Patient Name	: Mr. SARVESH BHAUD	Age/Sex	: 25 Year(s) / Male
UHID	: SHHM.108382	Order Date	: 21/10/2024 08:37
Episode	: OP		
Ref. Doctor	: self	Mobile No	: 8850332790
		DOB	:04/11/1998
		Facility	: SEVENHILLS HOSPITAL,
			MUMBAI

Blood Bank

Test Name			Result				
Sample No :	O0367532A	Collection Date :	21/10/24 08:40	Ack Date :	21/10/2024 10:33	Report Date :	21/10/24 12:11
BLOOD GROUPING/ CROSS-MATCHING BY SEMI AUTOMATION.							
BLOOD GRO	OUP (ABO)			Α'			

REMARK: THE REPORTED RESULTS PERTAIN TO THE SAMPLE RECEIVED AT THE BLOOD CENTRE.

Interpretation:

Rh Type

Method - Column Agglutination

Blood typing is used to determine an individual's blood group, to establish whether a person is blood group A, B, AB, or O and whether he or she is Rh positive or Rh negative. Blood typing has the following significance,

POSITIVE

• Ensure compatibility between the blood type of a person who requires a transfusion of blood or blood components and the ABO and Rh type of the unit of blood that will be transfused.

• Determine compatibility between a pregnant woman and her developing baby (fetus). Rh typing is especially

important during pregnancy because a mother and her fetus could be incompatible.

• Determine the blood group of potential blood donors at a collection facility.

• Determine the blood group of potential donors and recipients of organs, tissues, or bone marrow, as part of a workup for a transplant procedure.

• Cross-matching test is done to assess compatibility of donor red cells to the patient.

End of Report

Dr.Pooja Vinod Mishra MD Pathology Jr Consultant Pathologist, MMC Reg No. 2017052191 RegNo: 2017/05/2191



Patient Name	: Mr. SARVESH BHAUD	Age/Sex	: 25 Year(s) / Male
UHID	: SHHM.108382	Order Date	: 21/10/2024 08:37
Episode	: OP		
Ref. Doctor	: self	Mobile No	: 8850332790
		DOB	:04/11/1998
		Facility	: SEVENHILLS HOSPITAL,
			MUMBAI

HAEMATOLOGY

est Name		Result	Unit	Bic	logical Reference Interva		
Sample No: 00367532A	Collection Date : 2	1/10/24 08:40 Ack	Date : 21/10/2024 08:58	Report Date :	21/10/24 09:48		
COMPLETE BLOOD COUNT (CBC) - EDTA WHOLE BLOOD							
Total WBC Count		5.91		x10^3/ul	4 - 10		
Neutrophils		51.6		%	40 - 80		
Lymphocytes		39.4		%	20 - 40		
Eosinophils		2.7		%	1 - 6		
Monocytes		5.9		%	2 - 10		
Basophils		0.4 ▼ (L)		%	1 - 2		
Absolute Neutrophil Count		3.05		x10^3/ul	2 - 7		
Absolute Lymphocyte Cour	t	2.33		x10^3/ul	0.8 - 4		
Absolute Eosinophil Count		0.16		x10^3/ul	0.02 - 0.5		
Absolute Monocyte Count		0.35		x10^3/ul	0.12 - 1.2		
Absolute Basophil Count		0.02		x10^3/ul	0 - 0.1		
RBCs		5.06		x10^6/ul	4.5 - 5.5		
Hemoglobin		13.2		gm/dl	13 - 17		
Hematocrit		39.8		%	35 - 45		
MCV		78.6 ▼ (L)		fl	83 - 101		
МСН		26.1 ▼ (L)		pg	27 - 32		
МСНС							
		33.1		gm/dl	31.5 - 34.5		



