

**PHYSICAL EXAMINATION REPORT**

Patient Name	Laxman Pandey	Sex/Age	M / 47
Date	08-03-2025	Location	Thane

**History and Complaints**

NIL

**EXAMINATION FINDINGS:**

Height (cms):	172	Temp (0c):	Axe
Weight (kg):	77.1	Skin:	7 NAD
Blood Pressure	120/80	Nails:	
Pulse	96   -	Lymph Node:	NP

**Systems :**

Cardiovascular:	NAD
Respiratory:	Clear
Genitourinary:	] NAD
GI System:	
CNS:	

**Impression:**

Advice:

1)	Hypertension:	
2)	IHD	
3)	Arrhythmia	
4)	Diabetes Mellitus	
5)	Tuberculosis	
6)	Asthama	
7)	Pulmonary Disease	
8)	Thyroid/ Endocrine disorders	no
9)	Nervous disorders	
10)	GI system	NAD
11)	Genital urinary disorder	
12)	Rheumatic joint diseases or symptoms	
13)	Blood disease or disorder	no
14)	Cancer/lump growth/cyst	
15)	Congenital disease	no
16)	Surgeries	SX - Piles in 2002
17)	Musculoskeletal System	NAD

PERSONAL HISTORY:

1)	Alcohol	
2)	Smoking	occ.
3)	Diet	Mixed
4)	Medication	no

Date: 2/3/25  
 Name: Laxman Pardey  
 CID: 393341230  
 Sex / Age: M - 47

**EYE CHECK UP**

Chief complaints: ACU

Systemic Diseases: HD

Past history: Nil

Unaided Vision: 3E 6/6 NUBE 4/2

Aided Vision: 3E 6/6 NUBE 6/6

**Refraction:**

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark: Use own Spectacles

MR. PRAKASH KUDVA  
*Prakash Kudva*  
 SR. OPTOMETRIST

Name	: PANDEY LAXMAN	Age	: 46 Years
Lab No.	: 393945230	Gender	: Male
Ref By	: SELF	Reported	: 8/3/2025 7:25:05PM
Collected	: 8/3/2025 8:12:00AM	Report Status	: Final
A/c Status	: P	Processed at	: G B ROAD LAB, THANE WEST
Collected at	: WALKIN - G B ROAD LAB, THANE WEST Ground Floor, Shop No. 1, 2, 3, Pride Park, Near R-Mall Opp. Lawkim Company, Ghodbunder Road, Thane West, Maharashtra - 400607		

**MediWheel Full Body Health Checkup Male >40/2D ECH  
CBC (Complete Blood Count), Blood**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	15.2	13.0 - 17.0 g/dL	Spectrophotometric
RBC	5.2	4.5 - 5.5 mil/cmm	Elect. Impedance
PCV	47.3	40.0 - 50.0 %	Calculated
MCV	91.0	81.0 - 101.0 fL	Measured
MCH	29.2	27.0 - 32.0 pg	Calculated
MCHC	32.1	31.5 - 34.5 g/dL	Calculated
RDW	12.8	11.6 - 14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	5750	4000 - 10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	27.0	20.0 - 40.0 %	
Absolute Lymphocytes	1552.5	1000.0 - 3000.0 /cmm	Calculated
Monocytes	7.1	2.0 - 10.0 %	
Absolute Monocytes	408.3	200.0 - 1000.0 /cmm	Calculated
Neutrophils	62.3	40.0 - 80.0 %	
Absolute Neutrophils	3582.3	2000.0 - 7000.0 /cmm	Calculated
Eosinophils	3.6	1.0 - 6.0 %	
Absolute Eosinophils	207.0	20.0 - 500.0 /cmm	Calculated
Basophils	0.0	0.1 - 2.0 %	
Absolute Basophils	0.0	20.0 - 100.0 /cmm	Calculated
Immature Leukocytes	-		



