



294 080325

Name : MR. AKSHAY VAIDYA

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd

LAB ID : 294

Age : 43 Yrs. **Sex** : M

Printed : 12/03/2025 11:14

Sample Collection : 08/03/2025 12:47

Sample Received : 08/03/2025 12:47

Report Released : 09/03/2025 12:13

COMPLETE BLOOD COUNT *

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 14.3	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	: 4.44	10 ⁶ /μL	3.0-6.0 10 ⁶ /μL
Hematocrit (PCV) (Calculated)	: 45.4	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 102.3	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 32.2	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 31.5	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 13.90	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 6790	/cumm	4000-11000 /cumm
Neutrophils (Calculated)	: 72	%	40-75 %
Eosinophils Percentage (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 17	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 09	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 297000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 01	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 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:13:48)


Dr. Santosh Khairnar

Reg. No.-2000/08/2926





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




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Report Released : 09/03/2025 12:12

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:

- 1.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.
- 2.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.
- 3.To estimate the eAG from the HbA1c value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- 4.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 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:12:45)

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

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 86	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: \geq 126 mg/dl
Fasting Urine Glucose	: Absent		Absent
GLUCOSE (SUGAR) PP, (Fluoride Plasma Used)	: 102	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: \geq 200 mg/dl
PP Urine Glucose	: Absent		Absent

Method: GOD-POD

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 08/03/2025 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:14:57)


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Sample Collection : 08/03/2025 12:47

Sample Received : 08/03/2025 12:47

Report Released : 09/03/2025 12:12

BLOOD GROUP

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

Slide and Tube Agglutination Test

(Collected At: 08/03/2025 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:15:37)

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




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Report Released : 09/03/2025 12:12

LIPID PROFILE

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 166	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 67	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 44	mg/dl	35.3-79.5 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 108.60	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 13.4	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 2.5		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 3.8		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 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:12:16)

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


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Report Released : 09/03/2025 12:12

LIVER FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.59	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.25	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.34	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 29	IU/L	0-35 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 41	IU/L	0-45 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 59	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>	: 4.2	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 2.4	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.75		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 24	U/L	0-55 U/L

*All Samples Processed At Excellas Clinics Mulund Centre .

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


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Test	Result	Unit	Biological Ref. Range
Urea	: 26.53	mg/dl	19-45 mg/dl

*Serum, Method: Urease - GLDH***Blood Urea Nitrogen** : 12.40 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 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:14:20)***SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.79	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: 08/03/2025 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:08:08)***SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 6.00	mg/dl	3.5-7.2 mg/dl

*Serum, Method: Uricase - POD**Test Done on - Automated Biochemistry Analyzer (EM 200).**(Collected At: 08/03/2025 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:14:26)*
Dr. Santosh Khairnar

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BUN CREAT RATIO (BCR)

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 15.69		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 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:16:02)

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




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Report Released : 09/03/2025 12:12

THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
Total T3 <i>Serum, Method: CLIA</i>	: 1.6	ng/dl	0.70-2.04 ng/dl
Total T4 <i>Serum, Method: CLIA</i>	: 8.80	µg/dl	5.1-14.1 µg/dl
TSH (Thyroid Stimulating Hormone) <i>Serum, Method: CLIA</i>	: 2.31	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 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:12:32)

PROSTATE SPECIFIC ANTIGEN

Test	Result	Unit	Biological Ref. Range
PSA - TOTAL <i>Serum, Method: CLIA</i>	: 0.48	ng/ml	0- 4 ng/ml

NOTE :

Prostate specific antigen is a seminal fluid protein produced by normal and malignant epithelial cells of prostate gland and is recognized as a tumour marker for evaluation of prostate cancer activity.

In normal individuals, S.PSA levels do not exceed 4.0 ng/ml.

S.PSA level is useful in detection of cancer of prostate gland and in detection of recurrence of prostate cancer after radical prostatectomy. Serum PSA levels may also be elevated in conditions like BPH, UTI, Digital rectal examination, Transurethral ultrasonography. Confirmation of prostate cancer can be done by transrectal ultrasonography and prostate biopsy.