Patient Name	: Mr. SARVESH BHAUD	Age/Sex	ge/Sex : 25 Year(s) / Male		
UHID	: SHHM.108382	Order Date	: 21/10/2	024 08:37	
Episode	: OP				
Ref. Doctor	: self	Mobile No	: 8850332	2790	
		DOB	:04/11/1	998	
		Facility	: SEVENH MUMBA	ILLS HOSPITAL, I	
RED CELL DIST	RIBUTION WIDTH-CV (RDW-CV)	13.7	%	11 - 16	
RED CELL DISTRIBUTION WIDTH-SD (RDW-SD)		40.3	fl	35 - 56	
Platelet		290	x10^3/ul	150 - 410	
Mean Platelet \	/olume (MPV)	8.9	fl	6.78 - 13.46	
PLATELET DIS	TRIBUTION WIDTH (PDW)	15.5	%	9 - 17	
PLATELETCRIT	(PCT)	0.257	%	0.11 - 0.28	
Comment		PS Findings: RBCs: Microcytic + Hypochromic WBCs: Normal Morphology Platelets: Adequate	+		

Method:-HB Colorimetric Method. RBC/PLT Electrical Impedance Method. WBC data Flow Cytometry by Laser Method. MCV,MCH,MCHC,RDW and rest parameters - Calculated. All Abnormal Haemograms are reviewed confirmed microscopically.

NOTE: Wallach's Interpretation of Diagnostic Tests. 11th Ed, Editors: Rao LV. 2021

NOTE :-

The International Council for Standardization in Haematology (ICSH) recommends reporting of absolute counts of various WBC subsets for clinical decision making. This test has been performed on a fully automated 5 part differential cell counter which counts over 10,000 WBCs to derive differential counts. A complete blood count is a blood panel that gives information about the cells in a patient's blood, such as the cell count for each cell type and the concentrations of Hemoglobin and platelets. The cells that circulate in the bloodstream are generally divided into three types: white blood cells (leukocytes), red blood cells (erythrocytes), and platelets (thrombocytes). Abnormally high or low counts may be physiological or may indicate disease conditions, and hence need to be interpreted clinically.

End of Report

Dr.Pooja Vinod Mishra MD Pathology Jr Consultant Pathologist, MMC Reg No. 2017052191