Name	: PANDEY LAXMAN	Age	: 46 Years
Lab No.	: 393945230	Gender	: Male
Ref By	: SELF	Reported	: 8/3/2025 7:25:05PM
Collected	: 8/3/2025 8:12:00AM	Report Status	: Final
A/c Status	: P	Processed at	: G B ROAD LAB, THANE WEST
Collected at	: WALKIN - G B ROAD LAB, THANE WEST Ground Floor, Shop No. 1, 2, 3, Pride Park, Near R-Mall Opp. Lawkim Company, Ghodbunder Road, Thane West, Maharashtra - 400607		

**MediWheel Full Body Health Checkup Male >40/2D ECH  
CBC (Complete Blood Count), Blood**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PLATELET PARAMETERS</u>			
Platelet Count	130000	150000 - 410000 /cmm	Elect. Impedance
MPV	11.2	6.0 - 11.0 fL	Measured
PDW	19.1	11.0 - 18.0 %	Calculated
<u>RBC MORPHOLOGY</u>			
Others	Normocytic Normochromic Megaplatelet seen on smear		
PLATELET MORPHOLOGY			
COMMENT	-		

Specimen: EDTA whole blood



Name	: PANDEY LAXMAN	Age	: 46 Years
Lab No.	: 393945230	Gender	: Male
Ref By	: SELF	Reported	: 8/3/2025 7:25:05PM
Collected	: 8/3/2025 8:12:00AM	Report Status	: Final
A/c Status	: P	Processed at	: G B ROAD LAB, THANE WEST
Collected at	: WALKIN - G B ROAD LAB, THANE WEST Ground Floor, Shop No. 1, 2, 3, Pride Park, Near R-Mall Opp. Lawkim Company, Ghodbunder Road, Thane West, Maharashtra - 400607		

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**ERYTHROCYTE SEDIMENTATION RATE (ESR)**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
ESR, EDTA WB	5.00	2.00 - 15.00 mm/hr	Sedimentation

**Clinical Significance:** The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

**Interpretation:**

Factors that increase ESR: Old age, Pregnancy, Anemia

Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

**Limitations:**

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

**Reflex Test:** C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

**Reference:**

- Pack Insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.



Name	: PANDEY LAXMAN	Age	: 46 Years
Lab No.	: 393945230	Gender	: Male
Ref By	: SELF	Reported	: 8/3/2025 7:25:05PM
Collected	: 08/03/2025 08:12:00AM	Report Status	: Final
A/c Status	: P	Processed at	: G B ROAD LAB, THANE WEST
Collected at	: WALKIN - G B ROAD LAB, THANE WEST Ground Floor, Shop No. 1, 2, 3, Pride Park, Near R-Mall Opp. Lawkim Company, Ghodbunder Road, Thane West, Maharashtra - 400607		

**MediWheel Full Body Health Checkup Male >40/2D ECH**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGES</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma Fasting	112.16	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase

Note : ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition

GLUCOSE (SUGAR) PP, Fluoride Plasma PP	169.91	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
---	--------	--	------------

Note : ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition



Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 08/03/2025 08:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mail Opp. Lawkim Company, Ghodbunder Road,  
 Thane West, Maharashtra - 400607

Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : G B ROAD LAB, THANE WEST

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**KIDNEY FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
BLOOD UREA, Serum	16.26	12.80 - 42.80 mg/dL	Urease GLDH
BUN, Serum	7.59	6.00 - 20.00 mg/dL	Calculated
CREATININE, Serum	0.81	0.67 - 1.17 mg/dL	Enzymatic
eGFR, Serum	109.98	(ml/min/1.73sqm) Normal or High: Above 90 Mild decrease: 60-89 Mild to moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: <15	Calculated
TOTAL PROTEINS, Serum	7.18	6.40 - 8.30 g/dL	Biuret
Albumin Serum	4.86	3.50 - 5.20 g/dL	BCG
GLOBULIN Serum	2.32	2.30 - 3.50 g/dL	Calculated
A/G RATIO Serum	2.10	1.00 - 2.00	Calculated
URIC ACID, Serum	6.06	3.50 - 7.20 mg/dL	Enzymatic
PHOSPHORUS, Serum	2.53	2.70 - 4.50 mg/dL	Molybdate UV
CALCIUM, Serum	10.21	8.60 - 10.00 mg/dL	N-BAPTA
SODIUM, Serum	139.55	135.00 - 148.00 mmol/L	Indirect ISE
POTASSIUM, Serum	4.7	3.50 - 5.30 mmol/L	Indirect ISE
CHLORIDE Serum	100.28	98.00 - 107.00 mmol/L	Indirect ISE

