
Reporting Date : 11 Apr 2024 13:17

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>GLUCOSE-Fasting</b> Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	88.0	mg/dl	[70.0-110.0]

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 : MRS SWATI SHARMA Age : 33 Yr(s) Sex :Female  
Registration No : MH013282777 Lab No : 202404001717  
Patient Episode : H18000002094 Collection Date : 11 Apr 2024 16:12  
Referred By : HEALTH CHECK MGD Reporting Date : 11 Apr 2024 17:36  
Receiving Date : 11 Apr 2024 16:12

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>PLASMA GLUCOSE</b> Specimen:Plasma GLUCOSE, POST PRANDIAL (PP), 2 HOURS Method: Hexokinase	83.0	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