(Collected At: 08/03/2025 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:10:59)

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


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Sample Received : 08/03/2025 12:47

Report Released : 09/03/2025 12:15

EXAMINATION OF URINE

Test	Result	Unit	Biological Ref. Range
PHYSICAL EXAMINATION			
Quantity	20	ml	
Colour	Pale yellow		
Appearance	Clear		
Reaction (pH)	6.0		4.5 - 8.0
Specific Gravity	1.005		1.010 - 1.030
CHEMICAL EXAMINATION			
Protein	Absent		Absent
Glucose	Absent		Absent
Ketones Bodies	Absent		Absent
Occult Blood	Absent		Absent
Bilirubin	Absent		Absent
Urobilinogen	Absent		Normal
MICROSCOPIC EXAMINATION			
Epithelial Cells	0 - 1	/ hpf	
Pus cells	1 - 2	/ hpf	
Red Blood Cells	Absent	/ 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 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 09/03/2025 12:15:24)

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


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Report Released : 10/03/2025 13:03

X RAY CHEST PA VIEW

CLINICAL PROFILE: NO COMPLAINTS

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

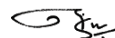
Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

IMPRESSION:

No significant abnormality detected.



Dr. Raj Shah
DMRE , M.B.B.S
REG. NO. 2019/05/3609





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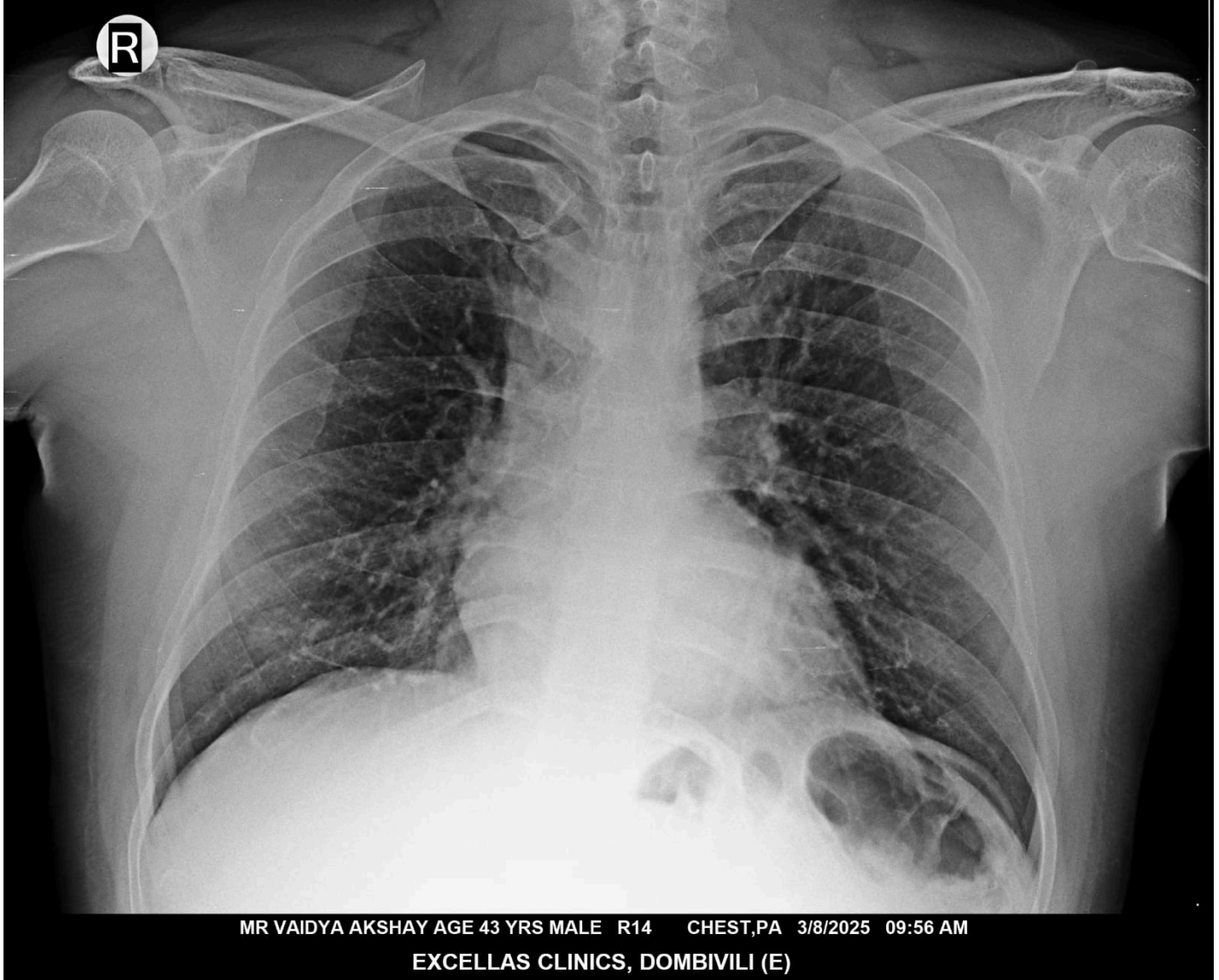
Age : 43 Yrs. Sex : M

