PID No. :- 202410817129635

Name :- Mr. KHEMLAL BHARATI

Age/Sex :- 41 Y / M

Ref. By. :- ARCOFEMI HEALTHCARE LIMITED



 Sample Received on/at :
 Reported on/at

 10/08/2024 10:25AM
 10/08/2024 1:41PM

	BIOCHEMISTRY		
Investigation	Observed Value	Unit	Biological Reference Range
GGT/GammaGT			
Gamma GT	23.6	U/L	11 - 34
Szasz method			
BLOOD SUGAR F			
Glucose Fasting	172	mg/dl	60 - 110
BLOOD SUGAR PP			
Glucose PP	200	mg/dl	70 - 140
LFT (LIVER FUNCTION TEST)			
Bilirubin (Total)	0.73	mg/dL	<1.0
(Serum,Diazo)			
Bilirubin (Direct)	0.20	mg/dL	0 - 0.3
(Serum,Diazo)			
Bilirubin (Indirect)	0.53	mg/dL	UPTO 1.0
(Serum,Calculated)			
SGOT (AST)	32	U/L	5 - 37
(Serum,Enzymatic)			
SGPT (ALT)	29	U/L	10 - 40
(Serum,Enzymatic			
Alkaline Phosphatase	189	U/L	80 - 290
(Serum,pNPP) Total Proteins	7.23	a/dl	6.4 - 8.3
(Serum,Biuret)	1.23	g/dL	0.4 - 0.3
Albumin	4.26	g/dL	3.7 - 5.6
Globulin	2.97	g/dL	1.8 - 3.6
(Serum)	2.01	9/41	
A/G Ratio	1.43	g/dl	1.1 - 2.2
(Serum)		J	
Gamma GT	23.6	U/L	11 - 34
Szasz method			

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

Dr. Avishesh Kumar Singh
M.D. (Pathologist)

PID No. :- 202410817129635

Name :- Mr. KHEMLAL BHARATI

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Dr. Ruprela's

Diagnostics & Imagin

Lipid Profile (Fasting Sample Required) Cholesterol - Total 186 Desirable <200 mg/dL Borderline High: 200-239 High :>=240 Normal: <150 Triglycerides Level 136 mg/dL Borderline High: 150-199 High: 200-499 Very High: >=500 **HDL Cholesterol** 42 Major risk factor for heart mg/dl Disease :<40 Negative risk factor for heart Disease:>=60 Optimal: <100 LDL Cholesterol 144 mg/dL Near Optimal: 100-129 Borderline High: 130 - 159 High: 160 - 189 Very High: >190 **VLDL Cholesterol** 27.20 6-38 mg/dL LDL/HDL RATIO 3.43 2.5-3.5 3.5 - 5 CHOL/HDL RATIO 4.43

Note: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

RFT (RENAL FUNCTION TEST)

Renal (Kidney) Function Test

iteriai (ttidiley) i dilotion lest			
Urea	27.4	mg/dL	15 - 43
(Serum)			
Creatinine	0.80	mg/dL	0.57 - 1.4
(Serum,Jaffe)			
Sodium	140	mmol/L	135 - 145
Potassium	4.23	mmol/L	3.5 - 5.1
Uric Acid	4.15	mg/dL	2.6 - 6
(Serum, Uricase)			
Chlorides	102	mmol/L	98 - 107

The performance of the Roche cobas c 111 was evaluated using sigma metrics. The calculations were performed using James O. Westgard methodology.[2] This approach uses an assays total allowable error (TEa), accuracy (bias), and precision (SD) to calculate a Sigma metric to characterize the performance of that assay.

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

Dr. Avishesh Kumar Singh M.D. (Pathologist)

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HBA1C

 HbA1c Value
 10.86
 %
 4-6=Normal Control Fair Control
 6-7=Good Control Fair Control

8-10=Unsatisfactory Control >10%=Poor Control

Diagnostics & Imagin

Glycosylated Hemoglobin/Glycated Hemoglobin/GlycoHemoglobin/HbA1c. [1]

Its primary use is to monitor diabetic patient's compliance and long term blood glucose level control. It is an index of diabetic control (direct relationship between poor control and development of complications). It predicts development and progression of diabetic microvascular complications.

