Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:46
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: N/A
UHID/MR NO	: ALDP.0000116115	Received	: N/A
Visit ID	: ALDP0001102324	Reported	: 02/Apr/2023 16:16:50
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CARDIOLOGY-ECG MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

ECG / EKG *

	1. Machnism,	Rhythm	Sinus, Regular	
	2. Atrial Rate		64	/mt
	3. Ventricular	r Rate	64	/mt
	4. P - Wave		Normal	
	5. P R Interva	al	Normal	
	6. Q R S	Axis : R/S Ratio : Configuration :	Normal Normal Normal	
	7. Q T c Inter	val	Normal	
	8. S - T Segm	ent	Normal	
FINAL IMPRE			Normal	

Sinus Rhythm, Sinus Arrhythmia Seen, Short PR Interval. Please correlate clinically



Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

DLCPolymorphs (Neutrophils)76.00%55-70ELECTRONIC IMPEDLymphocytes20.00%25-40ELECTRONIC IMPEDMonocytes2.00%3-5ELECTRONIC IMPEDEosinophils2.00%1-6ELECTRONIC IMPEDBasophils0.00%<1ELECTRONIC IMPEDBasophils0.00%<1ELECTRONIC IMPEDBasophils0.00%<1ELECTRONIC IMPEDESR-Mm for 1st hr.<9Observed18.00Mm for 1st hr.<9PCV (HCT)35.00%40-54Platelet count1.08LACS/cu mm1.5-4.0ELECTRONIC IMPEDPDW (Platelet Distribution width)15.70fL9-17ELECTRONIC IMPEDPLCR (Platelet Large Cell Ratio)61.00%35-60ELECTRONIC IMPEDPCT (Platelet Large Cell Ratio)0.13%0.108-0.282ELECTRONIC IMPEDPCT (Platelet Volume)14.00fL6.5-12.0ELECTRONIC IMPEDRBC Count	Patient Name Age/Gender UHID/MR NO Visit ID Ref Doctor	: Mr.RAHUL AGRWAL-1 : 42 Y 11 M 24 D /M : ALDP.0000116115 : ALDP0001102324 : Dr.Mediwheel - Arcof		Registered O Collected Received Reported . Status	n : 02/Apr/2023 09 : 02/Apr/2023 09 : 02/Apr/2023 10 : 02/Apr/2023 18 : Final Report	9:56:26 0:23:58
Test NameResultUnitBio. Ref. IntervalMethodBlood Group(ABO & Rh typing) * , BloodBlood GroupBRh (Anti-D)POSITIVEComplete Blood Count (CBC) * , Whole BloodHaemoglobin12.50g/dl1 Day-14.5-22.5 g/dl1 Wk- 13.5 19.5 g/dl2 WKPC)7, 800.008, 8, 8, 9, 9, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10						
Blood Group Rh (Anti-D) B POSITIVE Complete Blood Count (CBC) * , Whole Blood Haemoglobin 12.50 g/dl 1 Day- 14.5-22.5 g/dl 1 Wk. 13.5-19.5 g/dl 1 Mo. 10.0.18.0 g/dl 3-6 Mo. 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 1-2-18 Yr 13.0-16.0 g/dl TLC (WBC) 7,800.00 /Cu mm 4000-10000 ELECTRONIC IMPED Female- 12.0-15.5 g/dl DLC 7,800.00 /Cu mm 4000-10000 ELECTRONIC IMPED ECTRONIC IMPED 2.00 Polymorphs (Neutrophils) 76.00 % 55-70 ELECTRONIC IMPED ECTRONIC IMPED Ecsinophils Monocytes 2.00 % 3-5 ELECTRONIC IMPED ECTRONIC IMPED Ecsinophils ELECTRONIC IMPED ECTRONIC IMPED Ecsinophils Observed 18.00 Mm for 1st hr. <9 CV (HCT) 35.00 % 40-54 Platelet Count 1.08 LACS/cu mm 1.5-4.0 Platelet Count 1.08 LACS/cu mm 1.5-4.0 PUC (Platelet Distribution width) 15.70 fL 9-17 PUC (Platelet Distribution width) 15.70 fL 9-17 PUC (Platelet Hematocrit) 0.13 % 0.108-0.28	Test Name	WEDIW				Method
Blood Group Rh (Anti-D) B POSITIVE Complete Blood Count (CBC) * , Whole Blood Haemoglobin 12.50 g/dl 1 Day- 14.5-22.5 g/dl 1 Wk. 13.5-19.5 g/dl 1 Mo. 10.0.18.0 g/dl 3-6 Mo. 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 1-2-18 Yr 13.0-16.0 g/dl TLC (WBC) 7,800.00 /Cu mm 4000-10000 ELECTRONIC IMPED Polymorphs (Neutrophils) TLC (WBC) 7,800.00 /Cu mm 4000-10000 ELECTRONIC IMPED EDE Polymorphs (Neutrophils) 76.00 % 55-70 ELECTRONIC IMPED EDE Monocytes 2.00 % 3-5 ELECTRONIC IMPED EDS Monocytes 2.00 % 3-5 ELECTRONIC IMPED EDS Doserved 18.00 Mm for 1st hr. < 9 PCV (HCT) 35.00 % 40-54 Platelet Count 1.08 LACS/cu mm 1.5-4.0 ELECTRONIC IMPED IMPEDANCE//MICR PDW (Platelet Distribution width) 15.70 fL 9-17 ELECTRONIC IMPED IMPEDANCE//MICR PD-LCR (Platelet Large Cell Ratio) 61.00 % 35-60 ELECTRONIC IMPED IMPEDANCE//MICR PD-LCR (Platelet Hematocrit) 0.13 % 0.108-0.282 ELECTRONIC IMPED IMPEDRICE IMPEDRICE Volume)	Blood Group (A	BO & Rh typing) * , Blog	Dd			
