



प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

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

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

	कर्मचारी विवरण
नाम	MR. ALLAUDIN BELIM JUNED
क.कू.संख्या	170883
पदनाम	SINGLE WINDOW OPERATOR B
कार्य का स्थान	DEVKARAN NA MUVADA
जन्म की तारीख	02-10-1987
स्वास्थ्य जांच की प्रस्तावित तारीख	10-02-2024
बुकिंग संदर्भ सं.	23M170883100087974E

यह अनुमोदन/संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 05-02-2024 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 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 इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(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।)



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. ALLAUDIN BELIM JUNED
EC NO.	170883
DESIGNATION	SINGLE WINDOW OPERATOR B
PLACE OF WORK	DEVKARAN NA MUVADA
BIRTHDATE	02-10-1987
PROPOSED DATE OF HEALTH CHECKUP	10-02-2024
BOOKING REFERENCE NO.	23M170883100087974E

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 **05-02-2024** 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**

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



ROBHAVC108



J. A. Belim

Bank of Baroda



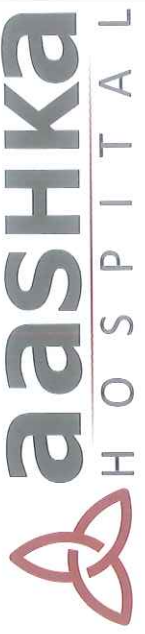
MR. BELIM JUNED ALLAUDIN

170883

[Signature]

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



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

UHID:	OSP3324	Date:	10.2.24	Time:	
Patient Name:	Sumed	Age / Sex:		Height:	
				Weight:	
History:	no.				
Allergy History:	no.				
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:	S/L B&R WNL				
Diagnosis:	Normal				

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CIN: L85110GJ2012PLC072647



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H O S P I T A L



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

UHD:	OSP 33241	Date:	10/2/24	Time:	3PM
Patient Name:	Juned	Height:	161	cm	
Age / Sex:	27y/M	Weight:	65	kg	
LMP:					
History:		History:			
C/C/O:					
Allergy History:		Addiction:			
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Vitals & Examination:					
Temperature:	Normal				
Pulse:	82/Min				
BP:	132/86				
SPO2:	98%				
Provisional Diagnosis:					

Aashka Hospitals Ltd.

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www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



aashka
H O S P I T A L

Name:- Javed Aluebin -

Age:- 30 M

Date:- 10/01/24

Order:- 1 train +
outdoors +

Order:- feeding

[Signature]

Aashka Hospitals Ltd.

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CIN: L85110GJ2012PLC072647



PATIENT NAME: JUNED ALLAUDIN BELIM

GENDER/AGE: Male / 36 Years

DOCTOR: DR. HASIT JOSHI

OPDNO: OSP33241

DATE: 10/02/24

2D-ECHO

MITRAL VALVE	: NORMAL
AORTIC VALVE	: NORMAL
TRICUSPID VALVE	: NORMAL
PULMONARY VALVE	: NORMAL
AORTA	: 36mm
LEFT ATRIUM	: 38mm
LV Dd / Ds	: 40/30mm
IVS / LVPW / D	: 11/11mm
IVS	: INTACT
IAS	: INTACT
RA	: NORMAL
RV	: NORMAL
PA	: NORMAL
PERICARDIUM	: NORMAL
VEL	: PEAK MEAN
M/S	: Gradient mm Hg Gradient mm Hg
MITRAL	: 1/0.8m/s
AORTIC	: 1.3m/s
PULMONARY	: 1.15m/s
COLOUR DOPPLER	: NO MR/TR
RVSP	:
CONCLUSION	: BORDERLINE LVH; NORMAL LV FUNCTION.

CARDIOLOGIST

DR. HASIT JOSHI (9825012235)



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CIN: L85110GJ2012PLC072647

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H O S P I T A L



PATIENT NAME: JUNED ALLAUDIN BELIM

GENDER/AGE: Male / 36 Years

DOCTOR:

OPDNO: OSP33241

DATE: 10/02/24

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows increased parenchymal echoes. No evidence of focal lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen. **4 mm and 5 mm calculi are seen in right kidney. Left renal concretions are seen.**

Right kidney measures about 10.0 x 4.3 cms in size.

Left kidney measures about 10.2 x 4.1 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.

No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 140 cc.