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation





Name	: PANDEY LAXMAN	Age	: 46 Years
Lab No.	: 393945230	Gender	: Male
Ref By	: SELF	Reported	: 8/3/2025 7:25:05PM
Collected	: 08/03/2025 08:12:00AM	Report Status	: Final
A/c Status	: P	Processed at	: G B ROAD LAB, THANE WEST
Collected at	: WALKIN - G B ROAD LAB, THANE WEST Ground Floor, Shop No. 1, 2, 3, Pride Park, Near R-Mall Opp. Lawkim Company, Ghodbunder Road, Thane West, Maharashtra - 400607		

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**GLYCOSYLATED HEMOGLOBIN (HbA1c)**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGES</u>	<u>METHOD</u>
Glycosylated Hemoglobin (HbA1c), EDTA WB	5.1	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB	99.7	mg/dL	Calculated

**Intended use:**

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

**Clinical Significance:**

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

**Test Interpretation:**

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

**Factors affecting HbA1c results:**

**Increased in:** High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

**Decreased in:** Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

**Reflex tests:** Blood glucose levels, CGM (Continuous Glucose monitoring)

**References:** ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.



Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 08/03/2025 08:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mall Opp. Lawkim Company, Ghodbunder Road,  
 Thane West, Maharashtra - 400607

Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : G B ROAD LAB, THANE WEST

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**FUS and KETONES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGES</u>	<u>METHOD</u>
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	



Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 08/03/2025 08:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mall Opp. Lawkim Company, Ghodbunder Road,  
 Thane West, Maharashtra - 400607

Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : G B ROAD LAB, THANE WEST

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**Glucose & Ketones, Urine**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGES</u>	<u>METHOD</u>
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	



Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 08/03/2025 08:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mail Opp. Lawkim Company, Ghodbunder Road,  
 Thane West, Maharashtra - 400607  
 Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : G B ROAD LAB, THANE WEST

**MediWheel Full Body Health Checkup Male >40/2D ECH**

**LIPID PROFILE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGES</u>	<u>METHOD</u>
CHOLESTEROL, Serum	289	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	405	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>=500 mg/dl	GPO-POD
HDL CHOLESTEROL Serum	45	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	244	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >=190 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	6	0-4.5 Ratio	Calculated
LDL CHOLESTEROL, Serum	171	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >= 190 mg/dl < /= 30 mg/dl	Direct
VLDL CHOLESTEROL Serum	73		Calculated
LDL CHOL / HDL CHOL RATIO, Serum	4	0-3.5 Ratio	Calculated

**Reference:**

- 1) Executive Summary of the Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III).
- 2) Pack Insert.



Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 08/03/2025 08:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mall Opp. Lawkim Company, Ghodbunder Road,  
 Thane West, Maharashtra - 400607  
 Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : G B ROAD LAB, THANE WEST

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**THYROID FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
Free T3, Serum	5.24	3.50 - 6.50 pmol/L	ECLIA
Free T4 Serum	12.58	11.50 - 22.70 pmol/L	ECLIA
sensitiveTSH Serum	2.72	0.35 - 5.50 microIU/ml	ECLIA

**Interpretation:**

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

**Clinical Significance:**

1. TSH Values between high abnormal upto 15 microIU/ml should be correlated clinically 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 severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone recovery phase of nonthyroidal illness, TSH Resistance
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, anti thyroid drugs, tyrosine kinase inhibitors & amiodarone amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for hyperthyroidism, drugs like steroids & dopamine, Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