Rh (Anti-D) POSITIVE Complete Blood Count (CBC)*, Whole Blood Haemoglobin 12.50 g/dl 1 Day-14.5-22.5 g/dl 1 Wk-13.5-19.5 g/dl Haemoglobin 12.50 g/dl 1 Wk-13.5-19.5 g/dl 1 Wk-13.5-19.5 g/dl S-6 Mo - 9.5-13.5 g/dl -5.6 Yr-11.5-15.5 g/dl -5.6 Yr-11.5-15.5 g/dl -5.6 Yr-11.5-15.5 g/dl G-12 Yr-11.5-15.5 g/dl -5.7 Yr-11.5-15.5 g/dl -5.7 Yr-11.5-15.5 g/dl -5.7 Yr-11.5-15.5 g/dl TLC (WBC) 7.800.00 /Curm 4000-1000 ELECTRONIC IMPED DL 12.18 Yr-13.5-17.5 g/dl -5.7 Yr-11.5-15.5 g/dl -5.7 Yr-11.5-15.5 g/dl Polymorphs (Neutrophils) 76.00 % 55-70 ELECTRONIC IMPED DDC 2.00 % 3-5 ELECTRONIC IMPED Monocytes 2.00 % 3-5 ELECTRONIC IMPED Monocytes 2.00 % 3-5 ELECTRONIC IMPED Basophils 0.00 % 1-6 ELECTRONIC IMPED Basophils 0.00 % 1-6 ELECTRONIC IMPED Basophils 0.00 % 1-6 ELECTRONIC IMPED </td <td>• •</td> <td>JI J, 1</td> <td></td> <td></td> <td></td> <td></td>	• •	JI J, 1				
Haemoglobin 12.50 g/dl 1 Day-14.5-22.5 g/dl 1 Wk-13.5-19.5 g/dl 1 Wk-13.5-19.5 g/dl 1 Mo-10.0.18.0 g/dl 1 Mo-10.0.18.0 g/dl 1 Mo-10.0.18.0 g/dl 0.5-2 Yr-10.5-13.5 g/dl 0.5-2 Yr-10.5-13.5 g/dl 2-6 Yr-11.5-15.5 g/dl 2-6 Yr-11.5-15.5 g/dl 2-6 Yr-11.5-15.5 g/dl 2-6 Yr-11.5-15.5 g/dl 2-6 Yr-11.5-15.5 g/dl 1 Z-18 Yr 13.0-16.0 g/dl Male-13.5-17.5 g/dl Female-12.0-15.5 g/dl 1 Z-18 Yr 13.0-16.0 g/dl Male-13.5-17.5 g/dl Female-12.0-15.5 g/dl 1 Z-18 Yr 13.0-16.0 g/dl DLC 7,800.00 % 55-70 ELECTRONIC IMPED Polymorphs (Neutrophils) 76.00 % 55-70 ELECTRONIC IMPED Lymphocytes 20.00 % 3-5 ELECTRONIC IMPED Monocytes 2.00 % 3-5 ELECTRONIC IMPED Eosinophils 2.00 % 3-5 ELECTRONIC IMPED Basophils 0.00 % 40-54 ELECTRONIC IMPED Esr 18.00 Mm for 1st hr. <9	•					
Haemoglobin 12.50 g/dl 1 Day-14.5-22.5 g/dl 1 Wk-13.5-19.5 g/dl 1 Wk-13.5-19.5 g/dl 1 Mo-10.0.18.0 g/dl 1 Mo-10.0.18.0 g/dl 1 Mo-10.0.18.0 g/dl 0.5-2 Yr-10.5-13.5 g/dl 0.5-2 Yr-10.5-13.5 g/dl 2-6 Yr-11.5-15.5 g/dl 2-6 Yr-11.5-15.5 g/dl 2-6 Yr-11.5-15.5 g/dl 2-6 Yr-11.5-15.5 g/dl 2-6 Yr-11.5-15.5 g/dl 1 Z-18 Yr 13.0-16.0 g/dl Male-13.5-17.5 g/dl Female-12.0-15.5 g/dl 1 Z-18 Yr 13.0-16.0 g/dl Male-13.5-17.5 g/dl Female-12.0-15.5 g/dl 1 Z-18 Yr 13.0-16.0 g/dl DLC 7,800.00 % 55-70 ELECTRONIC IMPED Polymorphs (Neutrophils) 76.00 % 55-70 ELECTRONIC IMPED Lymphocytes 20.00 % 3-5 ELECTRONIC IMPED Monocytes 2.00 % 3-5 ELECTRONIC IMPED Eosinophils 2.00 % 3-5 ELECTRONIC IMPED Basophils 0.00 % 40-54 ELECTRONIC IMPED Esr 18.00 Mm for 1st hr. <9	Complete Blood	d Count (CBC) * . Whole	Blood			
TLC (WBC) 7,800.00 /Cu mm 4000-10000 ELECTRONIC IMPED DLC Polymorphs (Neutrophils) 76.00 % 55-70 ELECTRONIC IMPED Lymphocytes 20.00 % 25-40 ELECTRONIC IMPED Monocytes 2.00 % 3-5 ELECTRONIC IMPED Basophils 2.00 % 3-5 ELECTRONIC IMPED Basophils 0.00 % <1-6 ELECTRONIC IMPED Basophils 0.00 % <1 ELECTRONIC IMPED Basophils 0.00 % 40-54 PI Platelet count 1.08 LACS/cu mm 1.5-4.0 ELECTRONIC IMPED PDW (Platelet Large Cell Ratio) 61.00 % 35-60 ELECTRONIC IMPED P-LCR (Platelet Large Cell Ratio) 61.00 %				g/dl	1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl	
Polymorphs (Neutrophils)76.00%55-70ELECTRONIC IMPEDLymphocytes20.00%25-40ELECTRONIC IMPEDMonocytes2.00%3-5ELECTRONIC IMPEDEosinophils2.00%1-6ELECTRONIC IMPEDBasophils0.00%<1			7,800.00	/Cu mm	-	ELECTRONIC IMPEDANCE