Printed : 12/03/2025 11:14

Sample Collection : 08/03/2025 12:47

Sample Received : 08/03/2025 12:47

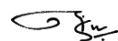
Report Released : 10/03/2025 13:03



(Collected At: 08/03/2025 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 10/03/2025 13:03:17)

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





Dr. Raj Shah
DMRE , M.B.B.S
REG. NO. 2019/05/3609





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USG ABDOMEN & PELVIS - MALE

Liver:- is normal in size(13.3 cm) and **shows raised echotexture**. No focal or diffuse lesion is seen. The portal and hepatic veins are normal. No IHBR dilatation seen.

Gall Bladder:- is well distended. No calculus or mass lesion is seen.
No GB wall thickening or pericholecystic fluid is seen.

Visualised **CBD** is normal.

Pancreas:-is normal in size and reflectivity. No focal lesion seen.

Spleen:- is normal in size (9.9 cm) and reflectivity. No focal lesion is seen.

Kidneys:- Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney – 9.8 x 4.1 cms

Left kidney – 10.0 x 4.3 cms

Urinary Bladder:- is well distended and shows normal wall thickness.
No intraluminal lesion seen.

Prostate:- is normal in size, shape and echotexture.
No focal lesions.

No ascites is seen. No significant lymphadenopathy is seen.

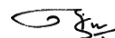
IMPRESSION:

- **Grade I fatty liver.**

Thanks for the Referral

(Collected At: 08/03/2025 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 10/03/2025 09:09:21)

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



Dr. Raj Shah
DMRE , M.B.B.S
REG. NO. 2019/05/3609





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OPHTHALMIC EVALUATION

Examination with glass	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 12:47:35, Received At: 08/03/2025 12:47:35, Reported At: 08/03/2025 16:51:40)