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

Dr. Avishesh Kumar Singh
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CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Range
URINE R/M			
Physical Examination			
Specific Gravity	1.030		1.003-1.030
Appearance	Clear		Clear
Colour	Pale Yellow		Pale Yellow
pH (Reaction)	Acidic		Acidic
Glucose	Present (++)		NIL
Microscopic Examination			
PUS CELLS	1-2	/hnf	0-5
		/hpf	
Epithelial Cells	2-4	/hpf	0-5
RBC	Absent	/hpf	Absent
Bacteria	Absent		Absent
Crystals	Absent		Absent
Casts	Absent		Absent
Chemical Examination			
Protein	NIL		NIL

Test Done by Urisys 1100 (ROCHE) Fully Automatic.

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

Dr. Avishesh Kumar Singh
M.D. (Pathologist)

Diagnostics & Imagin

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Complete Blood Count (Haemogram)

Investigation	Observed Value	Unit	Biological Reference Range	
CBC				
<u>Erythrocytes</u>				
Haemoglobin (Hb)	9.0	gm/dL	12.5 - 16.5	
Erythrocyte (RBC) Count	4.79	mill/cu.mm	4.2 - 5.6	
PCV (Packed Cell Volume)	34.0	%	36 - 47	
MCV (Mean Corpusculer Volume)	71	fl	78 - 95	
MCH (Mean Corpusculer Hb)	18.8	pg	26 - 32	
MCHC (Mean Corpuscular Hb Concn.)	26.5	g/dL	32 - 36	
RDW (Red Cell Distribution Width)	16.6	%	11.5 - 14	
<u>Leucocytes</u>				
Total Leucocytes (WBC) Count	7500	cells/cu.mm	4000 - 11000	
Neutrophils	61	%	40 - 75	
Lymphocytes.	33	%	20 - 40	
Monocytes	05	%	2-10	
Eosinophils	01	%	1-6	
Basophils	00	%	0 - 1	
Platelets-				
Platelet count	183	x10^9/L	150 - 450	
MPV (Mean Platelet Volume)	7.8	fL.	6 - 9.5	
PCT (Platelet Haematocrit)	0.143	%	0.15 - 0500	
PDW (Platelet Distribution Width)	12.1	%	11 - 18	

EDTA Whole Blood - Tests done on Automated ABX Micros ES60(HORIBA) Cell Counter. WBC, RBC & Platelet count by impedance method, WBC differential by VCS technology & other parameters calculated) All abnormal Haemograms are reviewed & confirmed microscopically. Differential count is based on approximately 10,000 cells.

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

Dr. Avishesh Kumar Singh M.D. (Pathologist)

Diagnostics & Imagin

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Hematology

Dr. Ruprela's

Diagnostics & Imagin

Investigation Observed Value Unit Biological Reference Range

Blood Group & RH Type Screening

ABO Group "B

Rh Type "POSITIVE"

Method: Column agglutination technology (CAT) is an automated. System for blood grouping which is superior in sensitivity to conventional tube method.

ESR

ESR - Erythrocyte Sedimentation Rate 34 mm at 1hr 0 - 15

(Citrate Blood) Method: Westergren

Interpretation:

- 1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
- 2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
- 3. It is also increased in pregnancy, multiple myeloma.

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

Dr. Avishesh Kumar Singh M.D. (Pathologist)

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Age/Sex :- 41 Y / M Sample Received on/at :

Ref. By. :- ARCOFEMI HEALTHCARE LIMITED 10/08/2024 10:25AM 10/08/2024 1:41PM

PATHOLOGY

Dr. Ruprela's

Diagnostics & Imagin

Reported on/at

InvestigationObserved ValueUnitBiological Reference RangeProstate Specific AntigenPSA0.89ng/mLConventional for all ages: 0 - 4
50 - 59 yrs: 0 - 3.5

INTERPRETATION:

Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-anti-chymotrypsin (PSA-ACT complex) and

unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or

prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen fol

Thyroid Panel 1 (T3, T4, TSH)

T3 0.87 ng/dl 0.6-1.8

Remarks: 1. Decreased values of T3 (T4 and TSH normal) have minimal clinical significance and not recommended for diagnosis of hypothyroidism 2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

T4 5.11 ug/dl 4.5-12.6

Remark:1.Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin) Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

TSH 2.34 uIU/ml 0.25-5.5

Remarks: 1.4.51 to 15 µIU/mL - Suggested clinical co-relation or repeat the test with new sample as physiological factors can give falsely high TSH.