Lymphocytes20.00%25-40ELECTRONIC IMPETMonocytes2.00%3-5ELECTRONIC IMPETEosinophils2.00%1-6ELECTRONIC IMPETBasophils0.00%< 1	Polymorphs (Ne	utrophils)	76.00	%	55-70	ELECTRONIC IMPEDANCE
Monocytes2.00%3-5ELECTRONIC IMPETEosinophils2.00%1-6ELECTRONIC IMPETBasophils0.00%<1	• •	• •	20.00	%	25-40	ELECTRONIC IMPEDANCE
Eosinophils2.00%1-6ELECTRONIC IMPERBasophils0.00%<1			2.00	%	3-5	ELECTRONIC IMPEDANCE
Basophils0.00%< 1ELECTRONIC IMPERESR018.00Mm for 1st hr.Observed18.00Mm for 1st hr. < 9	Eosinophils		2.00	%	1-6	ELECTRONIC IMPEDANCE
Corrected PCV (HCT)-Mm for 1st hr. < 9PCV (HCT)35.00%40-54Platelet count1.08LACS/cu mm1.5-4.0ELECTRONIC IMPEDANCE/MICRPDW (Platelet Distribution width)15.70fL9-17ELECTRONIC IMPED P-LCR (Platelet Large Cell Ratio)61.00%35-60ELECTRONIC IMPED ELECTRONIC IMPEDPCT (Platelet Hematocrit)0.13%0.108-0.282ELECTRONIC IMPED ELECTRONIC IMPEDMPV (Mean Platelet Volume)14.00fL6.5-12.0ELECTRONIC IMPED ELECTRONIC IMPEDRBC Count	•		0.00	%	< 1	ELECTRONIC IMPEDANCE
PCV (HCT)35.00%40-54Platelet count1.08LACS/cu mm1.5-4.0ELECTRONIC IMPEDANCE/MICRPDW (Platelet Distribution width)15.70fL9-17ELECTRONIC IMPED IMPEDANCE/MICRPDW (Platelet Large Cell Ratio)61.00%35-60ELECTRONIC IMPED ELECTRONIC IMPED PCT (Platelet Hematocrit)0.13%0.108-0.282ELECTRONIC IMPED ELECTRONIC IMPED ELECTRONIC IMPED RBC Count	Observed		18.00	Mm for 1st hr.		
Platelet count1.08LACS/cu mm1.5-4.0ELECTRONIC IMPEDANCE/MICRPDW (Platelet Distribution width)15.70fL9-17ELECTRONIC IMPEDP-LCR (Platelet Large Cell Ratio)61.00%35-60ELECTRONIC IMPEDPCT (Platelet Hematocrit)0.13%0.108-0.282ELECTRONIC IMPEDMPV (Mean Platelet Volume)14.00fL6.5-12.0ELECTRONIC IMPEDRBC Count	Corrected		-	Mm for 1st hr.	< 9	
PDW (Platelet Distribution width)15.70fL9-17ELECTRONIC IMPEDP-LCR (Platelet Large Cell Ratio) 61.00 %35-60ELECTRONIC IMPEDPCT (Platelet Hematocrit)0.13%0.108-0.282ELECTRONIC IMPEDMPV (Mean Platelet Volume) 14.00 fL6.5-12.0ELECTRONIC IMPED RBC Count			35.00	%	40-54	
P-LCR (Platelet Large Cell Ratio)61.00%35-60ELECTRONIC IMPERPCT (Platelet Hematocrit)0.13%0.108-0.282ELECTRONIC IMPERMPV (Mean Platelet Volume)14.00fL6.5-12.0ELECTRONIC IMPERRBC Count </td <td>Platelet Count</td> <td></td> <td>1.08</td> <td>LACS/cu mm</td> <td>1.5-4.0</td> <td>ELECTRONIC IMPEDANCE/MICROSCOPI</td>	Platelet Count		1.08	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPI
PCT (Platelet Hematocrit)0.13%0.108-0.282ELECTRONIC IMPERMPV (Mean Platelet Volume)14.00fL6.5-12.0ELECTRONIC IMPERRBC Count	PDW (Platelet Di	istribution width)	15.70	fL	9-17	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)14.00fL6.5-12.0ELECTRONIC IMPERRBC Count	P-LCR (Platelet La	arge Cell Ratio)	61.00	%	35-60	ELECTRONIC IMPEDANCE
RBC Count	PCT (Platelet Her	matocrit)	0.13	%	0.108-0.282	ELECTRONIC IMPEDANCE
RBC Count6.07Mill./cu mm4.2-5.5ELECTRONIC IMPER		elet Volume)	14.00	fL	6.5-12.0	ELECTRONIC IMPEDANCE
	RBC Count		6.07	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:43
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 09:56:26
UHID/MR NO	: ALDP.0000116115	Received	: 02/Apr/2023 10:23:58
Visit ID	: ALDP0001102324	Reported	: 02/Apr/2023 18:44:02
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	59.20	fl	80-100	CALCULATED PARAMETER
MCH	20.60	pg	28-35	CALCULATED PARAMETER
MCHC	34.90	%	30-38	CALCULATED PARAMETER
RDW-CV	16.50	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	46.20	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	5,928.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	156.00	/cu mm	40-440	