**Diurnal Variation:** TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation: 19.7%



Name	: PANDEY LAXMAN	Age	: 46 Years
Lab No.	: 393945230	Gender	: Male
Ref By	: SELF	Reported	: 8/3/2025 7:25:05PM
Collected	: 08/03/2025 08:12:00AM	Report Status	: Final
A/c Status	: P	Processed at	: G B ROAD LAB, THANE WEST
Collected at	: WALKIN - G B ROAD LAB, THANE WEST Ground Floor, Shop No. 1, 2, 3, Pride Park, Near R-Mall Opp. Lawkim Company, Ghodbunder Road, Thane West, Maharashtra - 400607		

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**THYROID FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGES</u>	<u>METHOD</u>
------------------	----------------	------------------------------	---------------

(with in subject variation)

Reflex Tests: Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

**Limitations:**

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results.this assay is designed to minimize interference from heterophilic antibodies.

**Reference:**

1. O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
2. Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
3. Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
4. Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)



Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 08/03/2025 08:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mall Opp. Lawkim Company, Ghodbunder Road,  
 Thane West, Maharashtra - 400607  
 Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : G B ROAD LAB, THANE WEST

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**LIVER FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGES</u>	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.73	0.10 - 1.20 mg/dL	Colorimetric
BILIRUBIN (DIRECT), Serum	0.22	0.00 - 0.30 mg/dL	Diazo
BILIRUBIN (INDIRECT), Serum	0.51	0.10 - 1.00 mg/dL	Calculated
TOTAL PROTEINS, Serum	7.18	6.40 - 8.30 g/dL	Biuret
Albumin Serum	4.86	3.50 - 5.20 g/dL	BCG
GLOBULIN Serum	2.32	2.30 - 3.50 g/dL	Calculated
A/G RATIO Serum	2.10	1.00 - 2.00	Calculated
SGOT (AST), Serum	26.96	5.00 - 40.00 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	26.46	5.00 - 45.00 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	25.16	3.00 - 60.00 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	93.77	40.00 - 130.00 U/L	Colorimetric



Name	: PANDEY LAXMAN	Age	: 46 Years
Lab No.	: 393945230	Gender	: Male
Ref By	: SELF	Reported	: 8/3/2025 7:25:05PM
Collected	: 8/3/2025 8:12:00AM	Report Status	: Final
A/c Status	: P	Processed at	: G B ROAD LAB, THANE WEST
Collected at	: WALKIN - G B ROAD LAB, THANE WEST Ground Floor, Shop No. 1, 2, 3, Pride Park, Near R-Mall Opp. Lawkim Company, Ghodbunder Road, Thane West, Maharashtra - 400607		

**MediWheel Full Body Health Checkup Male >40/2D ECH  
 EXAMINATION OF FAECES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PHYSICAL EXAMINATION</u>			
EXAMINATION OF FAECES	.Sample Not Received		
<u>CHEMICAL EXAMINATION</u>			
<u>MICROSCOPIC EXAMINATION</u>			





Name	: PANDEY LAXMAN	Age	: 46 Years
Lab No.	: 393945230	Gender	: Male
Ref By	: SELF	Reported	: 8/3/2025 7:25:05PM
Collected	: 8/3/2025 8:12:00AM	Report Status	: Final
A/c Status	: P	Processed at	: G B ROAD LAB, THANE WEST
Collected at	: WALKIN - G B ROAD LAB, THANE WEST Ground Floor, Shop No. 1, 2, 3, Pride Park, Near R-Mall Opp. Lawkim Company, Ghodbunder Road, Thane West, Maharashtra - 400607		

**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**BLOOD GROUPING & Rh TYPING**

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	O
Rh Typing	Positive

Note : This Sample has also been tested for Bombay group/Bombay phenotype /Oh using anti H lectin  
NOTE: Test performed by Semi- automated column agglutination technology (CAT)

