



323 080325

Name : MRS. VAISHALI PRABHU
Ref. By : Mediwheel
Sent By : Arcofemi Healthcare Pvt Ltd

LAB ID : 323
Age : 31 Yrs. **Sex** : F
Printed : 12/03/2025 11:11

Sample Collection : 08/03/2025 15:12
Sample Received : 08/03/2025 15:12
Report Released : 09/03/2025 08:10

COMPLETE BLOOD COUNT *

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 12.9	g/dL	12-14 g/dL
Total RBC (Electrical Impedence)	: 4.45	10 ⁶ /μL	3.0-6.0 10 ⁶ /μL
Hematocrit (PCV) (Calculated)	: 40.2	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 90.3	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 29.0	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 32.1	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 15.00	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 7600	/cumm	4000-11000 /cumm
Neutrophils (Calculated)	: 55	%	40-75 %
Eosinophils Percentage (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 38	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 05	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 252000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 20	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

Note: Tests marked with * are included in NABL scope.

*All Samples Processed At Excellas Clinics Mulund Centre .

*ESR NOT IN NABL scope.

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 09/03/2025 08:10:34)


Dr. Santosh Khairnar

Reg. No.-2000/08/2926





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Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 92	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl
<i>Method: GOD-POD</i>			
GLUCOSE (SUGAR) PP, (Fluoride Plasma Used)	: 89	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 10/03/2025 12:15:44)
HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	: 5.40	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10

EDTA Whole Blood, Method: HPLC

Estimated Average Glucose (eAG)	: 108.28	mg/dl	65.1-136.3 mg/dL mg/dl
---------------------------------	----------	-------	------------------------

EDTA Whole Blood, Method: Calculated
Interpretation:

- The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- To estimate the eAG from the HbA1c value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 09/03/2025 08:42:23)

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BLOOD GROUP

Test	Result	Unit	Biological Ref. Range
Blood Group	: 'A' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 09/03/2025 08:51:53)

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LIPID PROFILE

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 239	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 106	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 37	mg/dl	42.0-88.0 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 180.80	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 21.2	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 4.9		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 6.5		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

Test Done on - Automated Biochemistry Analyzer (EM 200).
Interpretation

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.

2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.

3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

**All Samples Processed At Excellas Clinics Mulund Centre*

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 10/03/2025 12:15:54)

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Report Released : 10/03/2025 12:16

LIVER FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.35	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.15	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.20	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 19.6	IU/L	0-31 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 23.3	IU/L	0-34 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 92	IU/L	42-98 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 6.5	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.2	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 2.3	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.83		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 20	U/L	0-38 U/L

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 10/03/2025 12:16:21)

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Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.67	mg/dl	0.60-1.1 mg/dl

Serum, Method: Enzymatic

Test Done on - Automated Biochemistry Analyzer (EM 200).

All Samples Processed At Excellas Clinics Mulund Centre(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 10/03/2025 12:16:38)***BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 18.80	mg/dl	13-40 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 8.79 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

All Samples Processed At Excellas Clinics Mulund Centre(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 10/03/2025 12:16:43)***SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 5.50	mg/dl	2.6-6.0 mg/dl

Serum, Method: Uricase - POD

Test Done on - Automated Biochemistry Analyzer (EM 200).

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 10/03/2025 12:16:49)
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BUN CREAT RATIO (BCR)

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 13.11		5-20

Serum, Method: Calculated

NOTE:

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 10/03/2025 12:17:06)

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




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Report Released : 09/03/2025 08:42

THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
Total T3 <i>Serum, Method: CLIA</i>	: 1.1	ng/dl	0.70-2.04 ng/dl
Total T4 <i>Serum, Method: CLIA</i>	: 6.57	µg/dl	5.1-14.1 µg/dl
TSH (Thyroid Stimulating Hormone) <i>Serum, Method: CLIA</i>	: 2.92	µIU/ml	0.27-5.3 µIU/ml

Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis ,estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age ,marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 09/03/2025 08:42:59)

