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...Your wellness partner

011-41195959

Hi **Manipal Hospital,**

The following booking has been confirmed. It is requested to honor the said booking & provide priority services to our client

Hospital Package Name : Mediwheel Full Body Health Checkup Female Above 40
Patient Package Name : Mediwheel Full Body Health Checkup Female Above 40
Hospital Address : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment
Contact Details : 8750104424
Appointment Date : 13-04-2024
Confirmation Status : Booking Confirmed
Preferred Time : 8:00am

Member Information		
Booked Member Name	Age	Gender
PREETI	43 year	Female

We request you to facilitate the employee on priority.

Thanks,
Mediwheel Team
Please Download Mediwheel App



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UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता: W/O अनिल कुमार जोशी,
जी-६६१ जी ब्लॉक, गोविन्दपुरम स.ओ,
गाज़ियाबाद, उत्तर प्रदेश, 201013

Address: W/O Anil Kumar Joshi,
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Bengaluru-560 001



भारत सरकार
GOVERNMENT OF INDIA



प्रीति जोशी
Preeti Joshi

जन्म वर्ष / Year of Birth : 1980
महिला / Female



8926 2297 9103

आधार — आम आदमी का अधिकार

Preeti



OUTPATIENT RECORD

Hospital No: MH013287122	Visit No: H18000002104	
Name: MRS PREETI JOSHI	Age/Sex: 43 Yrs/Female	
Doctor Name: HEALTH CHECK MGD	Specialty: HC SERVICE MGD	
Date: 13/04/2024 08:47AM		
BP Systolic: 99 mmHg	BP Diastolic: 66 mmHg	Pulse Rate: 76beats per minute
Saturation(Oxygen): 98%	Height: 155cm	Weight : 55.8kg
BMI: 23.23	Pain Score: 00	Fall Risk: 01
Vulnerable: 01		

OPD Notes :

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

EXAMINATION DETAILS	RIGHT EYE	LEFT EYE
VISION	6/6	6/6
CONJ	NORMAL	NORMAL
CORNEA	CLEAR	CLEAR
LENS	CLEAR	CLEAR
OCULAR MOVEMENTS	FULL	FULL
NCT	18	18
FUNDUS EXAMINATION		
OPTIC DISC	C:D 0.3	C:D 0.3
MACULAR AREA	FOVEAL REFLEX PRESENT	FOVEAL REFLEX PRESENT

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

HEALTH CHECK MGD



LABORATORY REPORT

Name : MRS PREETI JOSHI
Registration No : MH013287122
Patient Episode : H18000002104
Referred By : HEALTH CHECK MGD
Receiving Date : 13 Apr 2024 08:57

Age : 43 Yr(s) Sex :Female
Lab No : 202404002042
Collection Date : 13 Apr 2024 08:57
Reporting Date : 13 Apr 2024 10:43

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
THYROID PROFILE, Serum			Specimen Type : Serum
T3 - Triiodothyronine (ELFA)	1.040	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	6.000	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	4.880	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 PREETI JOSHI
Registration No : MH013287122
Patient Episode : H18000002104
Referred By : HEALTH CHECK MGD
Receiving Date : 13 Apr 2024 08:57

Age : 43 Yr(s) Sex :Female
Lab No : 202404002042
Collection Date : 13 Apr 2024 08:57
Reporting Date : 13 Apr 2024 12:26

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDEANCE)	4.04	millions/cumm	[3.80-4.80]
HEMOGLOBIN	11.6 #	g/dl	[12.0-15.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	36.7	%	[36.0-46.0]
MCV (DERIVED)	90.8	fL	[83.0-101.0]
MCH (CALCULATED)	28.7	pg	[25.0-32.0]
MCHC (CALCULATED)	31.6	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	14.1 #	%	[11.6-14.0]
Platelet count	208	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	12.80	fL	
WBC COUNT (TC) (IMPEDEANCE)	5.30	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	51.0	%	[40.0-80.0]
Lymphocytes	31.0	%	[20.0-40.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	11.0 #	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
ESR	24.0 #	mm/1sthour	[0.0-



LABORATORY REPORT

Name	: MRS PREETI JOSHI	Age	: 43 Yr(s) Sex :Female
Registration No	: MH013287122	Lab No	: 202404002042
Patient Episode	: H18000002104	Collection Date	: 13 Apr 2024 09:51
Referred By	: HEALTH CHECK MGD	Reporting Date	: 13 Apr 2024 10:45
Receiving Date	: 13 Apr 2024 09:51		

CLINICAL PATHOLOGY

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)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	2-3/hpf	(0-5/hpf)
RBC	0-1/hpf	(0-2/hpf)
Epithelial Cells	NIL /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	



LABORATORY REPORT

Name : MRS PREETI JOSHI
Registration No : MH013287122
Patient Episode : H18000002104
Referred By : HEALTH CHECK MGD
Receiving Date : 13 Apr 2024 08:57

Age : 43 Yr(s) Sex :Female
Lab No : 202404002042
Collection Date : 13 Apr 2024 08:57
Reporting Date : 13 Apr 2024 13:11

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	5.3	%	[0.0-5.6]
Method: HPLC			
As per American Diabetes Association (ADA) HbA1c in % Non diabetic adults >= 18years <5.7 Prediabetes (At Risk) 5.7-6.4 Diagnosing Diabetes >= 6.5			
Estimated Average Glucose (eAG)	105	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.