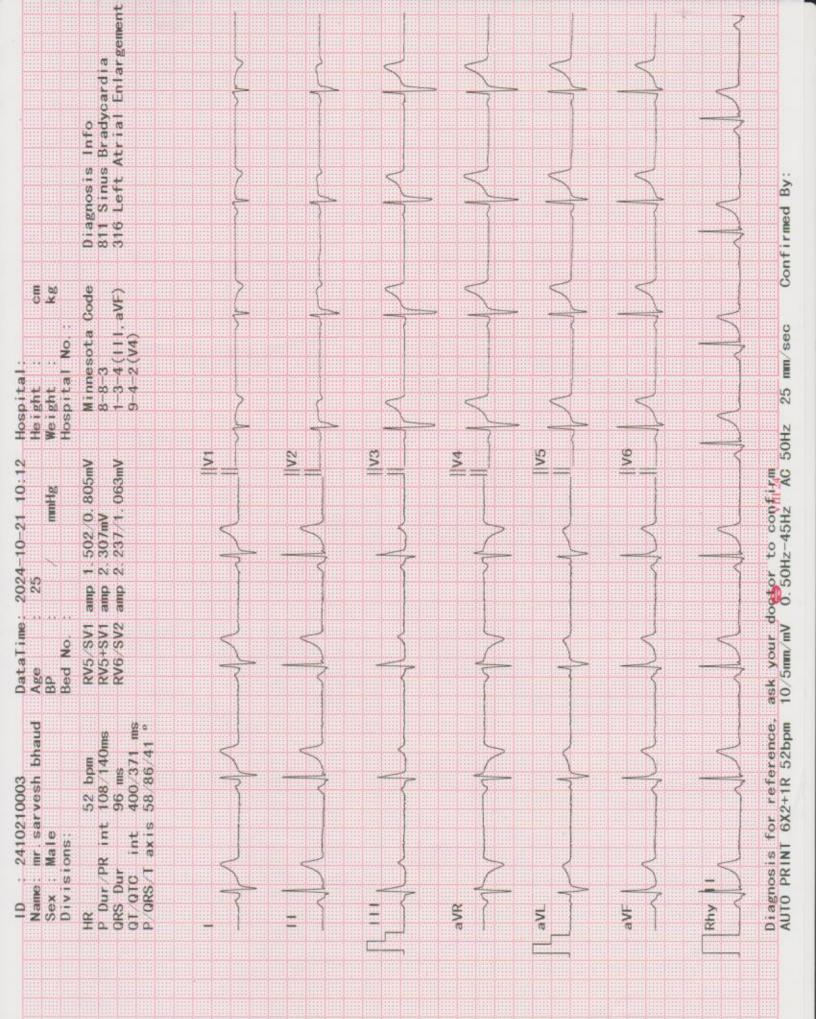


Patient Name	: Mr. SARVESH BHAUD	Age/Sex :25 Year(s) / Male
UHID	: SHHM.108382	Order Date : 21/10/2024 08:37
Episode	: OP	
Ref. Doctor	: self	Mobile No : 8850332790
		DOB :04/11/1998
		Facility : SEVENHILLS HOSPITAL, MUMBAI

RegNo: 2017/05/2191







Patient Name	: Mr. SARVESH BHAUD	Age/Sex	: 25 Year(s) / Male
UHID	: SHHM.108382	Order Date	: 21/10/2024 08:37
Episode	: OP		
Ref. Doctor	: self	Mobile No	: 8850332790
		DOB	:04/11/1998
		Facility	: SEVENHILLS HOSPITAL,
			MUMBAI

HAEMATOLOGY

Test Name	Res	ult	Unit	Bio	logical Reference Interval
Sample No : 00367532A Collect	ction Date : 21/10/24 (Ack Date :	21/10/2024 08:58	Report Date :	21/10/24 11:27
ERYTHROCYTE SEDIMENTATIO	N RATE (ESR)				
ESR		05		mm/hr	0 - 20

Method: Westergren Method

INTERPRETATION :-

ESR is a non-specific phenomenon, its measurement is clinically useful in disorders associated with an increased production of acute-phase proteins. It provides an index of progress of the disease in rheumatoid arthritis or tuberculosis, and it is of considerable value in diagnosis of temporal arteritis and polymyalgia rheumatica. It is often used if multiple myeloma is suspected, but when the myeloma is non-secretory or light chain, a normal ESR does not exclude this diagnosis.

An elevated ESR may occur as an early feature in myocardial infarction. Although a normal ESR cannot be taken to exclude the presence of organic disease, the vast majority of acute or chronic infections and most neoplastic and degenerative diseases are associated with changes in the plasma proteins that increased ESR values.

The ESR is influenced by age, stage of the menstrual cycle and medications taken (corticosteroids, contraceptive pills). It is especially low (0–1 mm) in polycythaemia, hypofibrinogenaemia and congestive cardiac failure and when there are abnormalities of the red cells such as poikilocytosis, spherocytosis, or sickle cells. In cases of performance enhancing drug intake by athletes the ESR values are generally lower than the usual value for the individual and as a result of the increase in haemoglobin (i.e. the effect of secondary polycythaemia).



End of Report

Dr.Ritesh Kharche MD Pathology, PGD-HM Consultant Pathologist and Director of Laboratory Services RegNo: 2006/03/1680

Patient Name	: Mr. SARVESH BHAUD	Age/Sex	: 25 Year(s) / Male
UHID	: SHHM.108382	Order Date	: 21/10/2024 08:37
Episode	: OP		
Ref. Doctor	: self	Mobile No	: 8850332790
		DOB	:04/11/1998
		Facility	: SEVENHILLS HOSPITAL, MUMBAI



Patient Name	: Mr. SARVESH BHAUD	Age/Sex	: 25 Year(s) / Male
UHID	: SHHM.108382	Order Date	: 21/10/2024 08:37
Episode	: OP		
Ref. Doctor	: self	Mobile No	: 8850332790
		DOB	:04/11/1998
		Facility	: SEVENHILLS HOSPITAL,
			MUMBAI

Biochemistry

Test Name Resu			lt	Unit	Bio	logical Reference Interval	
Sample No :	O0367532B	Collection Date :	21/10/24 08	:40 Ack Date :	21/10/2024 08:58	Report Date :	21/10/24 23:47
Blood Sug	ar FBS						
FBS Method - Hexo	kinase			106.47 ▲ (H)		mg/dl	70 - 100
GLUCOSE-	PLASMA POST	PRANDIAL					

American Diabetes Association Reference Range :

