



26797 091124

Registration ID : 26797

Sample Collection : 09/11/2024 08:41:37

Name : MR. RISHABH VISHWAKARMA

Sample Received : 09/11/2024 08:41:37

Age/Sex : 28 Yrs. / M

Printed : 11/11/2024 16:31:36

Report Released : 09/11/2024 15:42:14

 Ref. By : J M FINANCE  
 SERVICES LTD

Sent By : Arcofemi Healthcare Pvt Ltd

**COMPLETE BLOOD COUNT**

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 14.2	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	: 4.38	10 <sup>6</sup> /μL	3.0-6.0 10 <sup>6</sup> /μL
Hematocrit (PCV) (Calculated)	: 44.0	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 100.5	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: <b>32.4</b>	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 32.3	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 12.20	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 4600	/cumm	4000-11000 /cumm
<b>Neutrophils</b> (Calculated)	: 53	%	40-75 %
<b>Eosinophils Percentage</b> (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 35	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 10	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 150000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 06	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)

\*All Samples Processed At Excellas Clinics Mulund Centre .

\*ESR NOT IN NABL scope.



*Dr. Santosh Khairnar*  
**Dr. Santosh Khairnar**  
 M.D. (Pathologist)  
 Reg. No.-  
 2000/08/2926





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



NABL MELT-00683

  
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Ref. By	: J M FINANCE SERVICES LTD	Report Released	: 11/11/2024 08:54:20
		Sent By	: Arcofemi Healthcare Pvt Ltd

### HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1c-Glycosylated Haemoglobin	: 4.50	%	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)	: 82.45	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 are 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.

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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)	: 89	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: $\geq$ 126 mg/dl
GLUCOSE (SUGAR) PP, (Fluoride Plasma Used)	: 101	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: $\geq$ 200 mg/dl

Method: GOD-POD

Test Done on - Automated Biochemistry Analyzer (EM 200)

\*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 09/11/2024 08:41:37, Received At: 09/11/2024 08:41:37, Reported At: 11/11/2024 12:20:20)



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**BLOOD GROUP**


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

Slide and Tube Agglutination Test

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**LIPID PROFILE**

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 195	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 285	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	35.3-79.5 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 101.00	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 57.0	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 2.7		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 5.3		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.

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**LIVER FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.85	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.33	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.52	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 22.9	IU/L	0-35 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 27.2	IU/L	0-45 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 85.0	IU/L	53-128 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 6.6	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.5	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 2.1	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 2.14		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 30	U/L	0-55 U/L

\*All Samples Processed At Excellas Clinics Mulund Centre .

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*Signature*  
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**BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 21.30	mg/dl	19-45 mg/dl

*Serum, Method: Urease - GLDH*

Blood Urea Nitrogen : 9.95 mg/dl 5-18 mg/dl

*Test Done on - Automated Biochemistry Analyzer (EM 200)**\*All Samples Processed At Excellas Clinics Mulund Centre**(Collected At: 09/11/2024 08:41:37, Received At: 09/11/2024 08:41:37, Reported At: 11/11/2024 12:22:27)***SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.64	mg/dl	0.7-1.3 mg/dl

*Serum, Method: Enzymatic**Test Done on - Automated Biochemistry Analyzer (EM 200).**\*All Samples Processed At Excellas Clinics Mulund Centre**(Collected At: 09/11/2024 08:41:37, Received At: 09/11/2024 08:41:37, Reported At: 11/11/2024 12:22:22)***SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 6.70	mg/dl	3.5-7.2 mg/dl

*Serum, Method: Uricase - POD**Test Done on - Automated Biochemistry Analyzer (EM 200).**(Collected At: 09/11/2024 08:41:37, Received At: 09/11/2024 08:41:37, Reported At: 11/11/2024 12:22:30)*

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**BUN CREAT RATIO (BCR)**

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 15.55		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: 09/11/2024 08:41:37, Received At: 09/11/2024 08:41:37, Reported At: 11/11/2024 12:22:50)

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



  
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Report Released : 11/11/2024 08:54:49

Ref. By : J M FINANCE  
SERVICES LTD

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**THYROID FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.1	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 6.82	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: <b>5.56</b>	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			


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.

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**EXAMINATION OF URINE**

Test	Result	Unit	Biological Ref. Range
<b><u>PHYSICAL EXAMINATION</u></b>			
Quantity	30	ml	
Colour	Pale yellow		
Appearance	Clear		
Reaction (pH)	6.0		4.5 - 8.0
Specific Gravity	1.020		1.010 - 1.030
<b><u>CHEMICAL EXAMINATION</u></b>			
Protein	Absent		Absent
Glucose	Absent		Absent
Ketones Bodies	Absent		Absent
Occult Blood	Absent		Absent
Bilirubin	Absent		Absent
Urobilinogen	Absent		Normal
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Epithelial Cells	1 - 2	/ hpf	
Pus cells	1 - 2	/ hpf	
Red Blood Cells	Absent	/ hpf	
Casts	Absent	/ lpf	Absent / lpf
Crystals	Absent		Absent
<b><u>OTHER FINDINGS</u></b>			
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

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**X RAY CHEST PA VIEW**

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Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

**IMPRESSION:**

**No significant abnormality detected.**



**Dr. Deepak Mishra**

D.N.B. (Radio-

Diagnosis)

Reg. No:

2021/09/7488





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MR. RISHABH VISHWAKARMA. AGE:-28YRS/MALE. R14 CHEST PA 09-Nov-24 09:15 AM

EXCELLAS CLINICS PVT LTD TEL:-022-25695661/71



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**OPHTHALMIC EVALUATION**

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

(Collected At: 09/11/2024 08:41:37, Received At: 09/11/2024 08:41:37, Reported At: 11/11/2024 16:15:30)