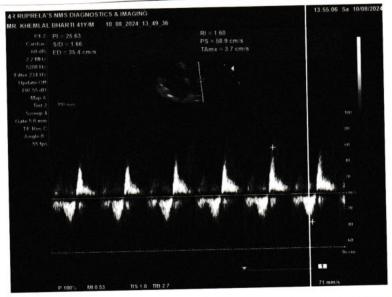
- 2.TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure, severe burns, trauma and surgery etc
- 3.Drugs that decrease TSH values e.g:L-dopa,Glucocorticoids Drugs that increase TSH values e.g lodine,Lithium,Amiodarone

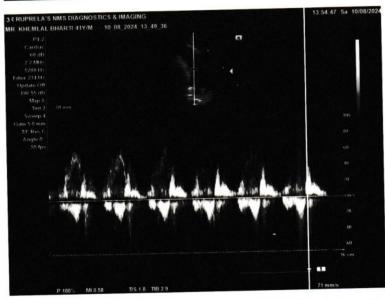
Remark

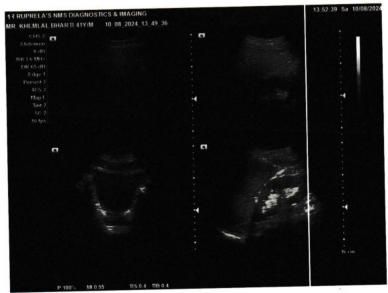
Method Used: ELFA (Enzyme Linked Fluorescence Assay) on Mini Vidas most Efficient Analyzer Internationally accepted most advanced technology with high quality result.

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

Dr. Avishesh Kumar Singh
M.D. (Pathologist)











भारतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India

आत्मजः भुरवाराम भारती, ग्राम-खोला पोस्ट-धमना, धमना, धमना, दुर्ग, पाटन, छत्तीसगढ, 491223

Address:

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2384 7306 1282



M help@uidai.gov.in

www

Dr. Shailendra Kuprela MD, Medicine Reg. No.: CG MC-511/2006





LETTER OF APPROVAL / RECOMMENDATION

To.

The Coordinator,
MediBuddy (M/s. Phasorz Technologies Pvt. Ltd.)

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. BHARATI KHEMLAL		
EC NO.	- 75239		
DESIGNATION	BRANCH HEAD		
PLACE OF WORK	KHORPA		
BIRTHDATE	20-03-1983		
PROPOSED DATE OF HEALTH CHECKUP	10-08-2024		
BOOKING REFERENCE NO.	24S75239100110118E		

