

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 की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई केशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	SHARATH KUMAR
जन्म की तारीख	19-06-1981
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	13-01-2024
बुकिंग संदर्भ सं.	23M166362100082912S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MRS. KUMAR SWATHI S
कर्मचारी की क.कू.संख्या	166362
कर्मचारी का पद	V-CIP CELL
कर्मचारी के कार्य का स्थान	GANDHINAGAR, GIFT CITY, NATIONAL
कर्मचारी के जन्म की तारीख	30-08-1987

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 08-01-2024 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 केशलेस 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 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।)



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	SHARATH KUMAR
DATE OF BIRTH	19-06-1981
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	13-01-2024
BOOKING REFERENCE NO.	23M166362100082912S
SPOUSE DETAILS	
EMPLOYEE NAME	MRS. KUMAR SWATHI S
EMPLOYEE EC NO.	166362
EMPLOYEE DESIGNATION	V-CIP CELL
EMPLOYEE PLACE OF WORK	GANDHINAGAR,GIFT CITY,NATIONAL
EMPLOYEE BIRTHDATE	30-08-1987

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 **08-01-2024** 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))





बैंक ऑफ बड़ोदा  
Bank of Baroda

नाम  
Name  
स्वाती एस कुमार  
Swati S Kumar  
E.C. No. 166362



जारीकर्ता प्राधिकारी  
Issuing Authority

धारक के हस्ताक्षर  
Signature of Holder

DR. DIPESH FATANIYA  
M.D., IDCCM.  
CRITICAL CARE MEDICINE  
M.NO.-9909906809  
R.NO.G-41495

UHID: BSP23012 Date: 13/1/24 Time:  
Patient Name: SHARATH KUMAR Height:  
Age/Sex: 42/M LMP: Weight:

History:

C/C/O:

Headache up

History:

—

Allergy History: Dust

Addiction: —

Nutritional Screening: Well-Nourished / Malnourished / Obese

Vitals & Examination:

Temperature:

Pulse: 70

BP: 93/62

SPO2: 98%

Chole 234.

LDL 131.55

Provisional Diagnosis:





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

UHID:	OSP 33012	Date:	13/1/24	Time:	
Patient Name:	Jhaveri Kuman	Age / Sex:	42 / M	Height:	
		Weight:			
Chief Complain:					
History:	Routine dental check up				
Allergy History:					
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:					
Extra oral :					
Intra oral - Teeth Present :	Stain + Caries ++				
Teeth Absent :	gen. gingival recession gen. periodontitis gum recession gum recession				
Diagnosis:	GCP				

Rx

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

Other Advice:

- ① OPAs
- ② Sauting
- ③ Klaps Surgery

Follow-up:

Consultant's Sign:



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



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

UHID:	Date: 13/01/24	Time: 10:15
Patient Name: Shreshth	Age / Sex:	Height:
	Weight:	
History:	C/O Gummy Hathi chud.	
Allergy History:		
Nutritional Screening:	Well-Nourished / Malnourished / Obese	
Examination:	VA 6/6 6/6 no 6 Color vision - Normal	
Diagnosis:		





# GUJARAT'S ONLY COMPLETE ORAL DIAGNOSTIC CENTRE



Definite | Diagnosis | Delivered  
Monday To Saturday  
Sunday on appointment only  
+91 83202 15090

## PATIENT INFORMATION

Name of Patient: Shruthi Kumar

Phone No.:

Clinical Note:

Sex: M  F  Age: 42

Possibility of Pregnancy Y  N

Prints: CD  Film

## REFERRING DOCTOR

Name: Dr. Sejal Amin

Mob. No. 9200076595

Mail:

Email  Dicom

## SERVICES

- ORAL RADIOLOGY     ORAL PATHOLOGY     GUIDED SURGERY     3D MODELS

## 3D DIAGNOSTIC SERVICES

- ### MAXILLA
- Maxillary Full Scan  
 Maxillary Right / Left Quadrant

- ### MANDIBLE
- Mandibular Full Scan  
 Mandibular Right / Left Quadrant

**BOTH JAW**

**SINGLE TOOTH CBCT / SECTIONAL CBCT**   
mention the Tooth No. FDI System for Implant

OPG

18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38

- CBCT TMJ (R/L/Both)     PNS CBCT     AIR WAY ANALYSIS

## 2D DIAGNOSTIC SERVICES

- OPG     3D OPG     TMJ OPG

• Oroscan offers dental implant planning service on request (additional fee)  
Implant System \_\_\_\_\_

Dedicated Reporting Team : Dr. Suresh Ludhwani (Maxillofacial Radiologist) : +91 9898864413 (Only For Doctors)  
Dr. Tapan Modi (Oral Pathologist) : +91 9427803061 (Only For Doctors) (PTO)

PATIENT NAME: SHARATH KUMAR

GENDER/AGE: Male / 42 Years

DATE: 13/01/24

DOCTOR:

OPDNO: OSP33012

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

Right kidney measures about 10.1 x 4.2 cms in size.

Left kidney measures about 10.2 x 4.3 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 160 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 18 cc.

**COMMENT:** Normal sonographic appearance of liver, GB; Pancreas, spleen, kidneys, 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



**aashka**  
HOSPITAL



PATIENT NAME: SHARATH KUMAR

GENDER/AGE: Male / 42 Years

DATE: 13/01/24

DOCTOR:

OPDNO: OSP33012

### 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

PATIENT NAME: SHARATH KUMAR

GENDER/AGE: Male / 42 Years

DATE: 13/01/24

DOCTOR: DR. HASIT JOSHI

OPDNO: OSP33012

2D-ECHO

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 34mm	
LEFT ATRIUM	: 36mm	
LV Dd / Ds	: 37/24mm	EF 65%
IVS / LVPW / D	: 11/10mm	
IVS	: INTACT	
IAS	: FLOPPY	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 0.9/0.7m/s	
AORTIC	: 1.0m/s	
PULMONARY	: 1.0m/s	
COLOUR DOPPLER	: NO MR/AR; MILD TR	
RVSP	: 30mmHg	
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.	

CARDIOLOGIST

DR. HASIT JOSHI (9825012235)



REPORT REPORT REPORT



## LABORATORY REPORT



Name : SHARATH KUMAR	Sex/Age : Male / 42 Years	Case ID : 40102200240
Ref.By : AASHKA HOSPITAL	Dis. At :	Pt. ID : 3270153
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 08:24	Sample Type :	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 :

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Lipid Profile</b>			
Cholesterol	234.38	mg/dL	110 - 200
HDL Cholesterol	35.2	mg/dL	48 - 77
Triglyceride	338.15	mg/dL	<150
VLDL	67.63	mg/dL	10 - 40
Chol/HDL	6.66		0 - 4.1
LDL Cholesterol	131.55	mg/dL	0.00 - 100.00
<b>Liver Function Test</b>			
S.G.P.T.	14.23	U/L	16 - 63

Abnormal Result(s) Summary End

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

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## LABORATORY REPORT



Name : SHARATH KUMAR	Sex/Age : Male / 42 Years	Case ID : 40102200240
Ref. By : AASHKA HOSPITAL	Dis. At :	Pt. ID : 3270153
Bill. Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 08:24	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 09:16	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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### HAEMOGRAM REPORT

#### HB AND INDICES

Haemoglobin	14.8	G%	13.00 - 17.00
RBC (Electrical Impedance)	4.63	millions/cumm	4.50 - 5.50
PCV(Calc)	43.80	%	40.00 - 50.00
MCV (RBC histogram)	94.6	fL	83.00 - 101.00
MCH (Calc)	32.0	pg	27.00 - 32.00
MCHC (Calc)	33.9	gm/dL	31.50 - 34.50
RDW (RBC histogram)	13.50	%	11.00 - 16.00

#### TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

	Total WBC Count	UNIT	EXPECTED VALUES	[ Abs ]	EXPECTED VALUES
	6960	/µL	4000.00 - 10000.00		
Neutrophil	56.0	%	40.00 - 70.00	3896	/µL 2000.00 - 7000.00
Lymphocyte	34.0	%	20.00 - 40.00	2366	/µL 1000.00 - 3000.00
Eosinophil	5.0	%	1.00 - 6.00	348	/µL 20.00 - 500.00
Monocytes	5.0	%	2.00 - 10.00	348	/µL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0	/µL 0.00 - 100.00

#### PLATELET COUNT (Optical)

Platelet Count	258000	/µL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.65		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-Very Low, L-Low, H-High, HH-Very High, A-Abnormal

*Shreya Shah*

Dr. Shreya Shah

M.D. (Pathology)

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Neuberg Supratech Reference Laboratories Private Limited

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



## LABORATORY REPORT



Name : SHARATH KUMAR	Sex/Age : Male / 42 Years	Case ID : 40102200240
Ref.By : AASHKA HOSPITAL	Dis. At :	Pt. ID : 3270153
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg. Date and Time : 13-Jan-2024 08:24	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 09:53	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR Westergren Method	03	mm after 1hr	3 - 15	

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

Dr. Shroya Shah

M.D. (Pathologist)

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## LABORATORY REPORT



Name : SHARATH KUMAR	Sex/Age : Male / 42 Years	Case ID : 40102200240
Ref.By : AASHKA HOSPITAL	Dis. At :	Pt. ID : 3270153
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 13-Jan-2024 08:24	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 09:16	Acc. Remarks : Normal	Ref Id2 :

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-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah  
 M.D. (Pathologist)

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## LABORATORY REPORT



Name : SHARATH KUMAR	Sex/Age : Male / 42 Years	Case ID : 40102200240
Ref. by : AASHKA HOSPITAL	Dis. At :	Pt. ID : 3270153
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 08:24	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 09:16	Acc. Remarks : Normal	Ref Id2 :

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

#### Physical examination

Colour : Pale yellow  
Transparency : Clear

#### Chemical Examination By Sysmex UC-3500

Sp. Gravity	>1.025		1.005 - 1.030
pH	<5.5		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-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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## LABORATORY REPORT



Name : SHARATH KUMAR Sex/Age : Male / 42 Years Case ID : 40102200240  
 Ref. By : AASHKA HOSPITAL Dis. At : Pt. ID : 3270153  
 Bill. Loc. : Aashka hospital Pt. Loc. :  
 Reg Date and Time : 13-Jan-2024 08:24 Sample Type : Spot Urine Mobile No :  
 Sample Date and Time : 13-Jan-2024 08:24 Sample Coll. By : Ref Id1 : OSP33012  
 Report Date and Time : 13-Jan-2024 09:16 Acc. Remarks : Normal Ref Id2 :

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	-	-	-	-	-
Casts (Microscopic)	/lpf	<2	-	-	-	-	-

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

Dr. Shreyas Shah  
M.D. (Pathology)

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## LABORATORY REPORT



Name : SHARATH KUMAR	Sex/Age : Male / 42 Years	Case ID : 40102200240
Ref.By : AASHKA HOSPITAL	Dis. At :	PL ID : 3270153
Bill. Loc : Aashka hospital		PL Loc :
Reg Date and Time : 13-Jan-2024 08:24	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 13:48	Acc. Remarks : Normal	Ref Id2 :
TEST	RESULTS	UNIT BIOLOGICAL REF RANGE
		REMARKS

### BIOCHEMICAL INVESTIGATIONS

#### Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F <small>Photometric Hexokinase</small>	79.56	mg/dL	70 - 100
Plasma Glucose - PP <small>Photometric Hexokinase</small>	95.64	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.  
 <100 mg/dL : Normal level  
 100-125 mg/dL : Impaired fasting glucose per guidelines  
 ≥126 mg/dL : Probability of Diabetes, Confirm as per guidelines

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

Dr. Shroya Sitah  
M.D. (Pathologist)