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Sample Received : 08/03/2025 15:12

Report Released : 09/03/2025 12:58

EXAMINATION OF URINE

Test	Result	Unit	Biological Ref. Range
PHYSICAL EXAMINATION			
Quantity :	25	ml	
Colour :	Pale yellow		
Appearance :	Slightly Hazy		
Reaction (pH) :	6.0		4.5 - 8.0
Specific Gravity :	1.030		1.010 - 1.030
CHEMICAL EXAMINATION			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Present (++)		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
MICROSCOPIC EXAMINATION			
Epithelial Cells :	15 - 20	/ hpf	
Pus cells :	10 - 15	/ hpf	
Red Blood Cells :	4 - 6	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
OTHER FINDINGS			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent

sample type:Urine

Method:Visual and Microscopic

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 09/03/2025 12:58:48)

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Report Released : 10/03/2025 17:32

CERVICAL CYTOLOGY REPORT

PAPANICOLAOU SMEAR (CONVENTIONAL)

Specimen :-

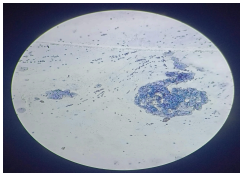
1. 2 unstained air dried smear received.
2. Stained with papanicolaou method and examined.

Smear shows :

- Many superficial squamous, intermediate squamous and few squamous metaplastic cells.
- Background shows few endocervical cells alongwith mild inflammatory infiltrate.
- No cellular atypia or malignancy noted.

Impression : Essentially Normal Pap smear.

Comments: The smears are reported using bethesda system for cervical cytology(2014) Interpretation(s).



(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 10/03/2025 17:32:18)

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OPHTHALMIC EVALUATION

Examination	Right Eye	Left Eye
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 08/03/2025 16:52:29)

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2D Echo Color Doppler

CONCLUSION:

- NORMAL SIZE LA, LV, RA AND RV.
- **GOOD LV FUNCTION. L.V.E.F:60% WITH NO RWMA.**
- GOOD RV FUNCTION.
- STRUCTURALLY NORMAL MITRAL,TRICUSPID, AORTIC AND PULMONARY LEAFLETS.
- NO CLOTS IN LA AND LV.
- NO EVIDENCE OF LEFT VENTRICULAR HYPERTROPHY.
- NO EVIDENCE OF PERICARDIAL EFFUSION.
- NO EVIDENCE OF PULMONARY HYPERTENSION.
- IVC NORMAL

CONVENTIONAL DOPPLER:

- **PEAK E: 0.9 m/sec** **PEAK A: 0.5 m/sec**
- **MEDIAL E/e' : 08**

COLOUR DOPPLER: SHOWS NO EVIDENCE OF MR,AR,TR OR PR.

IMPRESSION:

NORMAL STUDY



Dr. Ganesh Jagdale
M.B.B.S,MD,Medicine(Mum.)
DNB Cardiology (Mumbai),
FSCAI
Reg. No. 2005/10/3959



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	OBSERVED
MITRAL VALVE:	
ANTERIOR LEAFLETS EXCURSION	NORMAL
POSTERIOR LEAFLETS EXCURSION	NORMAL
E.P.S.S	----
TRICUSPID VALVE:	
EXCURSION	NORMAL
OTHER FINDINGS	----
AORTIC VALVE:	
CUSPS OPENING	NORMAL
PULMONARY VALVE:	
EXCURSION	NORMAL
DIMENSIONS	
AORTIC ROOT	22
LEFT ATRIUM	39
LVID (D)	44
LVID (S)	27
IVST (D)	08
PWT (D)	08
RVID (D)	----

(Collected At: 08/03/2025 15:12:08, Received At: 08/03/2025 15:12:08, Reported At: 12/03/2025 11:11:04)

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


Dr. Ganesh Jagdale
 M.B.B.S,MD,Medicine(Mum.)
 DNB Cardiology (Mumbai),
 FSCAI
 Reg. No. 2005/10/3959