Specimen: EDTA Whole Blood and/or serum

**Clinical significance:**  
ABO system is most important of all blood group in transfusion medicine

**Limitations:**

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

**References:**

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia



Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 8/3/2025 8:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mail Opp. Lawkim Company, Ghodbunder  
 Road, Thane West, Maharashtra - 400607

Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : G B ROAD LAB, THANE WEST

**URINE EXAMINATION REPORT**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale Yellow	Pale Yellow	-
Transparency	CLEAR	Clear	-
<b><u>CHEMICAL EXAMINATION</u></b>			
Specific Gravity	1.00	1.002-1.035	Chemical Indicator
Reaction (pH)	6.0	5-8	Chemical Indicator
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Negative	Griess Test
<b><u>MICROSCOPIC EXAMINATION</u></b>			
(WBC)Pus cells / hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2	0-5/hpf	
Hyaline Casts	Absent	Absent	
Pathological cast	Absent	Absent	
Calcium oxalate monohydrate crystals	Absent	Absent	
Calcium oxalate dihydrate crystals	Absent	Absent	
Triple Phosphate crystals	Absent	Absent	
Uric acid crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	1-2	0-20/hpf	
Yeast	Absent	Absent	
OTHERS	-		





Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 8/3/2025 8:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mall Opp. Lawkim Company, Ghodbunder  
 Road, Thane West, Maharashtra - 400607

Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : SDRL, VIDYAVIHAR



**MediWheel Full Body Health Checkup Male >40/2D ECH**  
**PROSTATE SPECIFIC ANTIGEN (PSA)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
TOTAL PSA, Serum	0.44	<4.00 ng/mL	CLIA

**Clinical Significance:**

- PSA is detected in the serum of males with normal, benign hyper-plastic, and malignant prostate tissue,
- Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
- Prostate cancer screening 4. The percentage of Free PSA (FPSA) in serum is described as being significantly higher in patients with BPH than in patients with prostate cancer. 5. Calculation of % free PSA (ie. FPSA/TPSA x 100 ), has been suggested as way of improving the differentiation of BPH and Prostate cancer.

**Interpretation:**

**Increased In-** Prostate diseases, Cancer, Prostatitis, Benign prostatic hyperplasia, Prostatic ischemia, Acute urinary retention, Manipulations like Prostatic massage, Cystoscopy, Needle biopsy, Transurethral resection, Digital rectal examination, Radiation therapy, Indwelling catheter, Vigorous bicycle exercise, Drugs (e.g., testosterone), Physiologic fluctuations. Also found in small amounts in other cancers (sweat and salivary glands, breast, colon, lung, ovary) and in Skene glands of female urethra and in term placenta, Acute renal failure, Acute myocardial infarction,

**Decreased In-** Ejaculation within 24-28 hours, Castration, Antiandrogen drugs (e.g., finasteride), Radiation therapy, Prostatectomy, PSA falls 17% in 3 days after lying in hospital, Artfactual (e.g., improper specimen collection; very high PSA levels). Finasteride (5- $\alpha$ -reductase inhibitor) reduces PSA by 50% after 6 months in men without cancer.

**Reflex Tests:** % FREE PSA , USG Prostate

**Limitations:**

- tPSA values determined on patient samples by different testing procedures cannot be directly compared with one another and could be the cause of erroneous medical interpretations. If there is a change in the tPSA assay procedure used while monitoring therapy, then the tPSA values obtained upon changing over to the new procedure must be confirmed by parallel measurements with both methods. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels.
- Patients who have been regularly exposed to animals or have received immunotherapy or diagnostic procedures utilizing immunoglobulins or immunoglobulin fragments may produce antibodies, e.g. HAMA, that interferes with immunoassays.  PSA results should be interpreted in light of the total clinical presentation of the patient, including: symptoms, clinical history, data from additional tests, and other appropriate information.
- Serum PSA concentrations should not be interpreted as absolute evidence for the presence or