FASTING:-Normal : < 100 mg/dl Impaired fasting glucose(Prediabetes) : 100 - 126 mg/dl Diabetes : >= 126 mg/dl

Post-Prandial Blood Glucose: Non- Diabetic: Up to 140mg/dL Pre-Diabetic: 140-199 mg/dL Diabetic :>200 mg/dL

References:

Pack Insert of Bio system
 Tietz Textbook Of Clinical Chemistry And Molecular Diagnostics, 6th Ed, Editors: Rifai et al. 2018

Interpretation :-

Conditions that can result in an elevated blood glucose level include: Acromegaly, Acute stress (response to trauma, heart attack, and stroke for instance), Chronic kidney disease, Cushing syndrome, Excessive consumption of food, Hyperthyroidism, Pancreatitis.

A low level of glucose may indicate hypoglycemia, a condition characterized by a drop in blood glucose to a level where first it causes nervous system symptoms (sweating, palpitations, hunger, trembling, and anxiety), then begins to affect the brain (causing confusion, hallucinations, blurred vision, and sometimes even coma and death). A low blood glucose level (hypoglycemia) may be

seen with:Adrenal insufficiency, Drinking excessive alcohol, Severe liver disease, Hypopituitarism, Hypothyroidism, Severe infections, Severe heart failure, Chronic kidney (renal) failure, Insulin overdose, Tumors that produce insulin (insulinomas), Starvation.

Sample No :	O0367532C	Collection Date :	21/10/24 08:40	Ack Date :	21/10/2024 08:59	Report Date :	21/10/24 10:24



Patient Name	: Mr. SARVESH BHAUD		Age/Sex	: 25 Year(s)	/ Male
UHID	: SHHM.108382		Order Date	: 21/10/202	4 08:37
Episode : OP Ref. Doctor : self			Mobile No DOB Facility	: 8850332790 : 04/11/1998 : SEVENHILLS HOSPITAL, MUMBAI	
<u>ALT(SGPT) - S</u>	SERUM				
SGPT (Alanine Method - IFCC	Transaminase) - SERUM	14.58		IU/L	0 - 45
References : 1)Pack Insert of 2) Tietz Textbo	^f Bio system ook Of Clinical Chemistry And Molecular	Diagnostics, 6th E	d, Editors: Rifai e	t al. 2018	
Total Bilirubin - Method - Diazo	SERUM	0.41		mg/dl	0 - 2
Direct Bilirubin Method - Diazotiza		0.19		mg/dl	0 - 0.4
Indirect Bilirubi Method - Calculate		0.22		mg/dl	0.1 - 0.8
BUN-SERUM					
Urea - SERUM Method - Urease		17.95		mg/dl	15 - 39
BUN - SERUM Method - Urease-G	SLDH	8.39		mg/dl	4 - 18
References: 1)Pack Insert of 2) Tietz Textboo	^f Bio system ok Of Clinical Chemistry And Molecular L	Diagnostics, 6th Ed	l, Editors: Rifai et	al. 2018	
CREATININE-	-SERUM				
Creatinine - SE Method - Jaffes Kir	-	0.9		mg/dl	0.5 - 1.3
References: 1)Pack Insert of 2) Tietz Textboo	f Bio system ok Of Clinical Chemistry And Molecular D	Diagnostics, 6th Ed	l, Editors: Rifai et	al. 2018	

Notes :-

Creatinine is a chemical waste molecule that is generated from muscle metabolism.Creatinine is produced from creatine, a molecule of major importance for energy production in muscles.Approximataly 1-2% of the body's creatine is converted to creatinine every day. Creatinine is transported through the bloodstream to the kidneys. The kidneys filter out host of the creatinine and dispose of it in the urine.The kidneys maintain the blood creatinine in a normal ranges. Creatinine has been found to be a fairly reliable indicator of kidney function.