MEDICAL EXAMINATION REPORT

Name	Mr. / Mrs. / Miss	Vaishali Prabhu	
Sex		Male <input checked="" type="checkbox"/> Female	
Age (yrs.)	31	UHID :	
Date		8 / 3 / 2025	Bill No :
Marital Status		Single <input checked="" type="checkbox"/> Married / Widow / Widower : No. of Children :	
Present Complaints		No	
Past Medical History : Surgical History :		No. LSCS (4 mth ago)	
Personal History		Diet : Veg <input type="checkbox"/> / Mixed <input checked="" type="checkbox"/> Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> Any Other : No	
Family History		Father = HT <input checked="" type="checkbox"/> / DM / IHD / Stroke / Any Other Mother = HT / DM / IHD / Stroke / Any Other Siblings = HT / DM / IHD / Stroke / Any Other	
History of Allergies		Drug Allergy No Any Other	
History of Medication		For HT / DM / HD / Hypothyroidism Any Other No	
On Examination (O/E)		G. E. : fair R. S. : AFB C. V. S. : S ₂ + C. N. S. : clear P/A : soft Any Other Positive Findings :	

Height <u>160</u> / cms	Weight <u>75.3</u> Kgs	BMI <u>29.4</u>
Pulse (per min.) <u>69/min</u>	Blood Pressure (mm of Hg) <u>120/80 mmHg</u>	
Gynaecology		
Examined by _____	Dr. _____	
Complaint & Duration _____		
Other Symptoms (Mict, bowels etc) _____		
Menstrual History	Menarche _____ Cycle _____ Loss _____ Pain _____ I.M.B. _____ P.C.B. _____ L.M.P. _____ Vaginal Discharge _____ Cx. Smear _____ Contraception _____	
Obstetric History _____		
Examination :		
Breast		
Abdomen		
P.S.		
P.V.		
Gynaecology Impression & Recommendation		
Recommendation		
Physician Impression		
Examined By :	- Overweight = To Reduce Weight - Underweight = To Increase Weight	

ID : ^{mros} Vaishali
Name : Prabha.

Age 31: Years
Gender: F

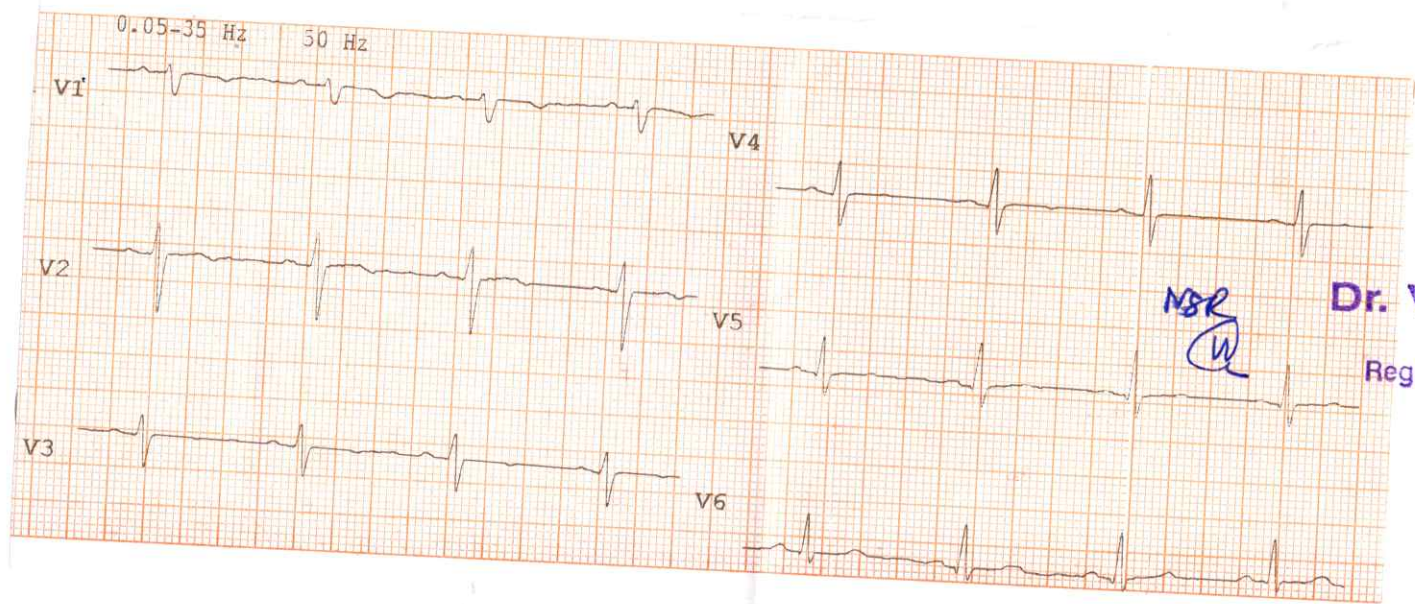
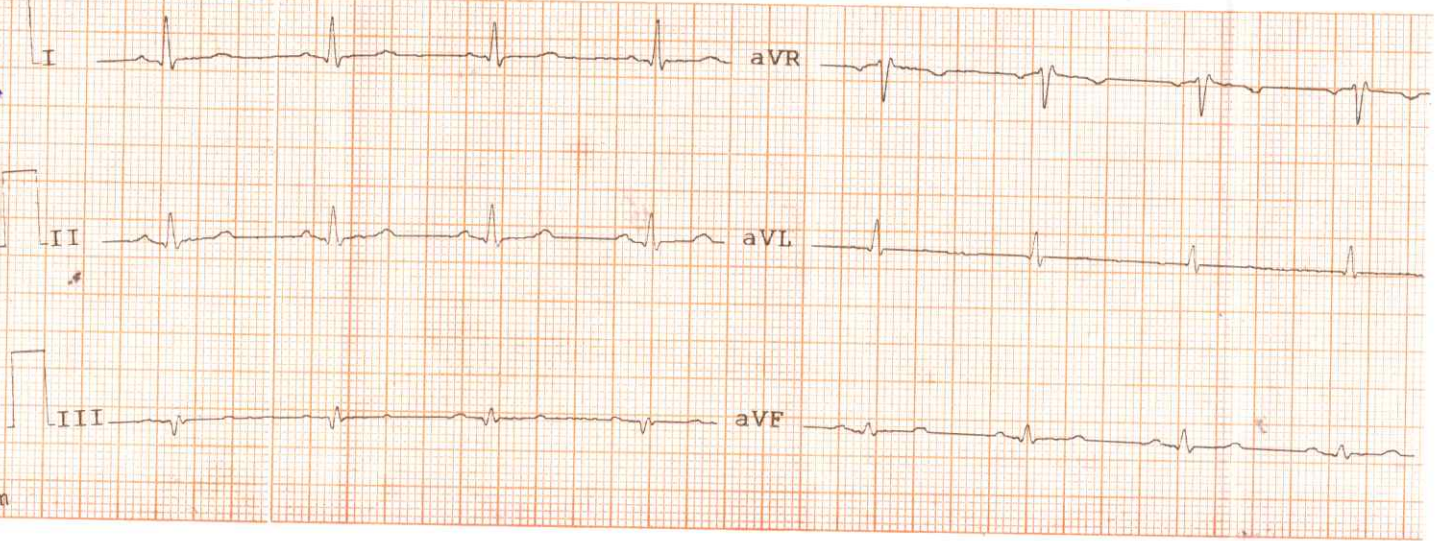
BP : (mmHg)
Weight: Kgs

Date : 08/03/25
09:54 AM

Note :

VESTA 301i
(Ver 3.31.33PC)
www.rmsindia.com

10 mm/mV 25 mm/S



MSR
(W)

Dr. VINAY HIRAY
DNB MED
Reg. No. 2012/09/2681