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## LABORATORY REPORT



Name : SHARATH KUMAR	Sex/Age : Male / 42 Years	Case ID : 40102200240
Ref.By : AASHKA HOSPITAL	Dis. At :	Pt. ID : 3270153
Bill. Loc. : Aashka hospital		Pl. Loc :
Reg Date and Time : 13-Jan-2024 08:24	Sample Type : Serum	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 12:07	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Lipid Profile

<b>Cholesterol</b> <small>Colorimetric, CHOD-PAP</small>	H	234.38	mg/dL	110 - 200
<b>HDL Cholesterol</b>	L	35.2	mg/dL	48 - 77
<b>Triglyceride</b> <small>Glycerol Phospholipin Oxidase</small>	H	338.15	mg/dL	<150
<b>VLDL</b> <small>Calculated</small>	H	67.63	mg/dL	10 - 40
<b>Chol/HDL</b> <small>Calculated</small>	H	6.66		0 - 4.1
<b>LDL Cholesterol</b> <small>Calculated</small>	H	131.55	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 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: (L) -Very Low, Low, H-High, HH-Very High, A-Abnormal)

Dr. Shroya Shah

M.D. (Pathology)

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## LABORATORY REPORT



Name : SHARATH KUMAR	Sex/Age : Male / 42 Years	Case ID : 40102200240
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Bill. Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 08:24	Sample Type : Serum	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 12:01	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Liver Function Test

S.G.P.T. <small>UV with BGP</small>	L 14.23	U/L	16 - 63	
S.G.O.T. <small>UV with BGP</small>	15.21	U/L	15 - 37	
Alkaline Phosphatase <small>Enzymatic, INPP-AMP</small>	85.95	U/L	46 - 116	
Gamma Glutamyl Transferase <small>L-Gamma glutamyl-3-carboxy-4-nitroanilide Substrate</small>	18.42	U/L	0 - 55	
Proteins (Total) <small>Cobronine, Buret</small>	7.61	gm/dL	6.40 - 8.30	
Albumin <small>Bromocresol purple</small>	4.55	gm/dL	3.4 - 5	
Globulin <small>Calculation</small>	3.06	gm/dL	2 - 4.1	
A/G Ratio <small>Calculation</small>	1.5		1.0 - 2.1	
Bilirubin Total <small>Photometry</small>	1.02	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <small>Diazotization reaction</small>	0.38	mg/dL	0 - 0.50	
Bilirubin Unconjugated <small>Calculation</small>	0.64	mg/dL	0 - 0.8	

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

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## LABORATORY REPORT



Name : SHARATH KUMAR      Sex/Age : Male / 42 Years      Case ID : 40102200240  
 Ref. By : AASHKA HOSPITAL      Dis. At :      Pt. ID : 3270153  
 Bill. Loc : Aashka hospital      Pt. Loc :

Reg Date and Time : 13-Jan-2024 08:24	Sample Type : Serum	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 12:01	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <small>GLDM</small>	12.0	mg/dL	8.90 - 20.60	
Creatinine	0.95	mg/dL	0.50 - 1.50	
Uric Acid <small>Uncal</small>	5.18	mg/dL	3.5 - 7.2	

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

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Ref By : AASHKA HOSPITAL	Dis. At :	Pt. ID : 3270153
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 13-Jan-2024 08:24	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 09:16	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Glycated Haemoglobin Estimation</b>				
HbA1C	5.45	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) Calculated	109.71	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 Heterozygous 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)

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Sample Date and Time : 13-Jan-2024 08:24	Sample Coll. By :	Ref Id1 : OSP33012
Report Date and Time : 13-Jan-2024 10:03	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Thyroid Function Test</b>				
Triiodothyronine (T3)	79.85	ng/dL	70 - 204	
Thyroxine (T4) CMA	8.26	ng/dL	4.87 - 11.72	
TSH CMA	1.37	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

	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

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

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Report Date and Time : 13-Jan-2024 10:03	Acc. Remarks : Normal	Ref Id2 :

**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 reference 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/↑	↓

Pending Services  
Prostate Specific Antigen level

----- 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-Very low, L-Low, H-High, HH-Very High, A-Abnormal)

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13.01.2024 10:19:42 AM  
ASHIKA HOSPITAL LTD.  
SARGAJAN  
GANDHINAGAR