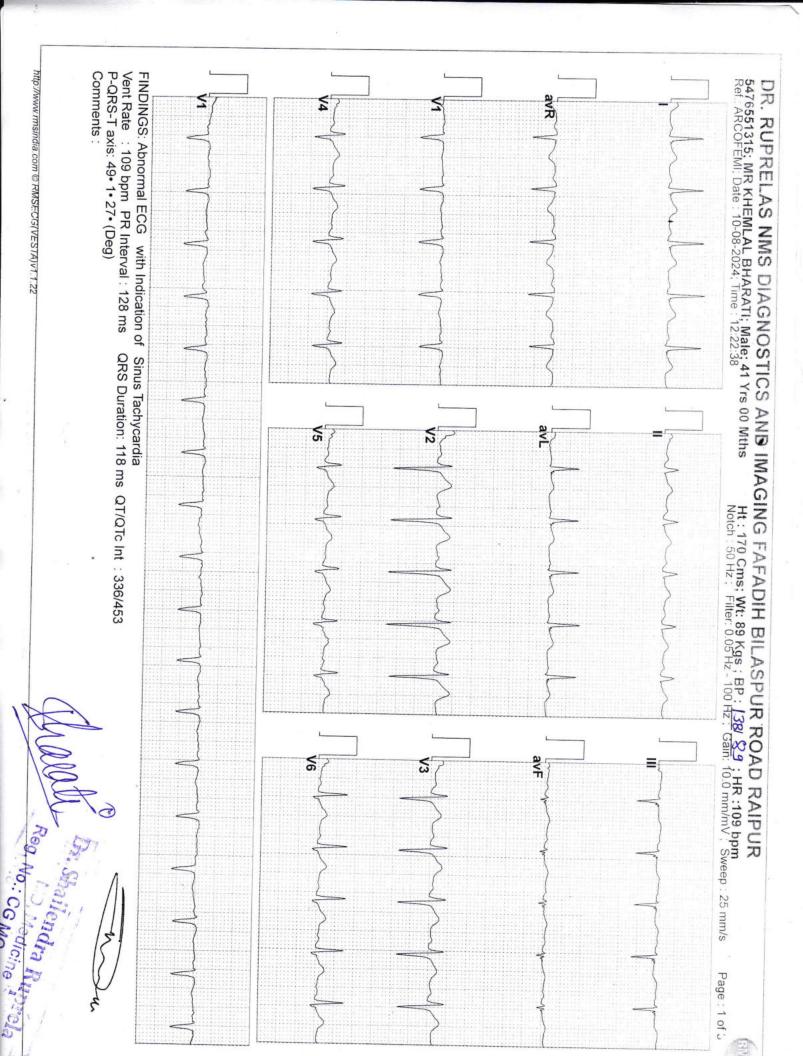
This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 06-08-2024 till 31-03-2025 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup 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 & Marketing Department Bank of Baroda



40. CG M



NAME

MR. KHEMLAL BHARATI

AGE/SEX

41 Y/M

REFERRED BY: ARCOFEMI

DATE

10.08.2024

PERIPHERAL SMEAR EXAMINATION

RBC: Macrocytic normochromic.

WBC: Total counts within normal range. No toxic granulation seen.

Band cells-9%, Neutrophils-46%, Lymphocytes-43%, Monocytes-2%.

Platelets: Appears adequate on smear.

Haemoparasite: No haemoparasite seen.

Dr. Avishesh Kumar Singh MD (Pathologist)



NAME: MR. KHEMLAL BHARATI

REF.BY: ARCOFEMI

AGE/SEX: 41 Y/M DATE: 10.08.2024

ECHO - CARDIOGRAPHY

normal value (cm)

M MODE	MEASILE	REMENTS:
M-MODE	MEASUR	CINICIA 12.

Aortic Root	3	.0	2.0-3.7
Left Atrial Dimension		.2	1.9-4.0
Left Ventricular ED	4	.4	3.7-5.6
Left Ventricular ES	3	.5	2.2-4.0
Intervenrticular Septal	ED: 0.9	ES: 1.0	0.6-1.2
LEET VENT PW	ED: 0.9	ES: 1.0	0.6-1.2

Patient value (cm)

2 D ECHO

LEFT VENT PW

All cardiac chambers normal. **CHAMBERS**

NORMAL VALVE

IVS/IAS INTACT SEPTAE

NO **RWMA** 60 % EF (OVARALL)(LV) NIL CLOT/ VEGETATION NIL PER. EFFUSION

CONTINUOUS WAVE & PULSE WAVE DOPPLER

Gradient(mm Hg) Regurgitation Valve

Not Significant NIL Mitral Valve **Not Significant** NIL **Aortic Valve** PASP= NIL **Tricuspid Valve Not Significant** Nil **Pulmonary Valve**

PULSE WAVE DOPPLER

m sec **Waves DT** MITRAL VALVE INFLOW

IMPRESSION -

- NO RWMA AT REST, LVEF=60%
- NORMAL BIVENTRICULAR FUNCTION
- NORMAL CHAMBERS DIMENSION.
- NO CLOT/VEGETATION/PERICARDIAL EFFUSION.
- **NORMAL VALVES**

