

Health Check up Booking Confirmed Request(bobE8554),Package Code-
PKG10000474, Beneficiary Code-296686

Mediwheel <wellness@mediwheel.in>

Tue 13-02-2024 05:59 PM

To:Nikhil Wadhvani <NIKHILWADHWANI@bankofbaroda.com>

Cc:customercare@mediwheel.in <customercare@mediwheel.in>

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

साधन: यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी विव
CAUTION: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO N



Mediwheel
...Your wellness partner

011-41195959

Dear Nikhil Wadhvani,

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

Booking Date : 08-02-2024
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 : 24-02-2024
Confirmation Status : Booking Confirmed
Preferred Time : 8:30am
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
MR. WADHWANI NIKHIL	37 year	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.

Thanks,
Mediwheel Team

You have received this mail because your e-mail ID is registered with This is a system-generated e-mail **Arcofemi Healthcare Limited**, please don't reply to this message.

Please visit to our **Terms & Conditions** for more informaion. This email is recieved because you are register with us [Click here](#) to unsubscribe.

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प्रति,

समन्वयक,
Mediwheel (Arcofemi Healthcare Limited)
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ोदा 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. WADHWANI NIKHIL
क.कू.संख्या	84355
पदनाम	IT
कार्य का स्थान	GANDHINAGAR,GIFT CITY,NATIONAL
जन्म की तारीख	07-01-1986
स्वास्थ्य जांच की प्रस्तावित तारीख	24-02-2024
बुकिंग संदर्भ सं.	23M84355100089006E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ोदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 07-02-2024 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 बड़ोदा

(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. WADHWANI NIKHIL
EC NO.	84355
DESIGNATION	IT
PLACE OF WORK	GANDHINAGAR,GIFT CITY,NATIONAL
BIRTHDATE	07-01-1986
PROPOSED DATE OF HEALTH CHECKUP	24-02-2024
BOOKING REFERENCE NO.	23M84355100089006E

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 **07-02-2024** 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))



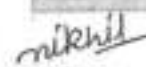
www
baroda

NIKHIL WADHWANI



अनुसूची
C.No. 84355


अनुसूची अधिकारी
my Authority


निकील वाडवानी
Engineering OFFICER

24.02.2024 11:06:59 AM
MGRHA HOSPITAL LTD.
SARGOLAN
GANDHINAGAR

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

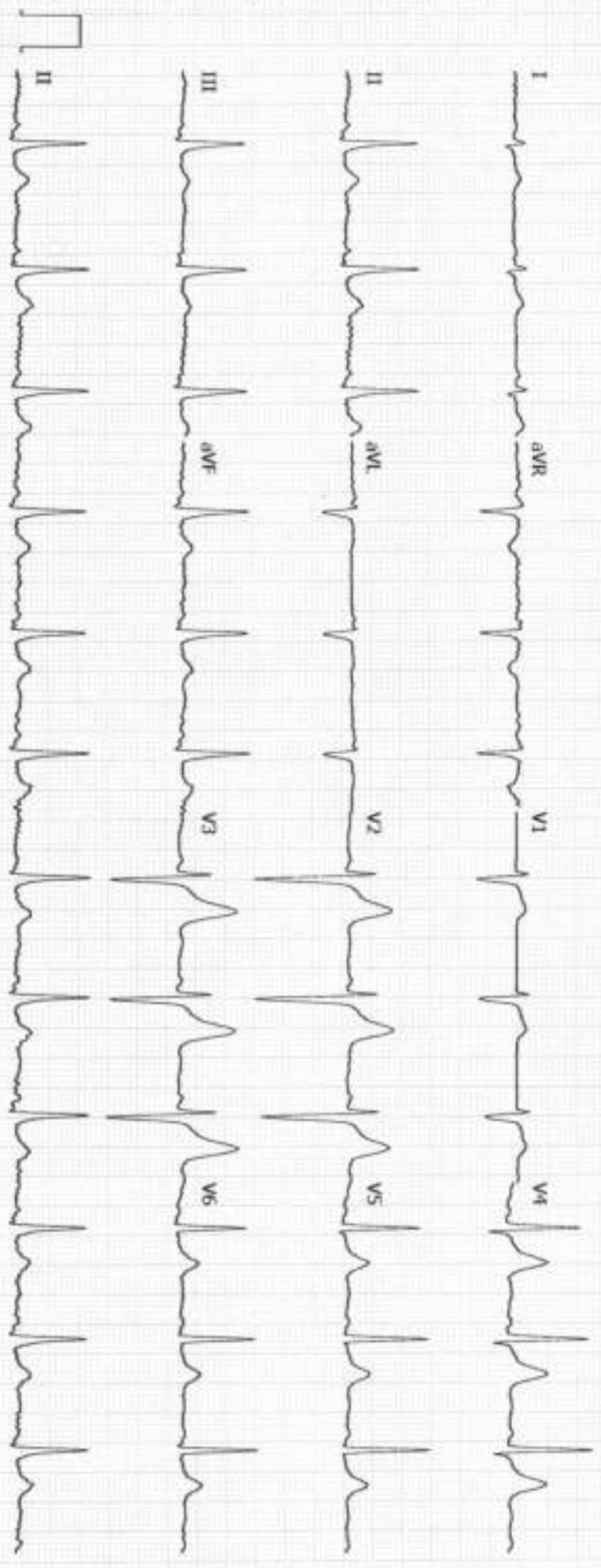
Room:

75 bpm
--/-- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 96 ms
QT / QTcBaz : 382 / 426 ms
PR : 112 ms
P : 74 ms
RR / pp : 800 / 800 ms
P / QRS / T : 53 / 84 / 61 degrees

Normal sinus rhythm
Normal ECG



PATIENT NAME: NIKHIL WADHWANI
GENDER/AGE: Male / 38 Years
DOCTOR: DR. HASIT JOSHI
OPDNO: OSP20908

DATE: 24/02/24

2D-ECHO

MITRAL VALVE	: MILD MVP	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 34mm	
LEFT ATRIUM	: 33mm	
LV Dd / Ds	: 40/26mm	EF 60%
IVS / LVPW / D	: 10/9mm	
IVS	: INTACT	
IAS	: FLOPPY	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 0.9/0.5m/s	
AORTIC	: 1.2m/s	
PULMONARY	: 0.8m/s	
COLOUR DOPPLER	: TRIVIAL MR / MILD TR	
RVSP	: 28mmHg	
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.	

CARDIOLOGIST
DR. HASIT JOSHI (9825012235)



REPORT REPEAT REPORT

PATIENT NAME: NIKHIL WADHWANI

GENDER/AGE: Male / 38 Years

DATE: 24/02/24

DOCTOR:

OPDNO: OSP20908

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse 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. 6 mm calculus is seen in right middle calyx.

Right kidney measures about 9.9 x 4.2 cms in size.

Left kidney measures about 10.2 x 4.6 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 360 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: Right middle calyceal calculus.

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


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

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



PATIENT NAME: NIKHIL WADHWANI

GENDER/AGE: Male / 38 Years

DATE: 24/02/24

DOCTOR:

OPDNO: OSP20908

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

REPORT REPORT REPORT



LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type :	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O232410408

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	112.18	mg/dL	70 - 100
Haemogram (CBC)			
RBC (Electrical Impedance)	5.74	millions/cu mm	4.50 - 5.50
Lipid Profile			
HDL Cholesterol	46.1	mg/dL	48 - 77
LDL Cholesterol	106.58	mg/dL	0.00 - 100.00

Abnormal Result(s) Summary End

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

Printed On : 24-Feb-2024 14:44



LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	PL ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 10:47	Acc. Remarks : Normal	Ref Id2 : O232410408

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin	16.1	G%	13.00 - 17.00
RBC (Electrical Impedance)	H 5.74	millions/cumm	4.50 - 5.50
PCV(Calc)	49.19	%	40.00 - 50.00
MCV (RBC histogram)	85.7	fL	83.00 - 101.00
MCH (Calc)	28.0	pg	27.00 - 32.00
MCHC (Calc)	32.7	gm/dL	31.50 - 34.50
RDW (RBC histogram)	13.50	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	5110	/μL	4000.00 - 10000.00
Neutrophil	[%] 53.0	%	EXPECTED VALUES [Abs] 2708 /μL 2000.00 - 7000.00
Lymphocyte	37.0	%	20.00 - 40.00 1891 /μL 1000.00 - 3000.00
Eosinophil	4.0	%	1.00 - 6.00 204 /μL 20.00 - 500.00
Monocytes	5.0	%	2.00 - 10.00 256 /μL 200.00 - 1000.00
Basophil	1.0	%	0.00 - 2.00 51 /μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	266000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.43		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 : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 14:40	Acc. Remarks : Normal	Ref Id2 : O232410408

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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Neuberg Diagnostics Private Limited

Laboratory : "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden,
Ahmedabad - 380006 ☎ 079-40408181 / 61618181
✉ contact@neubergsupratech.com

Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Salai, Perungudi,
Chennai - 600096, Tamil Nadu, India. | CIN - U85300TN2017PTC114099
🌐 www.neubergsupratech.com



LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 11:56	Acc. Remarks : Normal	Ref Id2 : O232410408

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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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)

Printed On : 24-Feb-2024 14:44

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LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	PL ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :

Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 12:00	Acc. Remarks : Normal	Ref Id2 : O232410408
TEST	RESULTS	UNIT BIOLOGICAL REF RANGE
		REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F <small>Photometric, Hexokinase</small>	H	112.18	mg/dL	70 - 100
Plasma Glucose - PP		82.97	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 : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 10:47	Acc. Remarks : Normal	Ref Id2 : O232410408

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C	5.12	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) <small>Calculated</small>	100.24	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 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:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 10:47	Acc. Remarks : Normal	Ref Id2 : O232410408

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol Colorimetric, CHOD-POD	166.35	mg/dL	110 - 200	
HDL Cholesterol	L 46.1	mg/dL	48 - 77	
Triglyceride Glycerol Phosphate Oxidase	68.37	mg/dL	<150	
VLDL Calculated	13.67	mg/dL	10 - 40	
Chol/HDL Calculated	3.61		0 - 4.1	
LDL Cholesterol Calculated	H 106.58	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 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglycende has been revised. Also LDL goals have changed.
- Detail test interperation 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 assesment

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

Dr. Shreya Shah,

M.D. (Pathologist)

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Neuberg Diagnostics Private Limited

Laboratory : "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden,
Ahmedabad - 380006 | 079-40408181 / 61618181
contact@neubergsupratech.com

Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Salai, Perungudi,
Chennai - 600096, Tamil Nadu, India. | CIN - U85300TN2017PTC114099
www.neubergsupratech.com



LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref. By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:08	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:08	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 11:04	Acc. Remarks : Normal	Ref Id2 : O232410408

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with PSP</i>	22.60	U/L	16 - 63
S.G.O.T. <i>UV with PSP</i>	17.06	U/L	15 - 37
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	94.56	U/L	46 - 116
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-Carboxy-4-nitroanilide Substrate</i>	15.82	U/L	0 - 55
Proteins (Total) <i>Colorimetric, Biuret</i>	7.59	gm/dL	6.40 - 8.30
Albumin <i>Bromocresol purple</i>	4.91	gm/dL	3.4 - 5
Globulin <i>Calculated</i>	2.68	gm/dL	2 - 4.1
A/G Ratio <i>Calculated</i>	1.8		1.0 - 2.1
Bilirubin Total <i>Photometry</i>	1.20	mg/dL	0.3 - 1.2
Bilirubin Conjugated <i>Diazotization reaction</i>	0.50	mg/dL	0 - 0.50
Bilirubin Unconjugated <i>Calculated</i>	0.70	mg/dL	0 - 0.8