PROSTATE: Prostate appears normal in size, and shows normal parenchymal echoes. No evidence of pathological calcification or solid or cystic mass lesion is seen.
Prostate volume measures about 14 cc.

COMMENT: Grade I fatty changes in liver.

4 mm and 5 mm calculi seen in right kidney. Left renal concretions seen.
Normal sonographic appearance of GB; Pancreas, spleen, bladder and prostate.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

Aashka Hospitals Ltd.

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H O S P I T A L



PATIENT NAME: JUNED ALLAUDIN BELIM

GENDER/AGE: Male / 36 Years

DATE: 10/02/24

DOCTOR:

OPDNO: OSP33241

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



LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED **Sex/Age :** Male / 37 Years **Case ID :** 40202200262
Ref.By : HOSPITAL **Dis. At :** **Pt. ID :** 3340164
Bill. Loc. : Aashka hospital **Pt. Loc. :** **Mobile No :** **Ref Id1 :** OSP33241
Reg Date and Time : 10-Feb-2024 09:06 **Sample Type :** **Ref Id2 :** O23249970
Sample Date and Time : 10-Feb-2024 09:06 **Sample Coll. By :** **Acc. Remarks :** Normal

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	127.60	mg/dL	70 - 100
Glyco Hemoglobin (HbA1c)	6.60	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Haemogram (CBC)			
RBC (Electrical Impedance)	6.00	millions/cu mm	4.50 - 5.50
PCV(Calc)	51.24	%	40.00 - 50.00
Lipid Profile			
Cholesterol	205.38	mg/dL	110 - 200
HDL Cholesterol	35.5	mg/dL	48 - 77
Chol/HDL	5.79	0 - 4.1	
LDL Cholesterol	144.52	mg/dL	0.00 - 100.00

Abnormal Result(s) Summary End

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



LABORATORY REPORT

Name : JUNED ALLAUDIN JUNED
 Ref.By : HOSPITAL
 Bill. Loc. : Aashka hospital

Sex/Age : Male / 37 Years
 Dis. At :
 Case ID : 40202200262
 Pt. ID : 3340164
 Pt. Loc. :

Reg Date and Time : 10-Feb-2024 09:06
 Sample Date and Time : 10-Feb-2024 09:06
 Report Date and Time : 10-Feb-2024 09:59

Sample Type : Whole Blood EDTA
 Sample Coll. By :
 Acc. Remarks : Normal

Mobile No :
 Ref Id1 : OSP33241
 Ref Id2 : O23249970

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin	16.7	G%	13.00 - 17.00	
RBC (Electrical Impedance)	H 6.00	millions/cumm	4.50 - 5.50	
PCV(Calc)	H 51.24	%	40.00 - 50.00	
MCV (RBC histogram)	85.4	fL	83.00 - 101.00	
MCH (Calc)	27.7	pg	27.00 - 32.00	
MCHC (Calc)	32.5	gm/dL	31.50 - 34.50	
RDW (RBC histogram)	13.50	%	11.00 - 16.00	

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

		UNIT	EXPECTED VALUES	EXPECTED VALUES
Total WBC Count	6520	/μL	4000.00 - 10000.00	
Neutrophil	[%] 65.0	%	40.00 - 70.00	[Abs] 4238 /μL 2000.00 - 7000.00
Lymphocyte	28.0	%	20.00 - 40.00	1826 /μL 1000.00 - 3000.00
Eosinophil	2.0	%	1.00 - 6.00	130 /μL 20.00 - 500.00
Monocytes	5.0	%	2.00 - 10.00	326 /μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0 /μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	302000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	2.32		0.78 - 3.53

SMEAR STUDY

RBC Morphology : Normocytic Normochromic RBCs.
 WBC Morphology : Total WBC count within normal limits.
 Platelet : Platelets are adequate in number.
 Parasite : Malarial Parasite not seen on smear.