DR AJAY HALWAI MBBS,MD,PGDCC

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG, BILASPUR ROAD, RAIPUR-492009 (Chhattisgarh) Ph.: 0771-4048886, Mob.: 9406396296, Email: nmsdiagnostic.service@gmail.com



NAME: MR. KHEMLAL BHARATI

AGE: 41 Y/SEX/M

DATE: 10.08.2024

Ref. By: ARCOFEMI

Complain Of: No Complaints

Ocular H/O: Nil

Family Ocular H/O: Nil

DISTANCE VISION:

(With / without PGP)

NEAR VISION:

(With / without PGP)

Drug Allergy (If Any): Not Aware

6/9

RE

RE

LE

N/6

LE

6/9

N/6

REFRACTION:

EYE	SPH	CYL	AXIS	ADD	VISION
RE	-1.00			6/6	N/6
LE	-1.00			6/6	N/6

EXTERNAL EYE EXAMINATION:

LE RE

EOM:

NAD

SQUINT EVALUATION:

ABSENT

NYSTAGMUS:

ABSENT

COLOR VISION TEST: NORMAL

NYCTALOPIA (Night Blindness): ABSENT

Ray Sharma Ophthalmologist Reg. No. MCI/10-37

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG, BILASPUR ROAD, RAIPUR-492009 (Chhattisgarh) Ph.: 0771-4048886, Mob.: 9406396296, Email: nmsdiagnostic.service@gmail.com



NAME: MR. KHEMLAL BHARATI

REF. BY: ARCOFEMI

AGE: 41 Y/M DATE: 10.08.2024

SONOGRAPHY OF WHOLE ABDOMEN The Real time, B mode, gray scale sonography was performed.

LIVER: The liver is enlarged in size and has smooth margins.

It has raised echotexture, has normally distributed and normal size biliary and portal radicles and is without solid or cystic mass lesion or calcification.

GALL BLADDER: The gall bladder is seen as a well distended, pear shaped bag with uniformly thinand regular walls, without, gall stones or mass lesions

COMMON BILE DUCT: The common bile duct is normal in caliber.

No evidence of calculus is noted in common bile duct.

PANCREAS: The pancreas is normal in size, shape, contours and echotexture.

No evidence of solid or cystic mass lesion is noted.

KIDNEYS: The kidneys are normal in size and have smooth renal margins.

Cortical echotexture is normal.

The central echocomplex does not show evidence of calculus or hydronephrosis.

SPLEEN: The spleen is normal in size and shape. Its echotexture is homogeneous.

No evidence of focal lesion is noted.

URINARY BLADDER: The urinary bladder is well distended.

No evidence of calculus is seen.

No evidence of mass or diverticulum is noted.

PROSTATE: The prostate shows well defined and sharp margins.

The prostatic echotexture is normal and homogenous.

IMPRESSION:

Diffuse fatty infiltration of liver

Thanks for referral

As with any other investigations the results obtained serve as an aid to diagnosis and should be interpreted in relation to any other clinical and diagnostic findings.





NAME: MR. KHENLAL BHARATI

REF. BY: ARCOFEMI

AGE: 41 Y/M DATE: 10.08.2024

X-RAY CHEST PA VIEW

- The lungs on the either side show equal translucency.
- The peripheral pulmonary vasculature is normal.
- No focal lung lesion is seen.
- The pleural spaces are normal.
- The cardiac size is normal.
- The domes of the diaphragms are normal in position, and show smooth outline.
- Both hila are normal in size, have equal density and bear normal relationship.
- The heart and trachea are central in position and no mediastinal abnormality is visible.
- IMPRESSION: No evidence of pulmonary, pleural or cardiac pathology is noted.
 Radiograph of chest is within normal limits.