- End of Report -



Mr. SARVESH BHAUD	Age/Sex	: 25 Year(s) / Male
SHHM.108382	Order Date	: 21/10/2024 08:37
OP		
self	Mobile No	: 8850332790
	DOB	:04/11/1998
	Facility	: SEVENHILLS HOSPITAL, MUMBAI
	SHHM.108382 OP self	SHHM.108382 Order Date OP self Mobile No DOB

Dr.Ritesh Kharche MD Pathology, PGD-HM Consultant Pathologist and Director of Laboratory Services RegNo: 2006/03/1680





Patient Name	: Mr. SARVESH BHAUD	Age/Sex	: 25 Year(s) / Male
UHID	: SHHM.108382	Order Date	: 21/10/2024 08:37
Episode	: OP		
Ref. Doctor	: self	Mobile No	: 8850332790
		DOB	:04/11/1998
		Facility	: SEVENHILLS HOSPITAL, MUMBAI

Urinalysis

est Name		Resu	lt	Unit	Bio	logical Reference Interva
Sample No: 00367534D	Collection Date :	21/10/24 08	:46 Ack Date :	21/10/2024 08:59	Report Date :	21/10/24 13:02
Physical Examination						
QUANTITY			50		ml	
Colour			Pale Yellow			
Appearance			Clear			
DEPOSIT			Absent			Absent
рН			Acidic			
Specific Gravity			1.015			
Chemical Examination						
Protein			Absent			Absent
Glucose			Absent			
ketones			Absent			
Blood			NEGATIVE			Negative
Bilirubin			Negative			
Urobilinogen			Normal			Normal
NITRITE			Absent			Absent
LEUKOCYTES			Absent			
Microscopic Examination	1					
Pus cells			1-2		/HPF	
Epithelial Cells			1-2		/HPF	

: Mr. SARVESH BHAUD		Age/Sex	:25 Year(s)	/ Male
: SHHM.108382		Order Date	: 21/10/202	4 08:37
: OP				
: self		Mobile No	:88503327	90
		DOB	:04/11/199	8
		Facility	: SEVENHIL MUMBAI	LS HOSPITAL,
	Absent		/HPF	Absent
	Absent		/LPF	
	Absent		/HPF	
terials	Absent			
	Absent			
	Absent			
	: SHHM.108382 : OP : self	: SHHM.108382 : OP : self Absent Absent terials Absent Absent Absent	 SHHM.108382 OP self Mobile No DOB Facility Absent Absent Absent Absent Absent Absent Absent 	: SHHM.108382 : OP : self Mobile No : 885033279 DOB : 04/11/199 Facility : SEVENHIL MUMBAI MUMBAI MUMBAI MUMBAI : SEVENHIL MUMBAI

– End of Report –



Dr.Nipa Dhorda MD Pathologist RegNo: 91821



Patient Name Aqe/Sex UHID	: Mr. SARVESH BHAUD : 26 Year(s)/Male : SHHM.108382	Order Date Report Date	 21/10/2024 08:37 22/10/2024 10:33
Ref. Doctor	: self	Facility	: SEVENHILLS HOSPITAL,
Address	 FLAT NO 206 A WING 2ND FLOOR BALKRISHNA APT 100 FEET RD, THANE, Mumbai, Maharashtra, 401105 	Mobile	MUMBAI : 8850332790

DIAGNOSTICS REPORT

X-RAY CHEST PA VIEW

Both lungs are clear.

The frontal cardiac dimensions are normal.

The pleural spaces are clear.

Both hilar shadows are normal in position and density.

No diaphragmatic abnormality is seen.

The soft tissues and bony thorax are normal.

IMPRESSION: No pleuroparenchymal lesion is seen.



Dr.Priya Vinod Phayde MBBS,DMRE

RegNo: 2020/11/6493

Arcofemi Healthcare Pvt Ltd (Formerly known as Arcofemi Healthcare Ltd) F-701A, Lado Sarai, Mehrauli, New Delhi - 110030 Email: wellness@mediwheel.in, Website: www.mediwheel.in Tel: +91-11-41195959, Fax: +91-11-29523020 CIN: U24240DL2011PTC216307.

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that <u>Mr.Sarvesh Bhaud</u> aged, <u>26yr</u>. Based on the examination, I certify that he is in good dental and physical health and it is free from any physical defects such as deafness, color blindness, and any chronic or contagious diseases.

Place: Mumbai

Date: 21/10/2024

...Your wellness partner

Dr. Nitesh Kumar 38 47093 Name & Signature of Medical officer