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



Dr. Shreya Shah
 M.D. (Pathologist)

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LABORATORY REPORT



Name : **JUNED ALLAUDIN JUNED** Sex/Age : **Male / 37 Years** Case ID : **40202200262**
Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3340164**
Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : **10-Feb-2024 09:06** Sample Type : **Whole Blood EDTA** Mobile No :
Sample Date and Time : **10-Feb-2024 09:06** Sample Coll. By : Ref Id1 : **OSP33241**
Report Date and Time : **10-Feb-2024 10:40** Acc. Remarks : **Normal** Ref Id2 : **O23249970**

TEST

RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

ESR **03** mm after 1hr 3 - 15
Westergren Method

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

Dr. Shreya Shah
M.D. (Pathologist)

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ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS



LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED

Sex/Age : Male / 37 Years

Case ID : 40202200262

Ref.By : HOSPITAL

Dis. At :

Pt. ID : 3340164

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:06

Sample Type : Whole Blood EDTA

Mobile No :

Sample Date and Time : 10-Feb-2024 09:06

Sample Coll. By :

Ref Id1 : OSP33241

Report Date and Time : 10-Feb-2024 09:27

Acc. Remarks : Normal

Ref Id2 : O23249970

TEST

RESULTS

UNIT BIOLOGICAL REF RANGE

REMARKS

HAEMATOLOGY INVESTIGATIONS

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

ABO Type

AB

Rh Type

POSITIVE

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

Dr. Shreya Shah

M.D. (Pathologist)

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LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED Sex/Age : Male / 37 Years Case ID : 40202200262
 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340164
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:06 Sample Type : Spot Urine Mobile No :
 Sample Date and Time : 10-Feb-2024 09:06 Sample Coll. By : Ref Id1 : OSP33241
 Report Date and Time : 10-Feb-2024 09:45 Acc. Remarks : Normal Ref Id2 : O23249970

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	>1.025		1.005 - 1.030	
pH	5.50		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	/µL	Nil	
Yeast	Nil	/µL	Nil	
Cast	Nil	/LPF	Nil	
Crystals	Nil	/HPF	Nil	

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



Dr. Shreya Shah
 M.D. (Pathologist)

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LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED
 Ref.By : HOSPITAL
 Bill. Loc. : Aashka hospital

Sex/Age : Male / 37 Years
 Dis. At :

Case ID : 40202200262
 Pt. ID : 3340164
 Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:06 Sample Type : Spot Urine

Mobile No :

Sample Date and Time : 10-Feb-2024 09:06 Sample Coll. By :

Ref Id1 : OSP33241

Report Date and Time : 10-Feb-2024 09:45 Acc. Remarks : Normal

Ref Id2 : O23249970

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



Dr. Shreya Shah
 M.D. (Pathologist)

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LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED Sex/Age : Male / 37 Years Case ID : 40202200262
Ref.By : HOSPITAL Dis. At : Pt. ID : 3340164
Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 09:06 Sample Type : Plasma Fluoride F, Plasma Fluoride PP Mobile No :
Sample Date and Time : 10-Feb-2024 09:06 Sample Coll. By : Ref Id1 : OSP33241
Report Date and Time : 10-Feb-2024 13:35 Acc. Remarks : Normal Ref Id2 : O23249970
TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F H 127.60 mg/dL 70 - 100
Photometric,Hexokinase
Plasma Glucose - PP 97.94 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 glucoseer guidelines

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

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

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED Sex/Age : Male / 37 Years Case ID : 40202200262
 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340164
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 09:06 Sample Type : Serum Mobile No :
 Sample Date and Time : 10-Feb-2024 09:06 Sample Coll. By : Ref Id1 : OSP33241
 Report Date and Time : 10-Feb-2024 12:55 Acc. Remarks : Normal Ref Id2 : O23249970

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-POD</i>	H	205.38	mg/dL	110 - 200
HDL Cholesterol	L	35.5	mg/dL	48 - 77
Triglyceride <i>Glycerol Phosphate Oxidase</i>		126.80	mg/dL	<150
VLDL <i>Calculated</i>		25.36	mg/dL	10 - 40
Chol/HDL <i>Calculated</i>	H	5.79		0 - 4.1
LDL Cholesterol <i>Calculated</i>	H	144.52	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 160-199			

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL_c 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-Very Low, L-Low, H-High, HH-Very High ,A-Abnormal)



Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED

Sex/Age : Male / 37 Years

Case ID : 40202200262

Ref.By : HOSPITAL

Dis. At :

Pt. ID : 3340164

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:06

Sample Type : Serum

Mobile No :

Sample Date and Time : 10-Feb-2024 09:06

Sample Coll. By :