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

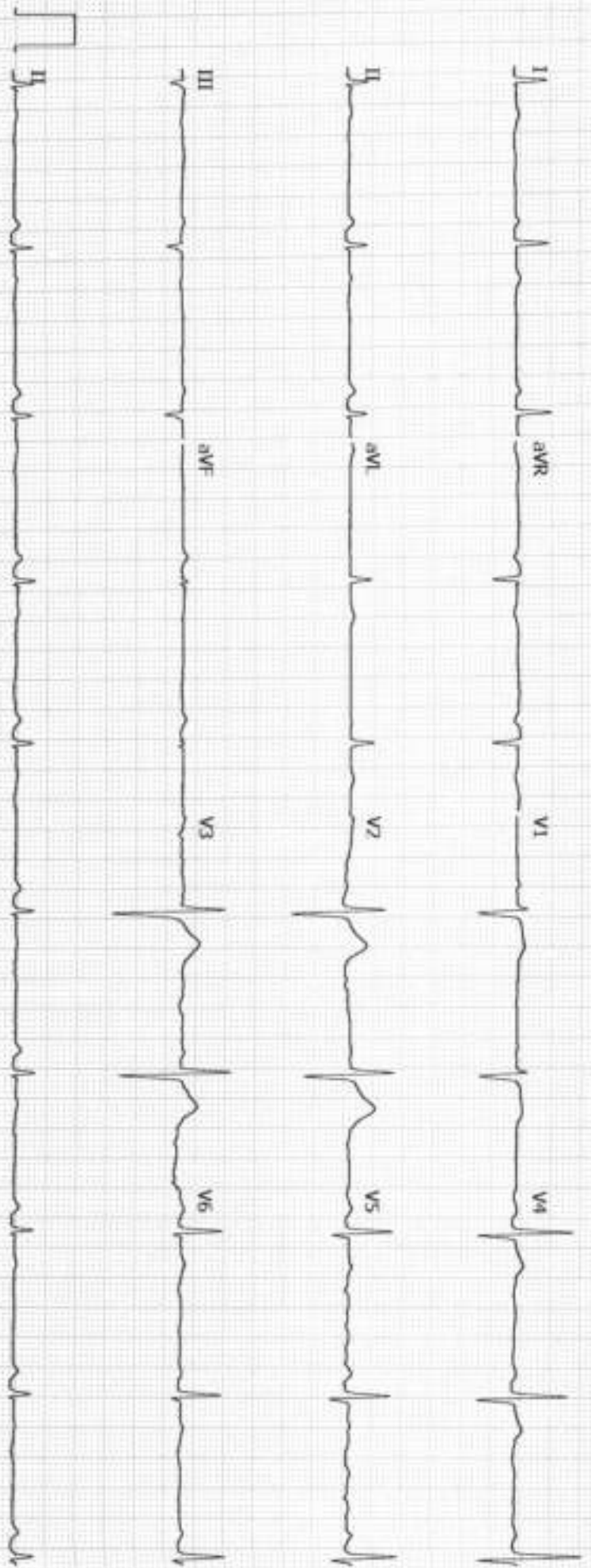
Room:

55 bpm  
--- mmHg

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 82 ms  
QT / QTcbaz : 386 / 369 ms  
PR : 172 ms  
P : 112 ms  
RR / PP : 1098 / 1090 ms  
P / QRS / T : 58 / 11 / 28 degrees

Sinus bradycardia  
Nonspecific ST and T wave abnormality  
Abnormal ECG



13.01.2024 10:20:54 AM  
ASRIKA HOSPITAL, LTD.  
SARIGASAN  
GANDHIMAGAR

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

Room:

57 bpm  
-- / -- mmHg

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 84 ms  
QT / QTc Baz : 406 / 395 ms  
PR : 172 ms  
P : 110 ms  
RR / PP : 1060 / 1052 ms  
P / QRS / T : 56 / 8 / 24 degrees

Sinus bradycardia  
Nonspecific ST and T wave abnormality  
Abnormal ECG