MR. KHEMLAL BHARATI

DATE: 10.08.2024

AGE: 41

SEX: MALE

HEIGHT: 170 cms

WEIGHT: 89 kgs

BMI: 30.8

BLOOD PRESSURE: 138/89 mmhg

MEDICAL HISTORY: NOT SIGNIFICANT

ADVICE:

- 1. DRINK MINIMUM 10 GLASSES OF WATER.
- 2. EXERCISE/BRISK WALK FOR MINIMUM 50 MINS DAILY.
- 3. INCREASE INTAKE OF FIBRE LIKE SALAD, FRUIT, SPROUTS.
- TAKE GOOD SLEEP FOR 7-8 HOURS DAILY.
- 5. AVOID SPICY AND DEEP FRIED FOOD.
- 6. AVOID ALCOHOL, SMOKING, NICOTINE.
- 7. AVOID STRESS
- 8. RELAX AND BE HAPPY.



DR. RASHI SALUJA CONSULTANT DIETICIAN

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG, BILASPUR ROAD, RAIPUR-492009 (Chhattisgarh) Ph.: 0771-4048886, Mob.: 9406396296, Email : nmsdiagnostic.service@gmail.com





TO WHOM SO EVER IT MAY CONCERN

THIS IS TO DECLARE THAT MR. KHEMLAL BHARATI AGE-41/M HE UNDERGONE ENT EXAMINATION ON 10/08/2024. DURING HIS EXAMINATION NO SOFT AND HARD TISSUE ABNORMALITIES WERE DETECTED IN THE EAR, NOSE AND THROAT. NO DISCHARGE FOUND. NO SIGNIFICANT HISTORY.

NO LYMPH NODES WERE TENDER AND PALPABLE.

AIR AND BONE CONDUCTION TEST WERE NEGATIVE.

ADVISE: MAINTAIN GOOD HYGIENE AND FOLLOW UP

Dr. Anoop Rekha Mudgal

MS, ENT

Reg. No.: CGMC- 5083/2014



TO WHOM SO EVER IT MAY CONCERN

THIS IS TO DECLARE THAT MR. KHEMLAL BHARATI AGE 41 Y/M HAS UNDERGONE DENTAL EXAMINATION ON 10.08.2024.

DURING HIS INTRAORAL EXAMINATION NO HARD AND SOFT TISSUE ABNORMALITIES WERE DETECTED.

NO CAVITIES DETECTED.

CALCULUS +

STAINS +

HIS EXTRAORAL EXAMINATION REVEALS NO ABNORMALITY.

ADVISE: ORAL PROPHYLAXIS,

MAINTAIN GOOD ORAL HYGIENE,

FOLLOW UP,

BRUSH TWICE DAILY.

Dr. Poonam Ruprela
Consultant Dental Surgeon
CGDC/15/G/2169

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG, BILASPUR ROAD, RAIPUR-492009 (Chhattisgarh)
Ph.: 0771-4048886, Mob.: 9406396296, Email: nmsdiagnostic.service@gmail.com





TO WHOM SO EVER IT MAY CONCERN

THIS IS TO DECLARE THAT MR. KHEMLAL BHARATI AGE 41 YEAR/MALE HAS UNDERGONE MEDICAL EXAMINATION ON 10.08.2024 DURING HIS GENERAL EXAMINATION NO ABNORMALITIES WERE DETECTED.

HE WAS FULLY ORIENTED , NO DISABILITY WITH NORMAL GAIT.

NO SIGNS OF PALPABLE OR ENLARGED LYMPH NODES.

NO GROWTH / SWELLING OBSERVED.

HIS VITALS PARAMETERS ARE HEIGHT: 170 cms, WEIGHT: 89 kg, BP: 138/89 mmhg, HR: 88 bpm, BMI: 30.8

HIS BOWEL HABITS ARE REGULAR. NO BURNING DURING MICTURITION.

ALL REFLEXES WERE NORMAL.

NO ABNORMALITIES WERE DETECTED DURING PALPATION, PERCUSSION AND AUSCULTATION OF VISCERA.

HE DOES NOT CARRY ANY COMMUNICABLE/TRANSFERRABLE DISEASE.

HE APPEARS TO BE PHYSICALLY FIT AND WE WISH HIM ALL THE BEST.

Dr. Shailendra Ruprela

Reg. No.: CG MC-511/2006