Ref Id1 : OSP33241

Report Date and Time : 10-Feb-2024 12:55

Acc. Remarks : Normal

Ref Id2 : O23249970

TEST

RESULTS

UNIT BIOLOGICAL REF RANGE

REMARKS

BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. UV with P5P	33.43	U/L	16 - 63
S.G.O.T. UV with P5P	25.79	U/L	15 - 37
Alkaline Phosphatase Enzymatic, PNPP-AMP	108.96	U/L	46 - 116
Gamma Glutamyl Transferase L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate	26.72	U/L	0 - 55
Proteins (Total) Colorimetric, Biuret	8.06	gm/dL	6.40 - 8.30
Albumin Bromocresol purple	4.58	gm/dL	3.4 - 5
Globulin Calculated	3.48	gm/dL	2 - 4.1
A/G Ratio Calculated	1.3		1.0 - 2.1
Bilirubin Total Photometry	0.92	mg/dL	0.3 - 1.2
Bilirubin Conjugated Diazotization reaction	0.34	mg/dL	0 - 0.50
Bilirubin Unconjugated Calculated	0.58	mg/dL	0 - 0.8

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



Dr. Shreya Shah

M.D. (Pathologist)

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Neuberg  **Supratech**

REFERENCE LABORATORIES



Neuberg Supratech Reference Laboratories Private Limited

📍 "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

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



LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED

Sex/Age : Male / 37 Years Case ID : 40202200262

Ref.By : HOSPITAL

Dis. At :

Pt. ID : 3340164

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:06

Sample Type : Serum

Mobile No :

Sample Date and Time : 10-Feb-2024 09:06

Sample Coll. By :

Ref Id1 : OSP33241

Report Date and Time : 10-Feb-2024 12:55

Acc. Remarks : Normal

Ref Id2 : O23249970

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <i>GLDH</i>	12.6	mg/dL	8.90 - 20.60	
Creatinine	1.19	mg/dL	0.50 - 1.50	
Uric Acid <i>Uricase</i>	7.02	mg/dL	3.5 - 7.2	

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 : JUNED ALLAUDIN JUNED

Sex/Age : Male / 37 Years Case ID : 40202200262

Ref.By : HOSPITAL

Dis. At :

Pt. ID : 3340164

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:06

Sample Type : Whole Blood EDTA

Mobile No :

Sample Date and Time : 10-Feb-2024 09:06

Sample Coll. By :

Ref Id1 : OSP33241

Report Date and Time : 10-Feb-2024 10:42

Acc. Remarks : Normal

Ref Id2 : O23249970

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Glycated Haemoglobin Estimation

HbA1C	H 6.60	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) Calculated	142.72	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 Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA. In such circumstances glyceemic control can be monitored using plasma glucose levels or serum Fructosamine. The A1c target should be individualized 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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M.D. (Pathologist)

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LABORATORY REPORT



Name : **JUNED ALLAUDIN JUNED** Sex/Age : **Male / 37 Years** Case ID : **40202200262**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3340164**
 Bill. Loc. : **Aashka hospital** Pt. Loc. :

Reg Date and Time : **10-Feb-2024 09:06** Sample Type : **Serum** Mobile No :
 Sample Date and Time : **10-Feb-2024 09:06** Sample Coll. By : Ref Id1 : **OSP33241**
 Report Date and Time : **10-Feb-2024 10:49** Acc. Remarks : **Normal** Ref Id2 : **O23249970**

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

Thyroid Function Test

Triiodothyronine (T3)	97.89	ng/dL	70 - 204	
Thyroxine (T4) <i>CMA</i>	5.72	ng/dL	4.87 - 11.72	
TSH <i>CMA</i>	1.36	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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 M.D. (Pathologist)

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LABORATORY REPORT



Name : JUNED ALLAUDIN JUNED Sex/Age : Male / 37 Years Case ID : 40202200262
 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340164
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 09:06 Sample Type : Serum Mobile No :
 Sample Date and Time : 10-Feb-2024 09:06 Sample Coll. By : Ref Id1 : OSP33241
 Report Date and Time : 10-Feb-2024 10:49 Acc. Remarks : Normal Ref Id2 : O23249970

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
 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 Hypertyroidism	↑	↑	↑
Grave's 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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10.02.2024 11:03:02 AM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

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

Room:

80 bpm
--/-- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 78 ms
QT / QTcBaz : 368 / 424 ms
PR : 148 ms
P : 92 ms
RR / PP : 744 / 750 ms
P / QRS / T : 64 / 0 / -1 degrees

Normal sinus rhythm
Normal ECG

