



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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	HARESH GHANSHYAMDAS VASWANI
DATE OF BIRTH	05-11-1985
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	10-02-2024
BOOKING REFERENCE NO.	23M161347100087406S
SPOUSE DETAILS	
EMPLOYEE NAME	MS. VASWANI JYOTI HARESH
EMPLOYEE EC NO.	161347
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR B
EMPLOYEE PLACE OF WORK	GANDHINAGAR, VIDHAN SABHA
EMPLOYEE BIRTHDATE	29-06-1986

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 **03-02-2024** 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's spouse 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))





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 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	HARESH GHANSHYAMDAS VASWANI
जन्म की तारीख	05-11-1985
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	10-02-2024
बुकिंग संदर्भ सं.	23M161347100087406S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MS. VASWANI JYOTI HARESH
कर्मचारी की क.कू.संख्या	161347
कर्मचारी का पद	SINGLE WINDOW OPERATOR B
कर्मचारी के कार्य का स्थान	GANDHINAGAR, VIDHAN SABHA
कर्मचारी के जन्म की तारीख	29-06-1986

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 03-02-2024 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 पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोच्च 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।)



**Health Check up Booking Confirmed Request(bobS7566),Package Code-PKG10000474,
Beneficiary Code-299544**

message

Sat, 3 Feb, 2024 at 3:12 pm

mediwheel <wellness@mediwheel.in>
o: jst290187@gmail.com
c: customercare@mediwheel.in



Mediwheel
....Your wellness partner

011-41195959

Dear **Jyoti vaswani**,

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 03-02-2024
Hospital Package Name : Mediwheel Full Body Health Checkup Male Below 40
Patient Package Name : Mediwheel Full Body Health Checkup Male Below 40
Name of Diagnostic/Hospital : Aashka Multispeciality Hospital
Address of Diagnostic/Hospital- : Between Sargassan & Reliance Cross Road, Gandhinagar -0382421
City : Gandhi Nagar
State :
Pincode : 382421
Appointment Date : 10-02-2024
Confirmation Status : Booking Confirmed
Preferred Time : 8:30am
Booking Status : Booking Confirmed

Member Information	
Booked Member Name	Age
Haresh vaswani	38 year
	Gender
	Male

Note - Please note to not pay any amount .

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.
In case of further assistance, Please reach out to Team Mediwheel.



बैंक ऑफ बरोडा
Bank of Baroda

नाम
Name ज्योति हरीश वासवानी
JYOTI HARESH VASWANI

कर्मचारी कोड नं.
Employee Code No. 161347



जारीकर्ता प्राधिकारी
Issuing Authority

हस्ताक्षर
Signature of Holder

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

 **aashka**
H O S P I T A L



Hareesh bhai

10-02-24

routine checkup.

S/L BE - WNL

ADV

Subtotal 1BE
u time

R/A Gnanesh

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
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DR. SEJAL J AMIN
B.D.S, M.D.S (PERIODONTIST)
IMPLANTOLOGIST
REG NO: A-12942

UHID:	OSP33249	Date:	10/2/24	Time:	
Patient Name:	Hareesh bheer	Age /Sex:	39/M	Height:	
		Weight:			
Chief Complain:					
History:	Routine checked check ups				
Allergy History:					
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:					
Extra oral :					
Intra oral – Teeth Present :	Stain +				
Teeth Absent :	Abscess ++				
Diagnosis:					

Rx						
No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration
0		chlorhexidine mouthwash				
		C 2 times a day				

Other Advice: 

Follow-up:

Consultant's Sign: 

Aashka Hospitals Ltd.

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CIN: L85110GJ2012PLC072647



aashka
H O S P I T A L



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

05P 33244


UHID: 623249973	Date: 10/02/24	Time:
Patient Name: Prerak Trivedi	Age / Sex: 39 years / M	Height: 166
LMP:		Weight: 98.3
History:	History: KIDNEY STONE MPT (ST)	
C/O:	Allergy History: — Addiction: —	
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Vitals & Examination:		
Temperature: Normal		
Pulse: 88/hr		
BP: 120/82		
SPO2: 98%		
Provisional Diagnosis:		

Advice:

cont. Anti-H.N. Meds

Rx

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

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

10.02.2024 10:38:42 AM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

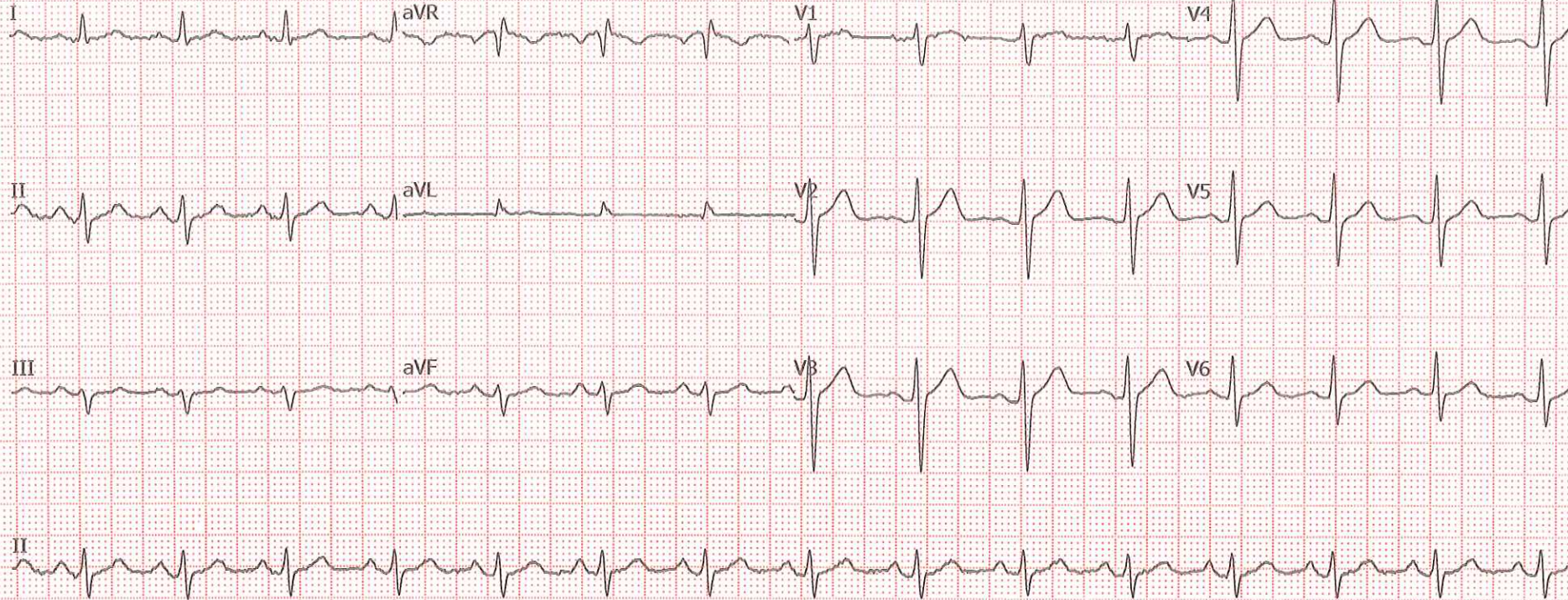
Location: I
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

90 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS :	88 ms	Normal sinus rhythm
QT / QTcBaz :	362 / 442 ms	Normal ECG
PR :	166 ms	
P :	110 ms	
RR / PP :	664 / 666 ms	
P / QRS / T :	65 / -4 / 54 degrees	





LABORATORY REPORT

Name : HARESH GHANSHYAMDAS VASWANI **Sex/Age :** Male / 39 Years **Case ID :** 40202200264
Ref.By : HOSPITAL **Dis. At :** **Pt. ID :** 3340200
Bill. Loc. : Aashka hospital **Pt. Loc. :** **Mobile No. :** **Ref Id1 :** OSP33244
Reg Date and Time : 10-Feb-2024 09:13 **Sample Type :** **Ref Id2 :** O23249973
Sample Date and Time : 10-Feb-2024 09:14 **Sample Coll. By :** **Acc. Remarks :** Normal
Report Date and Time : **Acc. Remarks :** Normal

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	111.06	mg/dL	70 - 100
Haemogram (CBC)			
Eosinophil	8.0	%	1.00 - 6.00
Eosinophil	648	/ μ L	20.00 - 500.00
Lipid Profile			
Cholesterol	204.98	mg/dL	110 - 200
HDL Cholesterol	32.7	mg/dL	48 - 77
Chol/HDL	6.27	0 - 4.1	0.00 - 100.00
LDL Cholesterol	146.03	mg/dL	0.00 - 100.00
Uric Acid	7.60	mg/dL	3.5 - 7.2

Abnormal Result(s) Summary End

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

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LABORATORY REPORT

Name : **HARESH GHANSHYAMDAS VASWANI** Sex/Age : **Male / 39 Years** Case ID : **40202200264**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3340200**
 Bill. Loc. : **Aashka hospital** Sample Type : **Whole Blood EDTA** Mobile No :
 Reg Date and Time : **10-Feb-2024 09:13** Sample Coll. By :
 Sample Date and Time : **10-Feb-2024 09:14** Acc. Remarks : **Normal** Ref Id1 : **OSP33244**
 Report Date and Time : **10-Feb-2024 09:59** Ref Id2 : **O23249973**

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES				
Haemoglobin	15.9	G%	13.00 - 17.00	
RBC (Electrical Impedance)	5.24	millions/cumm	4.50 - 5.50	
PCV(Calc)	48.52	%	40.00 - 50.00	
MCV (RBC histogram)	92.6	fL	83.00 - 101.00	
MCH (Calc)	30.5	pg	27.00 - 32.00	
MCHC (Calc)	32.9	gm/dL	31.50 - 34.50	
RDW (RBC histogram)	13.00	%	11.00 - 16.00	
TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)				
Total WBC Count	8100	/ μ L	4000.00 - 10000.00	
Neutrophil	[%] 58.0	%	40.00 - 70.00	[Abs] 4698 / μ L 2000.00 - 7000.00
Lymphocyte	26.0	%	20.00 - 40.00	2106 / μ L 1000.00 - 3000.00
Eosinophil	H 8.0	%	1.00 - 6.00	H 648 / μ L 20.00 - 500.00
Monocytes	8.0	%	2.00 - 10.00	648 / μ L 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0 / μ L 0.00 - 100.00

PLATELET COUNT (Optical)			
Platelet Count	351000	/ μ L	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	2.23		0.78 - 3.53

SMEAR STUDY
 RBC Morphology Normocytic Normochromic RBCs.
 WBC Morphology Eosinophilia
 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)





LABORATORY REPORT

Name : **HARESH GHANSHYAMDAS VASWANI** Sex/Age : **Male / 39 Years** Case ID : **40202200264**
Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3340200**
Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : **10-Feb-2024 09:13** Sample Type : **Whole Blood EDTA** Mobile No :
Sample Date and Time : **10-Feb-2024 09:14** Sample Coll. By : Ref Id1 : **OSP33244**
Report Date and Time : **10-Feb-2024 10:40** Acc. Remarks : **Normal** Ref Id2 : **O23249973**

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

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

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name : HARESH GHANSHYAMDAS VASWANI

Case ID : 40202200264

Sex/Age : Male / 39 Years

Pt. ID : 3340200

Ref.By : HOSPITAL

Dis. At :

Pt. Loc :

Bill. Loc. : Aashka hospital

Reg Date and Time : 10-Feb-2024 09:13

Sample Type : Whole Blood EDTA

Mobile No :

Sample Date and Time : 10-Feb-2024 09:14

Sample Coll. By :

Ref Id1 : OSP33244

Report Date and Time : 10-Feb-2024 09:33

Acc. Remarks : Normal

Ref Id2 : O23249973

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

TEST

RESULTS UNIT BIOLOGICAL REF RANGE

HAEMATOLOGY INVESTIGATIONS

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

ABO Type

B

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 : **HARESH GHANSHYAMDAS VASWANI** Sex/Age : **Male / 39 Years** Case ID : **40202200264**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3340200**
 Bill. Loc. : **Aashka hospital** Sample Type : **Spot Urine** Mobile No :
 Reg Date and Time : **10-Feb-2024 09:13** Sample Coll. By : Ref Id1 : **OSP33244**
 Sample Date and Time : **10-Feb-2024 09:14** Acc. Remarks : **Normal** Ref Id2 : **O23249973**
 Report Date and Time : **10-Feb-2024 11:06**

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

<u>Physical examination</u>				
Colour	Pale yellow			
Transparency	Clear			
<u>Chemical Examination By Sysmex UC-3500</u>				
Sp.Gravity	1.015		1.005 - 1.030	
pH	7.50		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	
<u>Flowcytometric Examination By Sysmex UF-5000</u>				
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:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)


Dr. Shreya Shah
 M.D. (Pathologist)

Printed On : 10-Feb-2024 14:37





LABORATORY REPORT

Name : **HARESH GHANSHYAMDAS VASWANI** Sex/Age : Male / 39 Years Case ID : 40202200264
 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340200
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 09:13 Sample Type : Spot Urine Mobile No :
 Sample Date and Time : 10-Feb-2024 09:14 Sample Coll. By : Ref Id1 : OSP33244
 Report Date and Time : 10-Feb-2024 11:06 Acc. Remarks : Normal Ref Id2 : O23249973

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/Notations						
			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 : **HARESH GHANSHYAMDAS VASWANI** Sex/Age : Male / 39 Years Case ID : 40202200264
 Ref.By : HOSPITAL Dis. At : Pt. ID : 3340200
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 09:13 Sample Type : Plasma Fluoride F, Plasma Mobile No :
 Fluoride PP Ref Id1 : OSP33244
 Sample Date and Time : 10-Feb-2024 09:14 Sample Coll. By : Ref Id2 : O23249973
 Report Date and Time : 10-Feb-2024 12:56 Acc. Remarks : Normal UNIT BIOLOGICAL REF RANGE REMARKS
 TEST RESULTS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F <i>Photometric, Hexokinase</i>	H	111.06	mg/dL	70 - 100
Plasma Glucose - PP		138.37	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:(LL-VeryLow, L-Low, H-High, HH-VeryHigh , A-Abnormal)

Dr. Shreya Shah
 M.D. (Pathologist)

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LABORATORY REPORT

Name : **HARESH GHANSHYAMDAS VASWANI** Sex/Age : **Male / 39 Years** Case ID : **40202200264**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3340200**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : **10-Feb-2024 09:13** Sample Type : **Serum** Mobile No :
 Sample Date and Time : **10-Feb-2024 09:14** Sample Coll. By : Ref Id1 : **OSP33244**
 Report Date and Time : **10-Feb-2024 13:32** Acc. Remarks : **Normal** Ref Id2 : **O23249973**

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-POD</i>	H	204.98	mg/dL	110 - 200
HDL Cholesterol	L	32.7	mg/dL	48 - 77
Triglyceride <i>Glycerol Phosphate Oxidase</i>		131.23	mg/dL	<150
VLDL <i>Calculated</i>		26.25	mg/dL	10 - 40
Cho/HDL <i>Calculated</i>	H	6.27		0 - 4.1
LDL Cholesterol <i>Calculated</i>	H	146.03	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 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 : **HARESH GHANSHYAMDAS VASWANI** Sex/Age : **Male / 39 Years** Case ID : **40202200264**
 Ref By : **HOSPITAL** Dis. At : Pt. ID : **3340200**
 Bill. Loc. : **Aashka hospital** Mobile No :
 Reg Date and Time : **10-Feb-2024 09:13** Sample Type : **Serum** Ref Id1 : **OSP33244**
 Sample Date and Time : **10-Feb-2024 09:14** Sample Coll. By : Ref Id2 : **O23249973**
 Report Date and Time : **10-Feb-2024 13:32** Acc. Remarks : **Normal**

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with Psp</i>	27.08	U/L	16 - 63
S.G.O.T. <i>UV with Psp</i>	20.98	U/L	15 - 37
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	106.9	U/L	46 - 116
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide</i> Substrate	38.89	U/L	0 - 55
Proteins (Total) <i>Colorimetric, Biuret</i>	7.69	gm/dL	6.40 - 8.30
Albumin <i>Bromocresol purple</i>	4.77	gm/dL	3.4 - 5
Globulin <i>Calculated</i>	2.92	gm/dL	2 - 4.1
A/G Ratio <i>Calculated</i>	1.6		1.0 - 2.1
Bilirubin Total	0.68	mg/dL	0.3 - 1.2
Bilirubin Conjugated <i>Diazotization reaction</i>	0.30	mg/dL	0 - 0.50
Bilirubin Unconjugated <i>Calculated</i>	0.38	mg/dL	0 - 0.8

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

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Reg Date and Time : **10-Feb-2024 09:13** Sample Type : **Serum** Mobile No :
Sample Date and Time : **10-Feb-2024 09:14** Sample Coll. By : Ref Id1 : **OSP33244**
Report Date and Time : **10-Feb-2024 13:32** Acc. Remarks : **Normal** Ref Id2 : **O23249973**

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) GLDH	12.9	mg/dL	8.90 - 20.60	
Creatinine	0.97	mg/dL	0.50 - 1.50	
Uric Acid Uricase	H 7.60	mg/dL	3.5 - 7.2	

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



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LABORATORY REPORT

Name : **HARESH GHANSHYAMDAS VASWANI** Sex/Age : **Male / 39 Years** Case ID : **40202200264**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3340200**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : **10-Feb-2024 09:13** Sample Type : **Whole Blood EDTA** Mobile No :
 Sample Date and Time : **10-Feb-2024 09:14** Sample Coll. By : Ref Id1 : **OSP33244**
 Report Date and Time : **10-Feb-2024 10:40** Acc. Remarks : **Normal** Ref Id2 : **O23249973**

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Glycated Haemoglobin Estimation

HbA1C	5.21	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	102.83	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 HbA1c. In such circumstances glycemic 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:(L-L-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)



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LABORATORY REPORT

Name : HARESH GHANSHYAMDAS VASWANI		Sex/Age : Male / 39 Years	Case ID : 40202200264
Ref.By : HOSPITAL		Dis. At :	Pt. ID : 3340200
Bill. Loc. : Aashka hospital			Pt. Loc. :
Reg Date and Time : 10-Feb-2024 09:13	Sample Type : Serum	Mobile No :	
Sample Date and Time : 10-Feb-2024 09:14	Sample Coll. By :	Ref Id1 : OSP33244	
Report Date and Time : 10-Feb-2024 11:11	Acc. Remarks : Normal	Ref Id2 : O23249973	

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Thyroid Function Test

Triiodothyronine (T3)	106.22	ng/dL	70 - 204	
Thyroxine (T4) <i>C/M/A</i>	6.36	ng/dL	4.87 - 11.72	
TSH <i>C/M/A</i>	2.43	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 concentrations (>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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LABORATORY REPORT

Name : HARESH GHANSHYAMDAS VASWANI **Sex/Age :** Male / 39 Years **Case ID :** 40202200264
Ref/By : HOSPITAL **Dis. At :** **Pt. ID :** 3340200
Bill. Loc. : Aashka hospital **Mobile No :** **Pt. Loc. :** **Ref Id1 :** OSP33244
Reg Date and Time : 10-Feb-2024 09:13 **Sample Type :** Serum **Ref Id2 :** O23249973
Sample Date and Time : 10-Feb-2024 09:14 **Sample Coll. By :** **Report Date and Time :** 10-Feb-2024 11:11 **Acc. Remarks :** Normal

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 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 to trimester in pregnancy. Reference range (microU/ml)
 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 Hypothyroidism	↑	↑	↓
Secondary Hypothyroidism	↑	↑	↑
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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AASHKA HOSPITAL . LTD.
SARGASAN
GANDHINAGAR

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: VASWANI, HARESH G
Patient ID: OSP33244
Height: 166 cm
Weight: 98.3 kg

DOB: 05.11.1985
Age: 38yrs
Gender: Male
Race: Indian

Study Date: 10.02.2024
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: DR.SANKET MATHUKIYA
Technician: --

Medications:

--

Medical History:

--

Reason for Exercise Test:

--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:19	0.00	0.00	71	130/86	
	STANDING	00:02	0.00	0.00	71		
	HYPERV.	00:01	0.00	0.00	71		
	WARM-UP	03:38	1.00	0.00	75		
EXERCISE	STAGE 1	03:00	1.70	10.00	107	140/86	
	STAGE 2	03:00	2.50	12.00	133	160/86	
	STAGE 3	02:03	3.40	14.00	169	170/90	
RECOVERY		04:10	0.00	0.00	94	140/86	

The patient exercised according to the BRUCE for 8:02 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 71 bpm rose to a maximal heart rate of 169 bpm. This value represents 92 % of the maximal, age-predicted heart rate. The resting blood pressure of 130/86 mmHg, rose to a maximum blood pressure of 170/90 mmHg. The exercise test was stopped due to Fatigue.

Interpretation

Summary: Resting ECG: normal.
Functional Capacity: above average (>20%).
HR Response to Exercise: appropriate.
BP Response to Exercise: normal resting BP - appropriate response.
Chest Pain: none.
Arrhythmias: none.
ST Changes: none.
Overall impression: Normal stress test.

Conclusions

STRESS TEST FOR INDUCIBLE ISCHAEMIA IS NEGATIVE

Physician

Technician

Aashka Hospitals Ltd.

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www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

**aashka**
H O S P I T A L



PATIENT NAME: HARESH GHANSHYAMDAS VASWANI

GENDER/AGE: Male / 38 Years

DATE: 10/02/24

DOCTOR:

OPDNO: OSP33244

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

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H O S P I T A L



PATIENT NAME: HARESH GHANSHYAMDAS VASWANI

GENDER/AGE: Male / 38 Years

DATE: 10/02/24

DOCTOR:

OPDNO: OSP33244

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 calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.2 x 4.0 cms in size.

Left kidney measures about 10.3 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 96 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.

Fecal loaded large bowel loops seen.

Normal sonographic appearance of GB; Pancreas, spleen, kidneys, bladder and prostate.


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