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	145	mg/dl	[<200]
Method:Oxidase,esterase, peroxide			Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	68	mg/dl	[<150]
			Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	59	mg/dl	[35-65]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	14	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	72.0	mg/dl	[<120.0]
			Near/ Borderline High:130-159 High Risk:160-189

Above optimal-100-129



LABORATORY REPORT

Name : MRS PREETI JOSHI
Registration No : MH013287122
Patient Episode : H18000002104
Referred By : HEALTH CHECK MGD
Receiving Date : 13 Apr 2024 08:57

Age : 43 Yr(s) Sex :Female
Lab No : 202404002042
Collection Date : 13 Apr 2024 08:57
Reporting Date : 13 Apr 2024 10:31

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio (Calculated)	2.5		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio (Calculated)	1.2		<3 Optimal 3-4 Borderline >6 High Risk

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	15.2	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	7.1 #	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	0.60 #	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization			
URIC ACID	3.4 #	mg/dl	[4.0-8.5]
Method:uricase PAP			
SODIUM, SERUM	138.40	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.53	mmol/L	[3.60-5.10]
SERUM CHLORIDE	108.2	mmol/L	[101.0-111.0]
Method: ISE Indirect			



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Receiving Date : 13 Apr 2024 08:57

Age : 43 Yr(s) Sex :Female
Lab No : 202404002042
Collection Date : 13 Apr 2024 08:57
Reporting Date : 13 Apr 2024 10:31

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
eGFR (calculated)	112.0	ml/min/1.73sq.m	[>60.0]
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.			
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL	1.22 #	mg/dl	[0.30-1.20]
Method: D P D			
BILIRUBIN - DIRECT	0.21	mg/dl	[0.00-0.30]
Method: DPD			
INDIRECT BILIRUBIN (SERUM)	1.01 #	mg/dl	[0.10-0.90]
Method: Calculation			
TOTAL PROTEINS (SERUM)	7.10	gm/dl	[6.60-8.70]
Method: BIURET			
ALBUMIN (SERUM)	4.06	g/dl	[3.50-5.20]
Method: BCG			
GLOBULINS (SERUM)	3.00	gm/dl	[1.80-3.40]
Method: Calculation			
PROTEIN SERUM (A-G) RATIO	1.34		[1.00-2.50]
Method: Calculation			
AST (SGOT) (SERUM)	20.00	U/L	[0.00-40.00]
Method: IFCC W/O P5P			



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Age : 43 Yr(s) Sex :Female
Lab No : 202404002042
Collection Date : 13 Apr 2024 08:57
Reporting Date : 13 Apr 2024 10:31

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	10.00 #		U/L [14.00-54.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	36.0		IU/L [32.0-91.0]
GGT	12.0		U/L [7.0-50.0]

Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

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

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : MRS PREETI JOSHI
Registration No : MH013287122
Patient Episode : H18000002104
Referred By : HEALTH CHECK MGD
Receiving Date : 13 Apr 2024 08:57

Age : 43 Yr(s) Sex :Female
Lab No : 202404002043
Collection Date : 13 Apr 2024 08:57
Reporting Date : 13 Apr 2024 10:32

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	92.0	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. Alka Dixit Vats
Consultant Pathologist

**RADIOLOGY REPORT**

NAME	MRS , PREETI JOSHI	STUDY DATE	13/04/2024 9:33AM
AGE / SEX	43 y / F	HOSPITAL NO.	MH013287122
ACCESSION NO.	R7229702	MODALITY	US
REPORTED ON	13/04/2024 10:40AM	REFERRED BY	HEALTH CHECK MGD

**USG ABDOMEN & PELVIS
FINDINGS**

LIVER: Liver is normal in size (measures 139 mm), shape and echotexture. Rest normal.

SPLEEN: Spleen is normal in size (measures 69 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 8 mm.

COMMON BILE DUCT: Appears normal in size and measures 3 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 32 mm.

Left Kidney: measures 101 x 44 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

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

UTERUS: Uterus is anteverted, normal in size (measures 64 x 59 x 37 mm), shape and echotexture.

Endometrial thickness measures 8mm. Cervix appears normal.

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

Right ovary measures 33 x 33 x 17 mm with volume 9.7 cc.