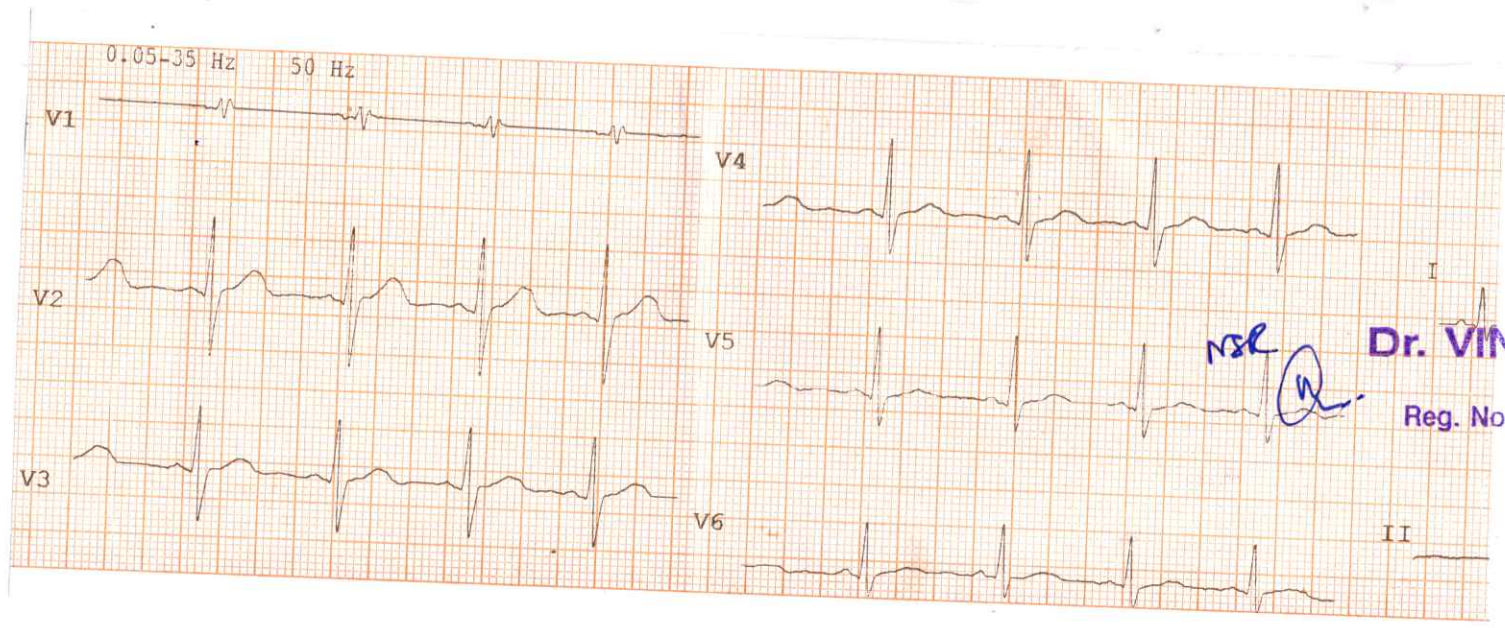
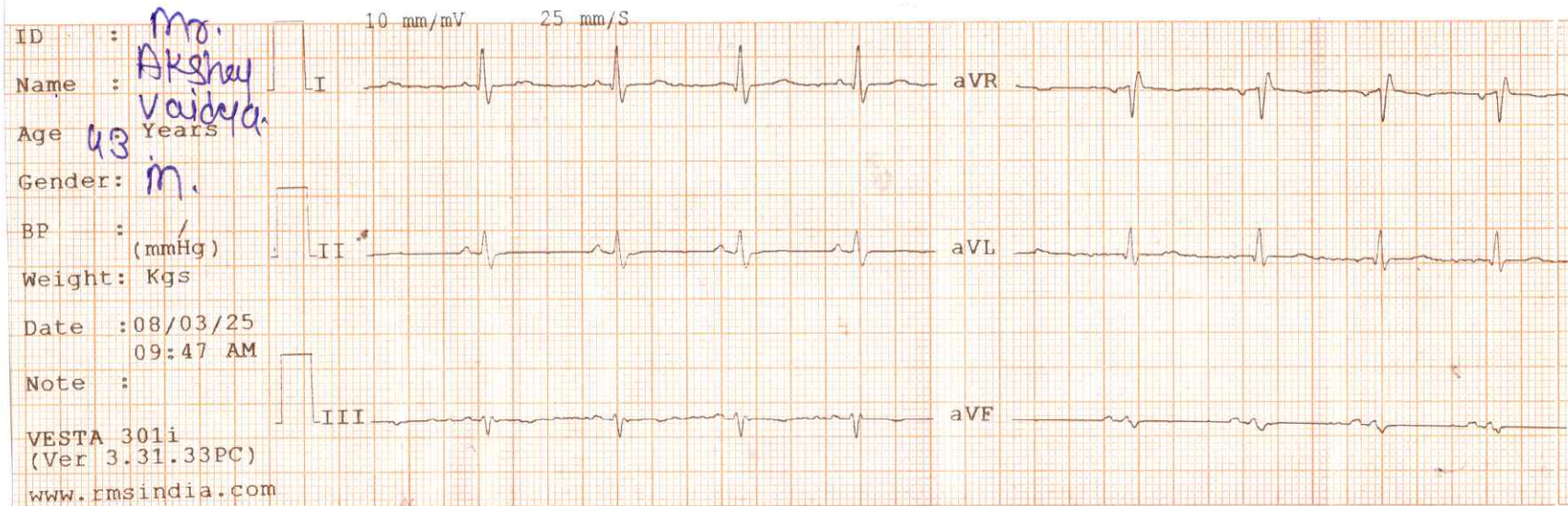
----- End Of Report -----



MEDICAL EXAMINATION REPORT

Name <input checked="" type="checkbox"/> Mr. / <input type="checkbox"/> Mrs. / <input type="checkbox"/> Miss	* akshay vaidya .	
Sex	<input checked="" type="checkbox"/> Male / <input type="checkbox"/> Female	
Age (yrs.)	43	UHID :
Date	8 / 3 / 2025	Bill No :
Marital Status	<input checked="" type="checkbox"/> Single / <input type="checkbox"/> Married / <input type="checkbox"/> Widow / <input type="checkbox"/> Widower : No. of Children :	
Present Complaints	No	
Past Medical History : Surgical History :	No -	
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 / DM / IHD / Stroke / Any Other Mother = HT / DM / IHD / Stroke / Any Other <i>Brest Ca.</i> Siblings = HT / DM / IHD / Stroke / Any Other	
History of Allergies	Drug Allergy <i>No</i> Any Other	
History of Medication	For HT / DM / HD / Hypothyroidism Any Other <i>No</i>	
On Examination (O/E)	G. E. : <i>Fair</i> R. S. : <i>AEBE</i> C. V. S. : <i>S2+</i> C. N. S. : <i>Conc</i> P/A : <i>Soft</i> Any Other Positive Findings :	

Height <u>164</u> / cms	Weight <u>80.9</u> Kgs	BMI <u>30.1</u>
Pulse (per min.) <u>67/mv</u>	Blood Pressure (mm of Hg) <u>120/80</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	



NSR

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