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Dr. Akanksha Singh (MD Pathology)

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

DEPARTMENT OF BIOCHEMISTRY				
Ref Doctor: Dr.Mediwheel - Arcofemi Health Care Ltd.Status: Final Report				
Visit ID	: ALDP0001102324	Reported	: 02/Apr/2023 18:13:07	
UHID/MR NO	: ALDP.0000116115	Received	: 02/Apr/2023 10:23:58	
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 09:56:25	
Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:44	

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE FASTING * , Plasma				
Glucose Fasting	100.40	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.c) I.G.T = Impared Glucose Tolerance.

Glucose PP * Sample:Plasma After Meal	115.10	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.

b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.

c) I.G.T = Impared Glucose Tolerance.

Hank

Dr. Akanksha Singh (MD Pathology)

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:45
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 09:56:26
UHID/MR NO	: ALDP.0000116115	Received	: 03/Apr/2023 11:09:08
Visit ID	: ALDP0001102324	Reported	: 03/Apr/2023 12:12:47
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLYCOSYLATED HAEMOGLOBIN (HBA1C) ** , E	DTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	5.90	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	41.00	mmol/mol/IFC	2	
Estimated Average Glucose (eAG)	122	mg/dl		

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc. **Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

<u>Clinical Implications:</u>

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:45
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 09:56:26
UHID/MR NO	: ALDP.0000116115	Received	: 03/Apr/2023 11:09:08
Visit ID	: ALDP0001102324	Reported	: 03/Apr/2023 12:12:47
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Metho	1
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c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

Dr. Anupam Singh (MBBS MD Pathology)

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

SGOT / Aspartate Aminotransferase (AST)30.20U/L< 35					
UHI DME NO :: ALDP 0000116115 Received :: 02/Apr/2023 10:23:8 Visit ID :: ALDP 00001103234 Reported :: 02/Apr/2023 10:216:17 Ref Doctor :: Dr.Mediwheel - Arcofemi Health Care Ltd Status :: Pinal Report DEPARTMENT OF BIOCHEMISTRY DEPARTMENT OF BIOCHEMISTRY MEDIWHELL BANK OF BARODA MALE ABOVE 40 YRS Test Name Result Unit Bio. Ref. Interval Method BUN (Blood Urea Nitrogen)* 9.39 mg/dL 7.0-23.0 CALCULATED Sample: Serum 1.20 mg/dL Serum 0.7-1.3 MODIFIED JAFFES Sample: Serum 1.20 mg/dL 3.4-7.0 URICASE Sample: Serum		32	-		
Visit ID : ALDP0001102324 Reported : 02/Apr/2023 12:16:17 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd Status : Final Report IDEPARTMENT OF BIOCHEMISTRY DEPARTMENT OF BIOCHEMISTRY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS Test Name Result Unit Bio. Ref. Interval Method BUN (Blood Urea Nitrogen)* 9.39 mg/dL 7.0-23.0 CALCULATED Sample:Serum 1.20 mg/dL Serum 0.7-13 MODIFIED JAFFES Sample:Serum 6.31 mg/dL 3.4-7.0 URICASE LIFT (WITH GAMMA GT)* , Serum SGOT / Aspartate Aminotransferase (AST) 30.20 U/L < 35 IFCC WITHOUT PSP Garma G(G) 6.50 gm/dL 1.1-50 OPTIHOUT PSP Garma G(G) 6.50 gm/dL 1.1-2.0 OPTIHOUT PSP Garma G(G) 1.3-50 U/L <1.50 OPTIHOUT PSP Garma G(G) 0.2.80 U/L <1.50 OPTIHOUT PSP Garma G(3				
In Mediwheel - Arcoformi Health Care Ltd. Status : Final Report DEPARTMENT OF BIOCHEMISTRY MEDIWHELL BANK OF BARODA MALE ABOVE 40 YRS Test Name Result Unit Bio. Ref. Interval Method BUN (Blood Urea Nitrogen)* 9.39 mg/dL 7.0-23.0 CALCULATED Sample: Samm 1.20 mg/dL Scrum 0.7-1.3 Spot Urine-Male-20- 27 Female-20-320 MODIFIED JAFFES Urit Acid * 6.31 mg/dL 3.4-7.0 URICASE Somple: Samm 6.31 mg/dL <40					
DEPARTMENT OF BIOCHEMISTRY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS Test Name Result Unit Bio. Ref. Interval Method BUN (Blood Urea Nitrogen)* 9.39 mg/cl. 7.0-23.0 CALCULATED Sample:Serum 1.20 mg/cl. 7.0-23.0 CALCULATED Sample:Serum 1.20 mg/cl. Scrum 0.7-1.3 Spot Urine.Male-20- 275 Female-20-320 MODIFIED JAFFES Uric Acid * 6.31 mg/cl. 3.4-7.0 URICASE SGOT / Aspartato Aminotransferase (AST) 30.20 U/L < 35 IFCC WITHOUT PSP SGEPT / Alanine Aminotransferase (AST) 62.80 U/L < 40 IFCC WITHOUT PSP SGEPT / Alanine Aminotransferase (AST) 63.50 U/L 11-50 OPTIMUED SPAZING Protein 6.50 gm/dl 6.2-8.0 BIRUET Aburnin 4.00 gm/dl 3-8-5.4 B.C.G. Globulin 2.50 gm/dl 6.2-8.0 BIRUET Alkaline Prosphatase (Total) 1.37.40 U/L 42.0-16.50 IFCC WITHOUT PSP Billrubin (indirect) 0.60 mg/dl 0.3-1.2 JEND		Health Care Ltd.	-		
HODIVHEEL BANK OF BARODA MALE JUVE 40 YRSTest NameResultUnitBio. Ref. IntervalMethodBUN (Blood Urea Nitrogen)*9.39mg/dL7.0-23.0CALCULATEDSample: Serum1.20mg/dlSerum 0.7-1.3 Spot Urine-Male-20- 275 Female-20-320MODIFIED JAFFES Spot Urine-Male-20- 275 Female-20-320MODIFIED JAFFES Spot Urine-Male-20- 275 Female-20-320MODIFIED JAFFES Spot Urine-Male-20- 275 Female-20-320MODIFIED JAFFES Spot Urine-Male-20- 275 Female-20-320MODIFIED JAFFES Spot Urine-Male-20- 275 Female-20-320Uric Acid *6.31mg/dl3.4-7.0URICASESGOT / Apartate Aminotransferase (ALT)62.80U/L< 40IFCC WITHOUT PSP IFCC WITHOUT PSP SGPT / Alanine Aminotransferase (ALT)62.80IU/L11-50OPTIMIZED SZAZING Protein Albumin4.00gm/dl3.8-5.4B.C.G.Albumin4.00gm/dl3.8-5.4B.C.G.Galualite Direc MIRUETAlculatED 1.1-2.0CALCULATED ALCULATEDAlbumin4.00gm/dl3.8-5.4B.C.G.IEC WITHOUT PSPBilirubin (Total)0.90mg/dl<0.30JENDRASSIK & GROFBilirubin (Indirect)0.60mg/dl<0.30JENDRASSIK & GROFBilirubin (Indirect)0.60mg/dl<0.8JENDRASSIK & GROFBilirubin (Indirect)0.60mg/dl<0.30JENDRASSIK & GROFBilirubin (Indirect)0.60mg/dl<0.30JENDRASSIK & GROFDID Cholesterol (Total) <th></th> <th></th> <th></th> <th>-</th> <th></th>				-	
BUN (Blood Urea Nitrogen)* 9.39 mg/dL 7.0-23.0 CALCULATED Sample.Serum 1.20 mg/dl Serum 0.7-1.3 Spot Urine-Male-20- 275 Fernale-20-320 MODIFIED JAFFES Sample.Serum 6.31 mg/dl 3.4-7.0 URICASE Uric Acid * Sample.Serum 6.31 mg/dl 3.4-7.0 URICASE LFT (WITH GAMMA GT) * , Serum 5001 //L <35 IFCC WITHOUT PSP Gamma GT (GGT) 63.50 U/L <35 IFCC WITHOUT PSP Gamma GT (GGT) 65.50 gm/dl 8.3-5.4 B.C.G. Protoin 6.50 gm/dl 3.8-5.4 B.C.G. GIOULATED SALINED Albumin 4.00 gm/dl 3.8-5.4 B.C.G. GIOULATED SALINED Albumin 2.50 gm/dl 4.2-8.0 IRUET BIRUET Albumin 1.60 1.1-2.0 CALCULATED ACMULATED Albumin 0.90 mg/dl 0.3-1.2 IENDRASSIK & GROF Billrubin (Direct) 0.30 mg/dl -0.30 IENDRASSIK & GROF <td< th=""><th></th><th></th><th></th><th></th><th></th></td<>					
Sample:Serum 1.20 mg/dl Serum 0.7-1.3 Spot Ufine-Male: 20: 275 Female:20-320 MODIFIED JAFFES Simple:Serum 6.31 mg/dl 3.4-7.0 URICASE Uric Acid * Sample:Serum 6.31 mg/dl 3.4-7.0 URICASE LFT (WITH GAMMA GT) * , Serum 500 1/ Aspartate Aminotransferase (AST) 30.20 U/L < 35 IFCC WITHOUT PSP SGOT / Aspartate Aminotransferase (ALT) 62.80 U/L < 40 IFCC WITHOUT PSP Gamma GT (GGT) 63.50 U/L < 40 IFCC WITHOUT PSP Protein 6.50 gm/dl 6.2-8.0 BIRUET Albumin 4.00 gm/dl 3.8-5.4 B.C.G. Globulin 2.50 gm/dl 1.8-3.6 CALCULATED Alkaline Phosphatase (Total) 137.40 U/L 42.0-165.0 IFCC METHOD Billrubin (Total) 0.90 mg/dl 0.30 JENDRASSIK & GROF Billrubin (Indirect) 0.60 mg/dl <0.8 JENDRASSIK & GROF Billrubin (Indirect) 0.60 mg/dl <0.8 JENDRASSIK & GROF Billrubin (Indirect) 181.	Test Name	Result	Unit	Bio. Ref. Interval	Method
Sample:Serum 1.20 mg/dl Serum 0.7-1.3 Spot Ufine-Male: 20: 275 Female:20-320 MODIFIED JAFFES Simple:Serum 6.31 mg/dl 3.4-7.0 URICASE Uric Acid * Sample:Serum 6.31 mg/dl 3.4-7.0 URICASE LFT (WITH GAMMA GT) * , Serum 500 1/ Aspartate Aminotransferase (AST) 30.20 U/L < 35					
Sample:Serum Spot Urine-Male- 20- 275 Female-20-320 Uric Acid * Sample:Serum 6.31 mg/dl 3.4-7.0 URICASE LFT (WTH GAMMA GT) * , Serum SOOT / Aspartate Aminotransferase (AST) 30.20 U/L < 35		9.39	mg/dL	7.0-23.0	CALCULATED
Sample: Serum LFT (WITH GAMIMA GT) * , Serum SGOT / Aspartate Aminotransferase (ALT) 30.20 U/L < 35		1.20	mg/dl	Spot Urine-Male- 20- 275	MODIFIED JAFFES
SGOT / Aspartate Aminotransferase (AST) 30.20 U/L < 35 IFCC WITHOUT PSP SGPT / Alanine Aminotransferase (ALT) 62.80 U/L < 40		6.31	mg/dl	3.4-7.0	URICASE
SGPT / Alanine Aminotransferase (ALT) 62.80 U/L < 40 IFCC WITHOUT P5P Gamma GT (GGT) 63.50 IU/L 11-50 OPTIMIZED SZAZING Protein 6.50 gm/dl 6.2-8.0 BIRUET Albumin 4.00 gm/dl 3.8-5.4 B.C.G. Globulin 2.50 gm/dl 1.8-3.6 CALCULATED Ais Ratio 1.60 1.1-2.0 CALCULATED Aikaline Phosphatase (Total) 137.40 U/L 42.0-165.0 IFCC METHOD Bilirubin (Total) 0.90 mg/dl 0.3-1.2 JENDRASSIK & GROF Bilirubin (Indirect) 0.60 mg/dl <0.30	LFT (WITH GAMMA GT) * , Serum				
Gamma GT (GGT) 63.50 IU/L 11-50 OPTIMIZED SZAZING Protein 6.50 gm/dl 6.2-8.0 BIRUET Albumin 4.00 gm/dl 3.8-5.4 B.C.G. Globulin 2.50 gm/dl 1.8-3.6 CALCULATED A:G Ratio 1.60 1.1-2.0 CALCULATED Aikaline Phosphatase (Total) 137.40 U/L 42.0-165.0 IFCC METHOD Bilirubin (Total) 0.90 mg/dl 0.31.2 JENDRASSIK & GROF Bilirubin (Indirect) 0.30 mg/dl <0.30	SGOT / Aspartate Aminotransferase (AST)	30.20	U/L	< 35	IFCC WITHOUT P5P
Protein 6.50 gm/di 6.2-8.0 BIRUET Albumin 4.00 gm/di 3.8-5.4 B.C.G. Globulin 2.50 gm/di 1.8-3.6 CALCULATED A'G Ratio 1.60 1.1-2.0 CALCULATED Alkaline Phosphatase (Total) 137.40 U/L 42.0-165.0 IFCC METHOD Bilirubin (Total) 0.90 mg/di 0.3-1.2 JENDRASSIK & GROF Bilirubin (Direct) 0.30 mg/di < 0.30	SGPT / Alanine Aminotransferase (ALT)	62.80	U/L	< 40	IFCC WITHOUT P5P
Albumin 4.00 gm/dl 3.8-5.4 B.C.G. Globulin 2.50 gm/dl 1.8-3.6 CALCULATED A:G Ratio 1.60 1.1-2.0 CALCULATED Alkaline Phosphatase (Total) 137.40 U/L 42.0-165.0 IFCC METHOD Bilirubin (Total) 0.90 mg/dl 0.3-1.2 JENDRASSIK & GROF Bilirubin (Indirect) 0.30 mg/dl <0.30	Gamma GT (GGT)		IU/L		OPTIMIZED SZAZING
Globulin2.50gm/dl1.8-3.6CALCULATEDA:G Ratio1.601.1-2.0CALCULATEDAlkaline Phosphatase (Total)137.40U/L42.0-165.0IFCC METHODBilirubin (Total)0.90mg/dl0.3-1.2JENDRASSIK & GROFBilirubin (Direct)0.30mg/dl< 0.30			0		
A:G Ratio1.601.1-2.0CALCULATEDAlkaline Phosphatase (Total)137.40U/L42.0-165.0IFCC METHODBilirubin (Total)0.90mg/dl0.3-1.2JENDRASSIK & GROFBilirubin (Direct)0.30mg/dl< 0.30			0		
Alkaline Phosphatase (Total)137.40U/L42.0-165.0IFCC METHODBilirubin (Total)0.90mg/dl0.3-1.2JENDRASSIK & GROFBilirubin (Direct)0.30mg/dl< 0.30			gm/dl		
Bilirubin (Total)0.90mg/dl0.3-1.2JENDRASSIK & GROFBilirubin (Direct)0.30mg/dl< 0.30					
Bilirubin (Direct)0.30mg/dl< 0.30JENDRASSIK & GROFBilirubin (Indirect)0.60mg/dl< 0.8	-				
Bilirubin (Indirect) 0.60 mg/dl < 0.8			-		
Result Rechecked LIPID PROFILE (MINI) * , Serum Cholesterol (Total) 181.00 mg/dl <200 Desirable cHOD-PAP			-		
LIPID PROFILE (MINI) * , Serum Cholesterol (Total) 181.00 mg/dl <200 Desirable CHOD-PAP 200-239 Borderline High >240 High HDL Cholesterol (Good Cholesterol) 47.90 mg/dl 30-70 DIRECT ENZYMATIC LDL Cholesterol (Bad Cholesterol) 90 mg/dl <100 Optimal CALCULATED 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High >190 Very High >190 Very High	Bilirubin (Indirect)	0.60	mg/dl	< 0.8	JENDRASSIK & GROF
Cholesterol (Total)181.00mg/dl<200 Desirable 200-239 Borderline High > 240 HighCHOD-PAP 200-239 Borderline High > 240 HighHDL Cholesterol (Good Cholesterol)47.90mg/dl30-70DIRECT ENZYMATICLDL Cholesterol (Bad Cholesterol)90mg/dl<100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very HighCALCULATED High > 190 Very HighVLDL41.08mg/dl10-33CALCULATED	Result Rechecked				
HDL Cholesterol (Good Cholesterol) 47.90 mg/dl 30-70 DIRECT ENZYMATIC LDL Cholesterol (Bad Cholesterol) 90 mg/dl <100 Optimal	LIPID PROFILE (MINI) * , Serum				
HDL Cholesterol (Good Cholesterol)47.90mg/dl30-70DIRECT ENZYMATICLDL Cholesterol (Bad Cholesterol)90mg/dl<100 Optimal	Cholesterol (Total)	181.00	mg/dl	200-239 Borderline High	
LDL Cholesterol (Bad Cholesterol)90mg/dl< 100 OptimalCALCULATED100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High00VLDL41.08mg/dl10-33CALCULATED	HDL Cholesterol (Good Cholesterol)	47.90	mg/dl	0	DIRECT ENZYMATIC
VLDL 41.08 mg/dl 10-33 CALCULATED			Ũ	100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High	CALCULATED
-	VLDL	41.08	mg/dl	• •	CALCULATED
	Triglycerides	205.40	-	< 150 Normal	GPO-PAP

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:45
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 09:56:25
UHID/MR NO	: ALDP.0000116115	Received	: 02/Apr/2023 10:23:58
Visit ID	: ALDP0001102324	Reported	: 02/Apr/2023 12:16:17
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name

Result

Unit

Method

150-199 Borderline High 200-499 High >500 Very High

Bio. Ref. Interval

Dr. Anupam Singh (MBBS MD Pathology)

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:44
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 14:57:34
UHID/MR NO	: ALDP.0000116115	Received	: 02/Apr/2023 17:00:04
Visit ID	: ALDP0001102324	Reported	: 02/Apr/2023 17:13:30
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Fest Name	Result	Unit	Bio. Ref. Interval	Method
RINE EXAMINATION, ROUTINE *	, Urine			
Color	PALE YELLOW			
Specific Gravity	1.025			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	2-4/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			

Urine Microscopy is done on centrifuged urine sediment.

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	ABSENT	gms%
Interpretation:		
(+) < 0.5		
(++) 0.5-1.0		
(+++) 1-2		

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:44
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 14:57:34
UHID/MR NO	: ALDP.0000116115	Received	: 02/Apr/2023 17:00:04
Visit ID	: ALDP0001102324	Reported	: 02/Apr/2023 17:13:30
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
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(++++) > 2

SUGAR, PP STAGE * , Urine

Sugar, PP Stage

ABSENT

Interpretation:

(+)	< 0.5 gms%
(++)	0.5-1.0 gms%
(+++)	1-2 gms%
(++++)	>2 gms%

Dr. Anupam Singh (MBBS MD Pathology)

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:45
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 09:56:25
UHID/MR NO	: ALDP.0000116115	Received	: 03/Apr/2023 10:02:20
Visit ID	: ALDP0001102324	Reported	: 03/Apr/2023 12:22:30
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
DCA (Duratata Canaifia Antigan) Tatal **	0.4/0		. 2.0	CLIA	
PSA (Prostate Specific Antigen), Total ** Sample:Serum	0.460	ng/mL	< 2.0	CLIA	

Interpretation:

- 1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
- 2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone⁻
- 3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
- 4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
- 5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

THYROID PROFILE - TOTAL ** , Serum

T3, Total (tri-iodothyronine)	114.52	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	5.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	6.05	µIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	µIU/mL	First Trimest	ter
0.5-4.6	µIU/mL	Second Trimester	
0.8-5.2	µIU/mL	Third Trimester	
0.5-8.9	µIU/mL	Adults	55-87 Years
0.7-27	µIU/mL	Premature	28-36 Week
2.3-13.2	µIU/mL	Cord Blood	> 37Week
0.7-64	µIU/mL	Child(21 wk	- 20 Yrs.)
1-39	µIU/mL	Child	0-4 Days
1.7-9.1	µIU/mL	Child	2-20 Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:45
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: 02/Apr/2023 09:56:25
UHID/MR NO	: ALDP.0000116115	Received	: 03/Apr/2023 10:02:20
Visit ID	: ALDP0001102324	Reported	: 03/Apr/2023 12:22:30
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.

3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.

4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.

5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.

6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.

7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.

8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

Dr. Anupam Singh (MBBS MD Pathology)

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:46
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: N/A
UHID/MR NO	: ALDP.0000116115	Received	: N/A
Visit ID	: ALDP0001102324	Reported	: 02/Apr/2023 15:04:35
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

<u>X-RAY REPORT</u> (300 mA COMPUTERISED UNIT SPOT FILM DEVICE) <u>CHEST P-A VIEW</u>

- Both lung field did not reveal any significant lesion.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

Please correlare clinically.

Icrohol

DR K N SINGH (MBBS, DMRE)

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

Patient Name	: Mr.RAHUL AGRWAL-119832	Registered On	: 02/Apr/2023 09:06:46
Age/Gender	: 42 Y 11 M 24 D /M	Collected	: N/A
UHID/MR NO	: ALDP.0000116115	Received	: N/A
Visit ID	: ALDP0001102324	Reported	: 02/Apr/2023 12:28:24
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER: - Normal in size (13.3 cm), shape and **shows diffuse increase in the liver parenchymal echogenicity suggestive of grade I fatty changes**. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.

GALL BLADDER :- Well distended, walls are normal. No e/o calculus / focal mass lesion/ pericholecystic fluid.

CBD :- Normal in calibre at porta.

PORTAL VEIN: - Normal in calibre and colour uptake at porta.

PANCREAS: - Head is visualised, normal in size & echopattern. No e/o ductal dilatation or calcification. Rest of pancreas is obscured by bowel gas.

SPLEEN: - Enlarged in size (12.7 cm), with normal shape and echogenicity.

RIGHT KIDNEY: - Normal in size (9.3 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

LEFT KIDNEY: - Normal in size (9.6 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

URINARY BLADDER :- Normal in shape, outline and distension. No e/o wall thickening / calculus.

PROSTATE :- Normal in size (2.8 x 3.3 x 2.6 cm vol - 13.0 cc), shape and echo pattern.

Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy

No free fluid is seen in the abdomen/pelvis.

IMPRESSION:

- Grade I fatty liver.
- Mild splenomegaly.

Please correlate clinically

	*** End Of Report ***	Icardo
	(**) Test Performed at Chandan Speciality Lab.	100 000
SW:	I, Tread Mill Test (TMT)	DR K N SINGH (MBBS,DMRE)
This report is not for	nedico legal purpose. If clinical correlation is not established, kindly repeat the test at no	additional cost within seven days.
	on, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And He es, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital M	

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Kay, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing * 365 Days Open