Left ovary measures 33 x 30 x 19 mm with volume 10.1 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 , PREETI JOSHI	STUDY DATE	13/04/2024 9:25AM
AGE / SEX	43 y / F	HOSPITAL NO.	MH013287122
ACCESSION NO.	R7229700	MODALITY	CR
REPORTED ON	13/04/2024 9:30AM	REFERRED BY	HEALTH CHECK MGD

XR- CHEST PA VIEW**FINDINGS:**

LUNGS: Normal.
TRACHEA: Normal.
CARINA: Normal.
RIGHT AND LEFT MAIN BRONCHI: Normal.
PLEURA: Normal.
HEART: Normal.
RIGHT HEART BORDER: Normal.
LEFT HEART BORDER: Normal.
PULMONARY BAY: Normal.
PULMONARY HILA: Normal.
AORTA: Normal.
THORACIC SPINE: Normal.
OTHER VISUALIZED BONES: Normal.
VISUALIZED SOFT TISSUES: Normal.
DIAPHRAGM: Normal.
VISUALIZED ABDOMEN: Normal.
VISUALIZED NECK: Normal.

IMPRESSION:

-No significant abnormality seen.

Please correlate clinically

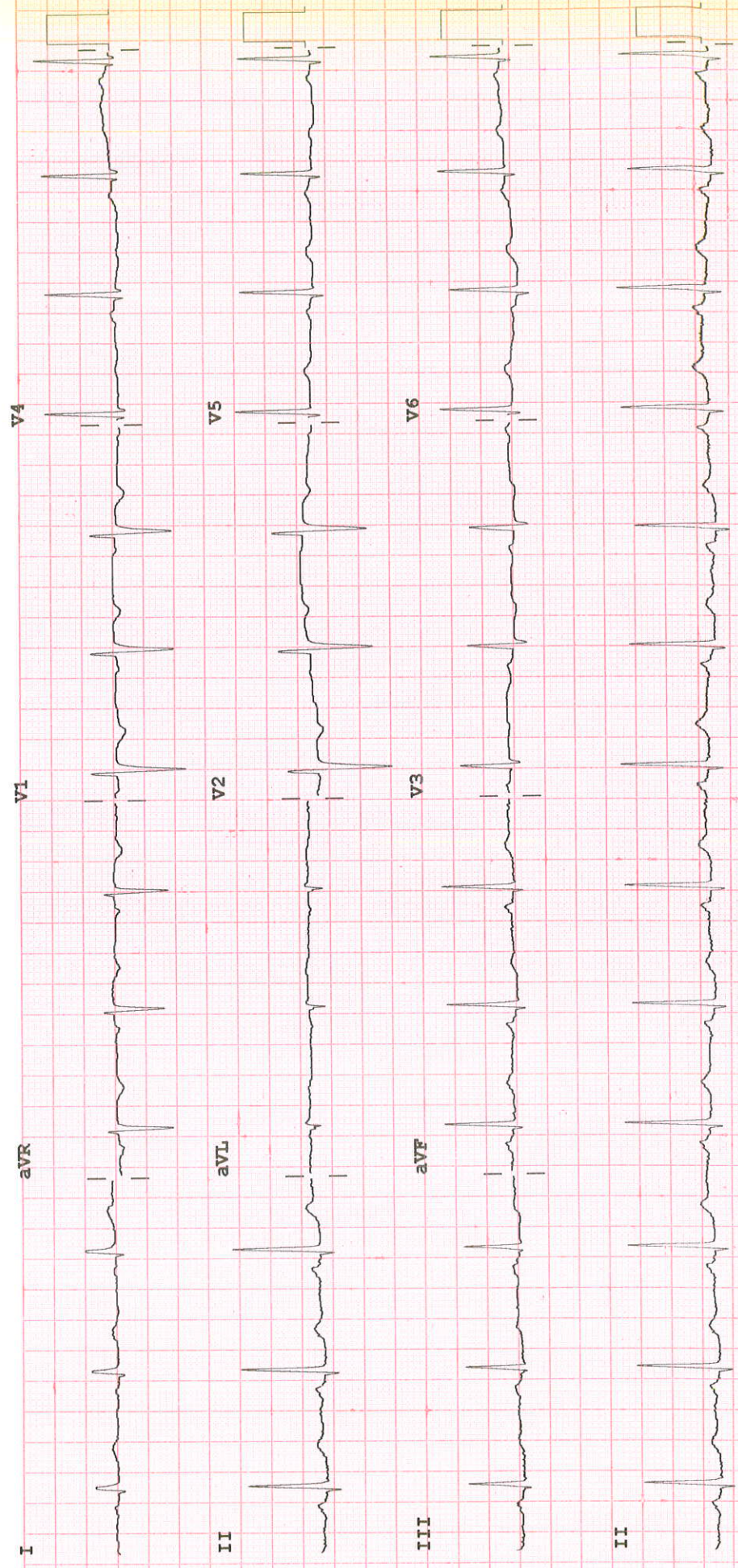


Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS
CONSULTANT RADIOLOGIST

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

Unconfirmed Diagnosis

- BORDERLINE ECG -



F 60~ 0.15-100 Hz

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

PH100B CL P?

Dev: