

प्रति,

समन्वयक,

MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

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 हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MR. DAVE YASH HARSHADKUMAR
क.कूसंख्या	177313
पदनाम	CUSTOMER SERVICE ASSOCIATE
कार्य का स्थान	AHMEDABAD,SARKHEJ
जन्म की तारीख	07-06-1990
स्वास्थ्य जांच की प्रस्तावित तारीख	28-09-2024
बुकिंग संदर्भ सं.	24S177313100115104E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रित के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 24-09-2024 से 31-03-2025 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 इनवाइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय.

हस्ता/-(मुख्य महाप्रबंधक) मा.सं.प्र. एवं विपणन

बैंक ऑफ़ बड़ौदा

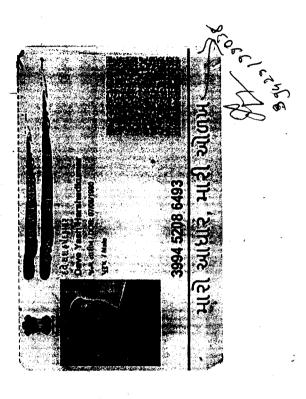
(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.) से संपर्क करें।)





## List of tests & consultations to be covered as part of Annual Health Check-up

S.No.	For Male	For Female					
1	CBC	CBC					
2	ESR	ESR					
3	Blood Group & RH Factor	Blood Group & RH Factor					
4	Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting					
5	Blood and Urine Sugar PP	Blood and Urine Sugar PP					
6	Stool Routine Stool Routine						
	Lipid Profile	Lipid Profile					
7	Total Cholesterol	Total Cholesterol					
8	HDL	HDL					
9	LDL	LDL					
10	VLDL	VLDL					
11	Triglycerides	Triglycerides					
12	HDL/ LDL ratio	HDL/ LDL ratio					
	· Liver Profile	Liver Profile					
13	AST	AST					
14	ALT	ALT					
15	GGT	GGT					
16	Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)					
17	ALP	ALP					
18	Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)					
	Kidney Profile	Kidney Profile					
19	Serum Creatinine	Serum Creatinine					
20	Blood Urea Nitrogen	Blood Urea Nitrogen					
21	Uric Acid	Uric Acid					
22	HBA1C	HBA1C					
23	Routine Urine Analysis	Routine Urine Analysis					
24	USG Whole Abdomen	USG Whole Abdomen					
	General Tests	General Tests					
25	X Ray Chest	X Ray Chest					
26	ECG	ECG					
27	2D/3D ECHO / TMT	2D/3D ECHO / TMT					
28	Stress Test	Gynaec Consultation					
29	PSA Male (above 40 years)	Pap Smear (above 30 years) & Mammography (above 40 years)					
30	Thyroid Profile (T3, T4, TSH)	Thyroid Profile (T3, T4, TSH)					
31	Dental Check-up Consultation	Dental Check-up Consultation					
32	Physician Consultation	Physician Consultation					
33	Eye Check-up Consultation	Eye Check-up Consultation					
34	Skin/ENT Consultation	Skin/ENT Consultation					



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erfußiges. Emplayes Code No. 177313

g4291379038



			LABORATORY REPORT			
Name	:	Mr. Yash H Dave		Reg. No	:	409101389
Sex/Age	:	Male/34 Years		Reg. Date	:	28-Sep-2024 09:06 AM
Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	28-Sep-2024 03:33 PM

# **Medical Summary**

## **GENERAL EXAMINATION**

Height (cms): 169

Weight (kgs): 71.50

Blood Pressure: 110/70mmHg

Pulse: 79/Min

No Clubbing/Cynosis/Pallor/Pedel Oedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy – N/A

This is an electronically authenticated report

Dr. Parth S Patel

DR.MUKESH LADDHA

MBBS. MD. FNB

Note: Bring this document in next visit. Prescription is valid for 1 Month or as per advise.

Page 14 of

**CUROVIS HEALTHCARE PVT. LTD.** 







Reg. No : 409101389 Ref Id Name

: Mr. Yash H Dave

: 34 Years Age/Sex

Sample Type: EDTA

Ref. By

/ Male Pass. No. :

Collected On : 28-Sep-2024 09:11 AM

Reg. Date

: 28-Sep-2024 09:06 AM

Tele No. : 9429199038

: CHPL

Dispatch At

Location

Sample Type , LDTA				Location		III E
Parameter	Results		Unit	Biological	Ref. Inte	erval
	CON	<u>/PLETI</u>	E BLOOD COUNT (CB	<u>C)</u>		
Hemoglobin (Colorimetric method)	13.9		g/dL	13.5 - 18		
Hematrocrit (Calculated)	41.10		%	40 - 50		
RBC Count (Electrical Impedance)	4.75		million/cmm	4.73 - 5.5		
MCV (Calculated)	86.6		fL	83 - 101		
MCH (Calculated)	29.4		Pg	27 - 32		
MCHC (Calculated)	33.9		%	31.5 - 34.5		
RDW (Calculated)	L 11.2		%	11.5 - 14.5		
WBC Count Flowcytometry with manual Microscopy	5600		/cmm	4000 - 1000	00	
MPV (Calculated)	10.1		fL.	6.5 - 11.5		
DIFFERENTIAL WBC COUNT	[%]		EXPECTED VALUES	[Abs]		EXPECTED VALUES
Neutrophils (%)	45	%	40 - 80	2520	/cmm	2000 - 7000
Lymphocytes (%)	40	%	20 - 40	2240	/cmm	1000 - 3000
Eosinophils (%)	05	%	0 - 6	560	/cmm	200 - 1000
Monocytes (%)	10	%	2 - 10	280	/cmm	20 - 500
Basophils (%)	0	%	0 - 2	0	/cmm	0 - 100
PERIPHERAL SMEAR STUDY						
RBC Morphology	Normocy	tic and I	Normochromic.			
WBC Morphology	Normal					
PLATELET COUNTS						
Platelet Count (Electrical Impedance)	242000		/cmm	150000 - 4	50000	
Electrical Impedance						
Platelets	Platelets	are ade	quate with normal morpho	ology.		
Parasites	Malarial <sub>I</sub>	parasite	is not detected.			
Comment	-					

We/Laboratory hereby declare that we may require to place some information in the public domain/available publicly because of regulatory/statutory requirements.

This is an electronically authenticated report.

\* This test has been out sourced.

Approved By:

Dr. Purvish Darji

MD (Pathology)

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CUROVIS HEALTHCARE PVT. LTD.







Reg. No

: 409101389

Ref Id

Collected On

: 28-Sep-2024 09:11 AM

Name

: Mr. Yash H Dave

Reg. Date

: 28-Sep-2024 09:06 AM

Age/Sex

: 34 Years

Pass. No.

Tele No.

: 9429199038

**Parameter** 

/ Male

Ref. By

Dispatch At Location

: CHPL

Sample Type: EDTA

Result

Unit

Biological Ref. Interval

### **HEMATOLOGY**

#### **BLOOD GROUP & RH**

Specimen: EDTA and Serum; Method: Forward Reverse Tube Agglutination

ABO

"O"

Tube Agglutination (Forward & Reverse grouping) Method

**Positive** 

Tube Agglutination (Forward & Reverse grouping) Method

Note

### **ERYTHROCYTE SEDIMANTATION RATE [ESR]**

ESR 1 hour

Westergreen method

5

mm/hr

ESR AT 1 hour: 1-7

### ERYTHRO SEDIMENTION RATE, BLOOD -

Erythrocyte sedimentation rate (ESR) is a non - specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants. The ESR is increased in prenancy from about the 3rd month and returns to normal by the 4th week post partum. ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives). It is especially low (o-1mm) in polycythaemia, hypofibrinogenemia or or congestive cardiac failure and when there are abnormalities or the red cells such as poikilocytosis, spherocytosis or sickle cells.

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Approved By:

Dr. Purvish Darji

MD (Pathology)

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CUROVIS HEALTHCARE PVT. LTD.

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info@curovis.co.in ⊕ www.curovis.co.in

□







Reg. No

: 409101389

Ref Id

/ Male

Collected On

: 28-Sep-2024 09:11 AM

Name

: Mr. Yash H Dave

Reg. Date

: 28-Sep-2024 09:06 AM

Biological Ref. Interval

Age/Sex

: 34 Years

Pass. No.

Tele No.

: 9429199038

Ref. By

Dispatch At

Sample Type : Flouride F

Location

: CHPL

**Parameter** 

Result

**BIO - CHEMISTRY** 

Fasting Blood Sugar (FBS)
GOD-POD Method

107.50

mg/dL

Unit

70 - 110

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**C** 079 40308700







Reg. No

: 409101389

Ref Id

Collected On : 28-Sep-2024 09:11 AM

Name

: Mr. Yash H Dave

Reg. Date

: 28-Sep-2024 09:06 AM

Age/Sex

: 9429199038

: 34 Years

Pass. No. : / Male

Tele No.

Ref. By

Dispatch At

Sample Type : Serum		Location	: CHPL
Parameter	Result	Unit	Biological Ref. Interval
	<u>Lipid Profile</u>		
Cholesterol	230.00	mg/dL	Desirable: <200.0 Borderline High: 200- 239 High: >240.0
Cholesterol Oxidase, esterase, peroxidase			-
Triglyceride	119.60	mg/dL	Normal: <150.0 Borderline: 150-199 High: 200-499 Very High : > 500.0
Glycerol-3-Phosphate Oxidase Peroxidase			, ,
HDL Cholesterol	55.70	mg/dL	Low : <40 High : >60
4-Aminoantipyrine-CHE-Cholesterol Oxidase-POD			J
LDL	150.38	mg/dL	Optimal: < 100.0 Near Optimal: 100-129 Borderline High: 130- 159 High : 160-189 Very High : >190.0
Calculated			
VLDL Calculated	23.92	mg/dL	15 - 35
LDL / HDL RATIO Calculated	2.70		0 - 3.5
Cholesterol /HDL Ratio Calculated	4.13		0 - 5.0

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MD (Pathology)

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Reg. No

: 409101389

Ref Id

Collected On : 28-Sep-2024 09:11 AM

Name

: Mr. Yash H Dave

Reg. Date

: 28-Sep-2024 09:06 AM

Age/Sex

: 34 Years / Male

Pass. No. :

Tele No.

: 9429199038

Ref. By

Dispatch At

Sample Type : Serum		Location	: CHPL
Parameter	Result	Unit	Biological Ref. Interval
	LFT WITH GGT		
Total Protein	7.31	gm/dL	1Day: 3.4-5.0 1Day to 1Month: 4.6-6.8 2 to 12Months: 4.8-7.6 >=1Year: 6.0-8.0 Adults: 6.6-8.7
Biuret Reaction			
Albumin	5.38	g/dL	0 - 4 days: 2.8 - 4.4 4 days - 14 yrs: 3.8 - 5.4 14 - 19 yrs: 3.2 - 4.5 20 - 60 yrs : 3.5 - 5.2 60 - 90 yrs : 3.2 - 4.6 > 90 yrs: 2.9 - 4.5
Bromocresol Green			
Globulin (Calculated)  Calculated	1.93	g/dL	2.3 - 3.5
A/G Ratio (Calulated)	2.79		0.8 - 2.0
SGOT	33.20	U/L	0 - 35
L-Aspartate a - Ketoglutarate			
SGPT Pyruvate to Lactate - IFCC	30.30	U/L	0 - 45
Alakaline Phosphatase 4-Nitrophenol phosphate (AMP)	119.2	IU/I	53 - 128

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CUROVIS HEALTHCARE PVT. LTD.







	TEST REPORT		
Reg. No : 409101389 Ref Id	:	Collected On	: 28-Sep-2024 09:11 AM
Name : Mr. Yash H Dave		Reg. Date	: 28-Sep-2024 09:06 AM
Age/Sex : 34 Years / Male	Pass. No. :	Tele No.	: 9429199038
Ref. By		Dispatch At	:
Sample Type : Serum		Location	: CHPL
Total Bilirubin	0.71	mg/dL	Cord: Premature & full term: <2.0 0-1 day: Premature: <8.0 0-1 day: Full term: 1.4 - 8.7 1-2 day: Premature: <12 1-2 day: Full term: 3.4 - 11.5 3-5 day: Premature: <16 3-5 day: Full term: 1.5 - 12.0 Adult: 0.3 - 1.2
Vanadate Oxidation			
Direct Bilirubin Vanadate	0.20	mg/dL	0.0 - 0.4
Indirect Bilirubin  Calculated	0.51	mg/dL	0.0 - 1.1
GGT Y-Glutamyltransferase - IFCC	15.30	U/L	< 55

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MD (Pathology)

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**CUROVIS HEALTHCARE PVT. LTD.** 







Reg. No

: 409101389

Ref Id

Collected On : 28-Sep-2024 09:11 AM

Name

Reg. Date

: 28-Sep-2024 09:06 AM

Age/Sex

: 34 Years

Pass. No. :

Tele No.

: 9429199038

Ref. By

/ Male

: Mr. Yash H Dave

Dispatch At

Sample Type : Serum		Location	: CHPL
Parameter	Result	Unit	Biological Ref. Interval
	BIO - CHEMISTRY		
Uric Acid Uricase - Peroxidase	6.97	mg/dL	3.5 - 7.2
<b>Creatinine</b> Sarcosine Oxidase peroxidase	0.70	mg/dL	0.7 - 1.3
BUN Urease - UV Method	7.20	mg/dL	6.0 - 20.0

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Reg. No

: 409101389

Ref Id

Collected On : 28-Sep-2024 09:11 AM

Name

: Mr. Yash H Dave

Reg. Date

: 28-Sep-2024 09:06 AM

Age/Sex

: 34 Years

/ Male Pass. No. Tele No.

: 9429199038

Ref. By

Dispatch At

Sample Type : EDTA

Location

: CHPL

**Parameter** 

Unit

Biological Ref. Interval

### **HEMOGLOBIN A1 C ESTIMATION Specimen: Blood EDTA**

Result

\*Hb A1C

5.1

% of Total Hb Normal: < 5.7 %

Pre-Diabetes: 5.7 % -

6.4 %

Diabetes: 6.5 % or

higher

Boronate Affinity with Fluorescent Quenching

Mean Blood Glucose

99.67

mg/dL

Calculated

### <u>Degree of Glucose Control Normal Range:</u>

Poor Control >7.0% \*

Good Control 6.0 - 7.0 %\*\*Non-diabetic level < 6.0 %

\* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

\* Some danger of hypoglycemic reaction in Type I diabetics.

\* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area. **EXPLANATION:-**

\*Total haemoglobin A1 c is continuously synthesised in the red blood cell throught its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.

- \*The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- \*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurnment which eflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

\*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

**HbA1c assay Interferences:** 

\*Errneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

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# CUROVIS HEALTHCARE PVT. LTD.







Reg. No : 409101389 Ref Id

Name : Mr. Yash H Dave

Age/Sex : 34 Years / Male

Ref. By

Sample Type: Urine Spot

**TEST REPORT** 

Collected On : 28-Sep-2024 09:11 AM

Reg. Date

: 28-Sep-2024 09:06 AM

Tele No.

Unit

: 9429199038

Dispatch At

Location

: CHPL

Biological Ref. Interval

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity

20 cc

Pass. No.

Result

Colour

Test

Pale Yellow

Clarity

Glucose

Bilirubin

Nitrite

Blood

Ketone Bodies

Urobilinogen

Clear

Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

рН

7

1.010

4.6 - 8.0

Nil

Nil

Nil

Nil

Nil

Nil

Nil

1.001 - 1.035

Sp. Gravity Protein

Nil

Nil

Nil

Nil

Nil

Nil

Nil

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)

**Epithelial Cells** 

Amorphous Material

Crystals

Casts

Erythrocytes (Red Cells)

Nil

Occasional

Occasional/hpf

Absent

Absent

Absent

Absent

Nil

Nil

Nil

Absent

Absent

Absent

Absent

Remarks

Bacteria

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Reg. No : 409101389 Ref Id

Collected On

Name : Mr. Yash H Dave

Reg. Date : 28-Sep-2024 09:06 AM

Age/Sex : 34 Years / Male Tele No. : 9429199038

Ref. By

Dispatch At

Sample Type: Serum Location : CHPL

Pass. No.

Parameter Result Unit Biological Ref. Interval

#### **IMMUNOLOGY**

#### **THYROID FUNCTION TEST**

T3 (Triiodothyronine) CLIA-Sandwich Immunoassay

1.11

ng/mL

0.86 - 1.92

: 28-Sep-2024 09:11 AM

Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus.

In the circulation, 99.7% of T3 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.

In hypothyroidism and hyperthyroidism, F T3 (free T3) levels parallel changes in total T3 levels. Measuring F T3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

T4 (Thyroxine)

CLIA-Sandwich Immunoassay

9.30

µg/dL

3.2 - 12.6

Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus. In the circulation, 99.95% of T4 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to triiodothyronine (T3).

In hypothyroidism and hyperthyroidism, F T4 (free T4) levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

#### Limitations:

- 1. The anticonvulsant drug phenytoin may interfere with total and F T4 levels due to competition for TBG binding
- 2.F T4 values may be decreased in patients taking carbamazepine.

3. Thyroid autoantibodies in human serum may interfere and cause falsely elevated F T4 results.

We/Laboratory hereby declare that we may require to place some information in the public domain/available publicly because of regulatory/statutory requirements.

This is an electronically authenticated report.

\* This test has been out sourced.

Approved By:

Dr. Purvish Darji

MD (Pathology)

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CUROVIS HEALTHCARE PVT. LTD.





Reg. No

: 409101389

Ref Id

Collected On

: 28-Sep-2024 09:11 AM

Name

: Mr. Yash H Dave

/ Male

Req. Date

: 28-Sep-2024 09:06 AM

Age/Sex

: 34 Years

Pass. No.

Tele No.

: 9429199038

Ref. By

Dispatch At

Sample Type: Serum

Location

: CHPL

**TSH** 

2.520

μIU/mI

0.35 - 5.50

CLIA-Sandwich Immunoassay

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-relasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy: First Trimester :0.1 to 2.5 µIU/mL Second Trimester: 0.2 to 3.0 µIU/mL Third trimester: 0.3 to 3.0 µIU/mL

Referance: Carl A.Burtis, Edward R.Ashwood, David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular

Diagnostics. 5th Eddition. Philadelphia: WB Sounders, 2012:2170

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www.curovis.co.in 

www.curovis.co.in **C** 079 40308700





Reg. No : 409101389 Ref Id Collected On

: 28-Sep-2024 09:11 AM

Name : Mr. Yash H Dave

Reg. Date

: 28-Sep-2024 09:06 AM

Age/Sex

: 34 Years

/ Male

: 9429199038

Ref. By

Pass. No.

Tele No.

Dispatch At

Sample Type: Serum

Location : CHPL

**Parameter** Result Unit Biological Ref. Interval

**IMMUNOLOGY** 

**TOTAL PROSTATE SPECIFIC ANTIGEN (PSA)** 

0.82

ng/mL

0 - 4

Measurement of total PSA alone may not clearly distinguish between benign prostatic hyperplasia (BPH) from cancer, this is especially true for the total PSA values between 4-8 ng/mL.

Percentage of free PSA = free PSA/total PSA X 100

Percentage of free PSA: Patients with prostate cancer generally have a lower percentage of Free PSA than patients with benign prostatic hyperplasia. Percentage Free PSA of less than 25% is a high likelihood of prostatic cancer.

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			LABORATORY REPORT			
Name	:	Mr. Yash H Dave		Reg. No	:	409101389
Sex/Age	:	Male/34 Years		Reg. Date	:	28-Sep-2024 09:06 AM
Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	28-Sep-2024 04:48 PM

# **2D Echo Colour Doppler**

- 1. Normal sized LA, LV, RA, RV.
- 2. Normal LV systolic function, LVEF: 60 %.
- 3. No RWMA.
- 4. Normal LV compliance.
- 5. Mitral valve: AMVL prolapse rest All cardiac valves are structurally normal.
- 6. Trivial MR, Trivial TR, Trivial PR, No AR.
- 7. No PAH, RVSP: 21 mmHg, AOVP: 0.9 m/s, PVP: 0.77 m/s
- 8. IAS/IVS: Intact.
- 9. No clot/vegetation/pericardial effusion.
- 10. No coarctation of aorta.

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Dr. Parth S Patel

**DR.MUKESH LADDHA** 

MBBS. MD. FNB

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		UNI NOMEN I INCHES	LABORATORY REPORT			
Name	:	Mr. Yash H Dave		Reg. No	:	409101389
Sex/Age	:	Male/34 Years		Reg. Date	:	28-Sep-2024 09:06 AM
Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	28-Sep-2024 01:53 PM

# X RAY CHEST PA

Both lung fields show prominent broncho-vascular markings.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

Radiological interpretation is professional opinion and not the final diagnosis. Please see your referring doctor for interpretation of these results. Not valid for medico legal purposes. Results are subject to variations due to technical limitations and patient's preparation, hence correlation with clinical findings and other investigation should be carried out to know the nature of illness.

----- End Of Report -----

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DR DHAVAL PATEL **Consultant Radiologist** MB, DMRE Reg No:0494

Page 2 of 2

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			LABORATORY REPORT			
Name	:	Mr. Yash H Dave		Reg. No		409101389
Sex/Age	:	Male/34 Years		Reg. Date	•	28-Sep-2024 09:06 AM
Ref. By	:			Collected On	•	26-3ep-2024 09:00 AM
Client Name	:	Mediwheel		Report Date		28-Sep-2024 01:15 PM

### **USG ABDOMEN**

Liver appears normal in size & in echogenicity. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic billiary or portal radicals. PV is normal in caliber.

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & echopattern. No evidence of focal lesions.

Both kidneys are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass on either side.

#### Bilateral renal concretion

Urinary bladder is partially distended. No evidence of calculus or mass.

Prostate appears normal in size and echopattern. No evidence of focal lesions.

No evidence of free fluid in peritoneal cavity.

No evidence of para-aortic lymph adenopathy.

No evidence of dilated small bowel loops.

Comments:

Bilateral renal concretion.

Radiological interpretation is professional opinion and not the final diagnosis. Please see your referring doctor for interpretation of these results. Not valid for medico legal purposes. Results are subject to variations due to technical limitations and patient's preparation, hence correlation with clinical findings and other investigation should be carried out to know the nature of illness and for further intervention.

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**DR DHAVAL PATEL Consultant Radiologist** MB, DMRE Reg No:0494

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			LABORATORY REPORT			
Name	:	Mr. Yash H Dave		Reg. No	:	409101389
Sex/Age	:	Male/34 Years		Reg. Date	:	28-Sep-2024 09:06 AM
Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	28-Sep-2024 04:23 PM

## Eye Check - Up

No Eye Complaints

RIGHT EYE

SP: -2.00

CY: -0.75

AX:4

LEFT EYE

SP: -2.25

CY:-0.25

AX:178

	Without Glasses	With Glasses
Right Eye	6/12	6/6
Left Eye	6/24	6/6

Near Vision: Right Eye - N/6, Left Eye - N/6

ColorVision: Normal

Comments: Normal

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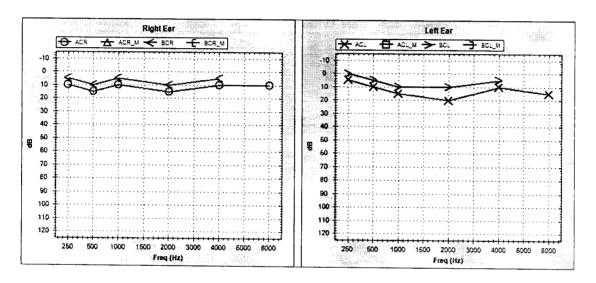
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-			LABORATORY REPORT			
Name	:	Mr. Yash H Dave		Reg. No	:	409101389
Sex/Age	:	Male/34 Years		Reg. Date	:	28-Sep-2024 09:06 AM
Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	28-Sep-2024 04:23 PM

# **AUDIOGRAM**



MODE	Air Conduction		Bone Co	Colour	
EAR	Masked	UnWasked	Masked	UnMasked	Code
LEFT		X	J	>	Blue
RIGHT	Δ	0	С	<	Red
NO RESPONS	E: Add	↓ below t	he respe	Ctive symb	ols

Threshold In dB	RIGHT	LEFT			
AIR CONDUCTION	11.0	10.5			
BONE CONDUCTION					
SPEECH		·			

Comments: - Bilateral Hearing Sensitivity Within Normal Limits.

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			LABORATORY REPORT			
Name	:	Mr. Yash H Dave		Reg. No	:	409101389
Sex/Age	:	Male/34 Years		Reg. Date	:	28-Sep-2024 09:06 AM
Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	30-Sep-2024 02:43 PM

# **Electrocardiogram**

<u>Findings</u>	
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Lad.	
	End Of Panart

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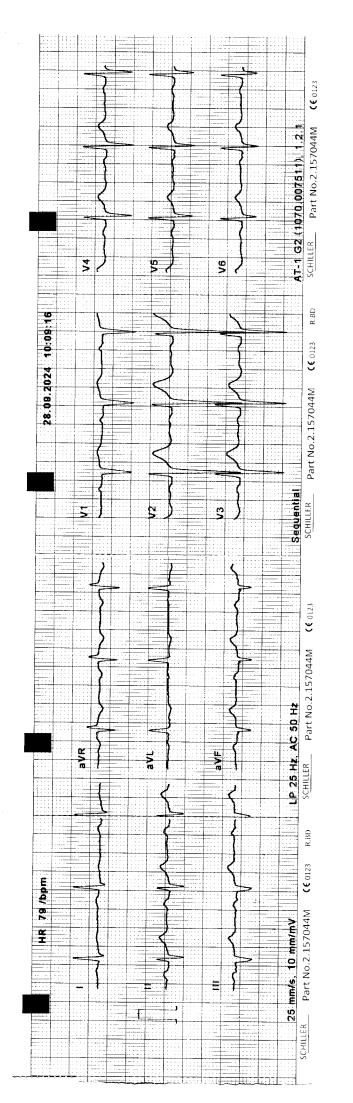
Dr. Parth S Patel

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