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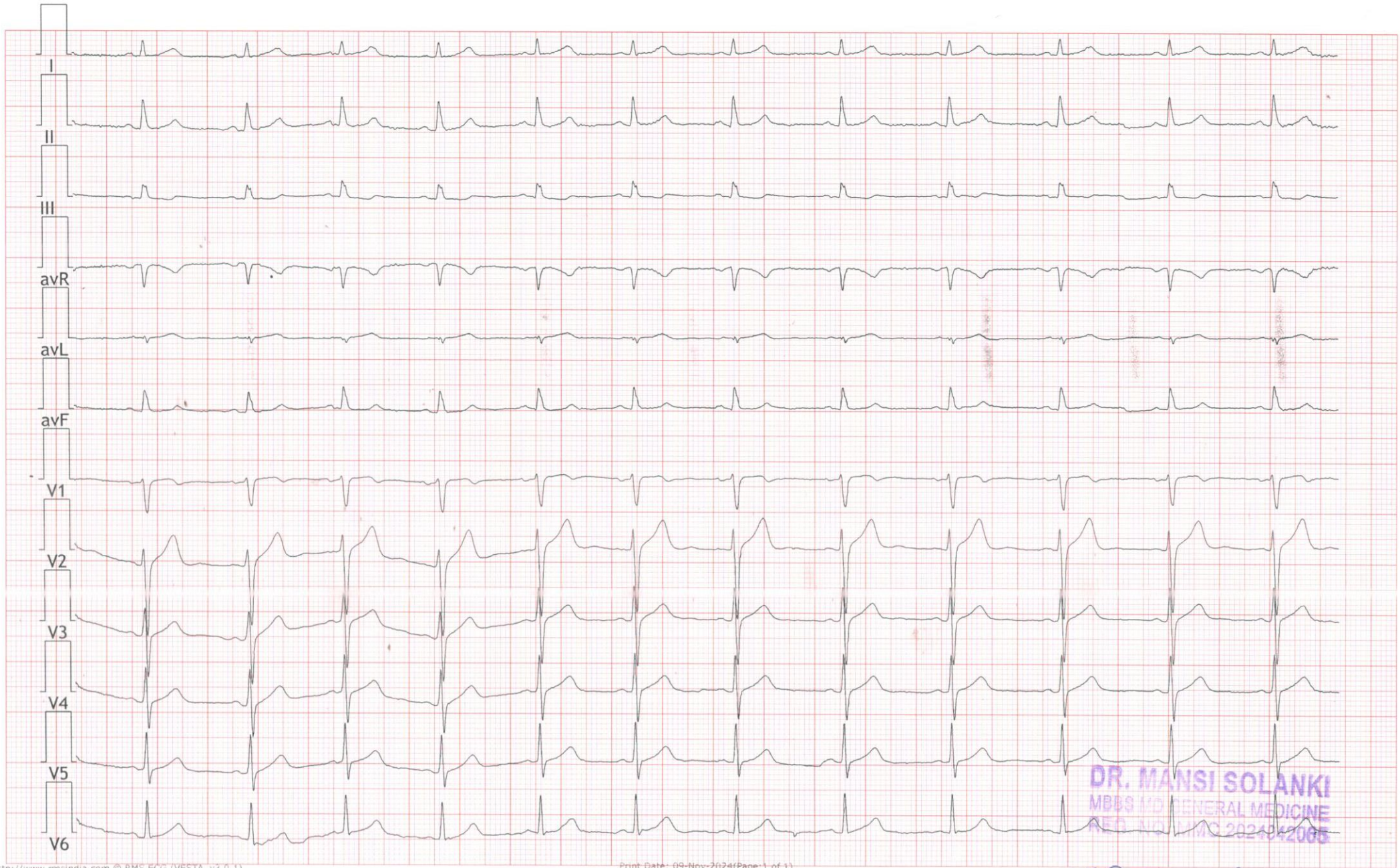
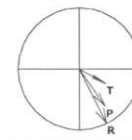


## MEDICAL EXAMINATION REPORT

Name	<del>Mr./ Mrs./ Miss</del>	Rishabh Vishwakarma	
Sex		Male / Female	
Age (yrs.)	28	UHID :	
Date		09 / 11 / 20 24.	Bill No :
Marital Status		Single / Married / Widow / Widower :	
		No. of Children : -	
Present Complaints		nil	
Past Medical History :		nil	
Surgical History :		nil	
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 : nil	
Family History		Father = HT / DM / IHD / Stroke / Any Other Mother = HT / DM / IHD / Stroke / Any Other Siblings = HT / DM / IHD / Stroke / Any Other	
History of Allergies		Drug Allergy Any Other : nil	
History of Medication		For HT / DM / HD / Hypothyroidism Any Other : nil	
On Examination (O/E)		G. E. : nil R. S. : 16/12/24 10 AM NO ABNORMAL C. V. S. : SHO NO MURMURS C. N. S. : nil P/A : nil Any Other Positive Findings : -	

Height	166 / cms	Weight	60 Kgs	BMI	21.81 kg/m <sup>2</sup> .
Pulse (per min.)	82/min	Blood Pressure (mm of Hg)	116/80 mm of Hg		
<b>Gynaecology</b>					
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	<b>EXCELLAS CLINICS PVT. LTD.</b> B-1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Near Santoshi Mata Mandir, Mulund (West), Mumbai - 400080				
Physician Impression	_____				
Examined By :	- Overweight = To Reduce Weight - Underweight = To Increase Weight				





DR. MANSI SOLANKI  
MBBS MD GENERAL MEDICINE  
REG. NO. MCG 2024042005

NSR on the  
correlate clinically