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

Dr. Shreya Shah

M.D. (Pathologist)

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contact@neubergsupratech.com

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LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 10:47	Acc. Remarks : Normal	Ref Id2 : O232410408

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <small>GLDH</small>	12.6	mg/dL	8.90 - 20.60	
Uric Acid <small>Unicase</small>	5.23	mg/dL	3.5 - 7.2	
Creatinine	0.91	mg/dL	0.50 - 1.50	

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

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LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pl. ID : 3377788
Bill. Loc. : Aashka hospital		Pl. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 10:46	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3)	161.44	ng/dL	70 - 204	
Thyroxine (T4) CMA	7.42	ng/dL	4.87 - 11.72	
TSH CMA	0.88	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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LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 10:46	Acc. Remarks : Normal	Ref Id2 : O232410408

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	Reference range (microIU/ml)
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 Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

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LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377788
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 10:58	Acc. Remarks : Normal	Ref Id2 : O232410408

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	1.020	1.005 - 1.030
pH	6.00	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:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : NIKHIL WADHWANI	Sex/Age : Male / 38 Years	Case ID : 40202200686
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Reg Date and Time : 24-Feb-2024 09:06	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 24-Feb-2024 09:06	Sample Coll. By :	Ref Id1 : OSP20908
Report Date and Time : 24-Feb-2024 10:58	Acc. Remarks : Normal	Ref Id2 : Q232410408

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	-	-	-	-	-

----- 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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M.D. (Pathologist)

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


UHID: <u>OSP 20908</u> Date: <u>24/2/24</u> Time: <u>3PM</u>	
Patient Name: <u>Vishal Wadhwa</u> Height: <u>180 cm</u>	
Age / Sex: <u>38y / M</u> LMP: <u></u> Weight: <u>66.5 kg</u>	
History:	
C/C/O: <u>-</u>	History: <u>-</u>
Allergy History: <u></u> Addiction: <u></u>	
Nutritional Screening: <u>Well Nourished</u> / Malnourished / Obese	
Vitals & Examination: Temperature: <u>37.5</u> Pulse: <u>94</u> BP: <u>122/82</u> SPO2: <u>98%</u>	
Provisional Diagnosis:	

Advice:

Asf

Rx

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

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



DR. SEJAL J AMIN
B.D.S, M.D.S (PERIODONTIST)
IMPLANTOLOGIST
REG NO: A-12942

UHID:	OSP 20908	Date:	24/2/24	Time:	
Patient Name:	Nikhil Deshpande	Age / Sex:	35 / M	Height:	180 cm
		Weight:	66.6 kg		
Chief Complain:	Routine dental check up				
History:					
Allergy History:					
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:					
Extra oral :					
Intra oral – Teeth Present :	Stain ++				
	Caries ++				
Teeth Absent :	Missing teeth set				
Diagnosis:					

Rx						
No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration
①	TUBE	HEXIDINE COBL		(Topical)		

Other Advice:

Scrubbing → 5001-

Follow-up:

Consultant's Sign: *Sejal*

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

UHID: <u>OSP 20998</u>	Date: <u>24-02-24</u>	Time: <u>3:57 PM</u>
Patient Name: <u>Nikhil</u>	Age / Sex: <u>35 / M</u>	Height: <u>180 cm</u>
		Weight: <u>66.6 kg</u>
History: <u>Routine Checkup.</u>		
Allergy History: <u>NO</u>		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: <u>BC: un</u>		
Diagnosis: <u>normal</u>		

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

Eye examination:

	RIGHT			LEFT		
	S	C	A	S	C	A
D						
N						

Other Advice:

Ans
 PLASOS.
 max 2w /LE
 3 time

Follow-up:

Consultant's Sign:

Ans