Name : PANDEY LAXMAN  
 Lab No. : 393945230  
 Ref By : SELF  
 Collected : 8/3/2025 8:12:00AM  
 A/c Status : P  
 Collected at : WALKIN - G B ROAD LAB, THANE WEST  
 Ground Floor, Shop No. 1, 2, 3, Pride Park, Near  
 R-Mall Opp. Lawkim Company, Ghodbunder  
 Road, Thane West, Maharashtra - 400607

Age : 46 Years  
 Gender : Male  
 Reported : 8/3/2025 7:25:05PM  
 Report Status : Final  
 Processed at : SDRL, VIDYAVIHAR



**MediWheel Full Body Health Checkup Male >40/2D ECH  
 PROSTATE SPECIFIC ANTIGEN (PSA)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
-----------	---------	----------------------	--------

absence of prostate cancer.

**Note :** The concentration of PSA in a given specimen, determined with assay from different manufacturers, may not be comparable due to differences in assay methods and reagent specificity.

**Reference:**

- Wallach-s Interpretation of diagnostic tests
- Total PSA Pack insert

Dr Leena Salunkhe  
 DPB  
 HOD

Dr Namrata Raul  
 MD, Biochemistry  
 Consultant Biochemist

Dr Vrushali Shroff  
 MD Pathology  
 Sr. Pathologist

-----End of report-----



**IMPORTANT INSTRUCTIONS**

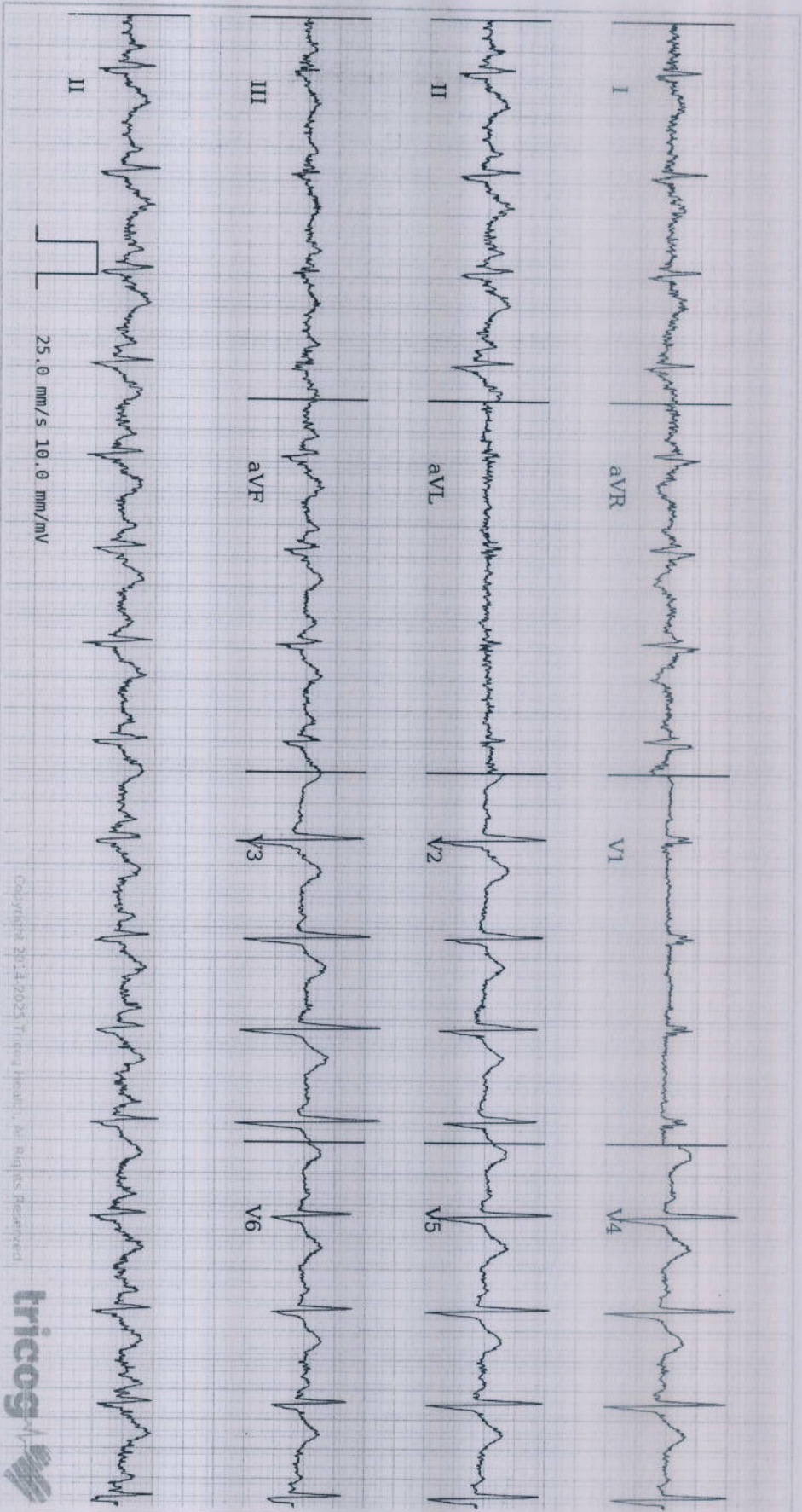
The published test results relate to the submitted specimen. All test results are dependent on the quality of the sample received by the laboratory. Laboratory tests should be clinically correlated by a physician and are merely a tool to help arrive at a diagnosis. Unforeseen circumstances may cause a delay in the delivery of the report. Inconvenience is regretted. Certain tests may require further testing at an additional cost for derivation of exact value. Kindly submit the request within 72 hours post-reporting. The Court/Forum at Mumbai shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of the test(s). Test results are not valid for medico-legal purposes. This computer-generated medical diagnostic report has been verified by a doctor or an authorized medical professional. A physical signature is not required for this report. (#) sample drawn from an external source.

If test results are alarming or unexpected, the client is advised to contact customer care immediately for possible remedial action.  
 Tel: 022-61700000, Email: [customerservice@suburbandiagnosics.com](mailto:customerservice@suburbandiagnosics.com) <<mailto:customerservice@suburbandiagnosics.com>>  
 West Reference Lab, Mumbai, is a CAP (8036028) Accredited laboratory.



Patient Name: FANDEY LAXMAN  
Patient ID: 393945230

Date and Time: 8th Mar 25 9:13 AM



Age 46 NA NA  
years months days

Gender Male

Heart Rate 98bpm

Patient Vitals

BP: NA

Weight: NA

Height: NA

Pulse: NA

Spo2: NA

Resp: NA

Others:

Measurements

QRSD: 94ms

QT: 374ms

QTcB: 477ms

PR: 132ms

P-R-T: 76° 49° 57°

ECG Within Normal Limits: Baseline artifacts, Incomplete Right Bundle Branch Block, Sinus Rhythm. Please correlate clinically.

REPORTED BY

DR SHAILAJA PILLAI  
MBBS, MD Physician  
MD Physician  
49972

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.

CID : 393945230  
Name : Mr. PANDEY LAXMAN  
Age / Sex : 46 Years/Male  
Ref. Dr : self  
Reg. Location : G B Road, Thane West Main Centre  
Reg. Date : 08-Mar-2025  
Reported : 08-Mar-2025 / 13:37

**X-RAY CHEST PA VIEW**

**There is evidence of minimally increased bilateral bronchovascular prominence.**

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The aorta shows normal radiological features.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

**Suggest clinical co-relation.**

-----End of Report-----



**Dr Gauri Varma**  
**Consultant Radiologist**  
**MBBS / DMRE**  
**MMC- 2007/12/4113**

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2025030808135225>

Reg. No. : 393945230	Sex : MALE
Name : MR. LAXMAN PANDEY	Age : 46 YRS
Ref. By : -----	Date :08.03.2025

**USG ABDOMEN AND PELVIS**

**LIVER:** Liver appears normal in size (13.4 cm) and **shows increased echorefectivity**. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

**GALL BLADDER:** Gall bladder is distended and appears normal. Wall thickness is within normal limits. There is no evidence of any calculus. No evidence of pericholecystic fluid collection/fat strandings. No evidence of sludge.

**PORTAL VEIN:** Portal vein is normal. **CBD:** CBD is normal.

**PANCREAS:** Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

**KIDNEYS:** Right kidney measures 9.6 x 5.0 cm. Left kidney measures 10.0 x 4.5 cm. **A 1.2 x 1.2 cm sized cortical simple cyst noted at upper pole calyx.** Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

**SPLEEN:** Spleen is normal in size (12 cm), shape and echotexture. No focal lesion is seen.

**URINARY BLADDER:** Urinary bladder is distended and normal. Wall thickness is within normal limits.

**PROSTATE:** Prostate is normal in size, echotexture and 28 cc in volume. No evidence of any focal lesion. Median lobe does not show significant hypertrophy.

No free fluid or significant lymphadenopathy is seen.

**Gaseous distention of bowel loops. Visualized bowel show normal forward peristalsis movements.**

4000538-5507



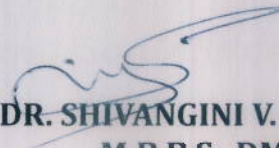
Reg. No. : 393945230	Sex : MALE
Name : MR. LAXMAN PANDEY	Age : 46 YRS
Ref. By : -----	Date :08.03.2025

**IMPRESSION:**

- **GRADE I FATTY INFILTRATION OF LIVER.**
- **LEFT RENAL SIMPLE CYST AS DESCRIBED.**

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further/follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis.

Advice: Clinical co-relation and further imaging evaluation if indicated.

  
**DR. SHIVANGINI V. INGOLE**  
**M.B.B.S., DMRE**  
**(CONSULTANT RADIOLOGIST)**  
**REG NO. 2018/12/6130**

Lab. No. : 393945230	Sex : MALE
Name : MR . LAXMAN PANDEY	Age : 46 YRS
Ref. By : -----	Date : 08.03.2025

**2D ECHOCARDIOGRAPHY**

**M – MODE FINDINGS :**

**LEFT VENTRICLE :**

LVIDD	43.7	mm
LVIDS	29.4	mm
LVEF	61	%
FS	32	%
IVS	9.5	mm
PW	10	mm

**AORTIC VALVE :**

LADd	20	mm
AODd	35.1	mm
ACS	18	mm

Pulmonary valve study : Normal

1. RA.RV.LA.LV. Sizes are :Normal
2. Left ventricular contractility : Normal  
Regional wall motion abnormality : Absent.  
Systolic thickening : Normal
3. Mitral, tricuspid , aortic , pulmonary valves are : Normal  
No significant mitral valve prolapse.
4. Great arteries : Aorta and pulmonary artery are : Normal
5. Inter - artrial and inter - ventricular septum are intact normal.
6. Pulmonary veins , IVC , hepatic veins are normal.
7. No pericardial effusion . No intracardiac clots or vegetation.
8. No evidence of pulmonary hypertension.
9. CD/PWd/CWd studies : 1. Normal Flow and gradient across all the valves.  
2. No shunt / coarctation.  
3. No pulmonary hypertension.

**IMPRESSION :**

- **ALL CHAMBER DIMANSIONS ARE NORMAL.**
- **NO REGIONAL WALL MOTION ABNORMALITY AT REST.**
- **NORMAL LV SYSTOLIC AND DIASTOLIC FUNCTION.LVEF= 61 %**
- **NORMAL RV SYSTOLIC FUNCTION.**
- **NO PULMONARY HYPERTENSION.**
- **ALL VALVES ARE NORMAL.**



**DR. S.C. DEY**  
**M.D, D.M.**  
**(CARDIOLOGIST)**