

Customer Name	MS.NISHANTHINI S	Customer ID	MED111861961
Age & Gender	36Y/FEMALE	Visit Date	23/09/2023
Ref Doctor	MediWheel		

Personal Health Report

General Examination:

Height : 159.5 cms
Weight : 75.4 kg
BMI : 29.8 kg/m²

BP: 110/60 mmhg
Pulse: 75/ min, regular

Systemic Examination:

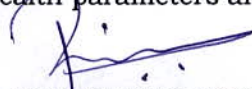
CVS: S1 S2 heard;
RS : NVBS +.
Abd : Soft.
CNS : NAD

Blood report:

Anemia - Haemoglobin- 12.1 g/dl – slightly low.
Total cholesterol -214.8 mg/dl – Slightly elevated.
All other blood parameters are well within normal limits. (Report enclosed).
Urine analysis – Within normal limits.
X-Ray Chest – Normal study.
ECHO – Normal.
ECG – Normal ECG.
USG ABDOMEN – Bulky uterus with fibroids (2).

Impression & Advice:

Anemia - Haemoglobin- 12.1 g/dl – slightly low. Advised to have iron rich diet and iron supplement prescribed by the physician.
Total cholesterol -214.8 mg/dl – Slightly elevated. To be brought down to the desirable level of 200mg/dl by having low cholesterol, high fiber diet recommended by the dietician.
USG ABDOMEN – Bulky uterus with fibroids (2)- To consult gynaecologist for further evaluation.
All other health parameters are well within normal limits.


DR. NOOR MOHAMMED RIZWAN, M.B.B.S, FDM
MHC Physician Consultant


Reg. No: 120325 Consultant Physician
A Medall Health Care and Diagnostics Pvt. Ltd.



Name : Ms. NISHANTHINI S
 PID No. : MED111861961 Register On : 23/09/2023 8:16 AM
 SID No. : 223015456 Collection On : 23/09/2023 8:58 AM
 Age / Sex : 36 Year(s) / Female Report On : 23/09/2023 3:37 PM
 Type : OP Printed On : 24/09/2023 10:07 AM
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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BLOOD GROUPING AND Rh TYPING

'AB' 'Positive'

(EDTA Blood/Agglutination)

INTERPRETATION: Reconfirm the Blood group and Typing before blood transfusion

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	12.1	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood/Derived from Impedance)	37.1	%	37 - 47
RBC Count (EDTA Blood/Impedance Variation)	4.51	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (EDTA Blood/Derived from Impedance)	82.4	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood/Derived from Impedance)	26.8	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood/Derived from Impedance)	32.6	g/dL	32 - 36
RDW-CV (EDTA Blood/Derived from Impedance)	14.8	%	11.5 - 16.0
RDW-SD (EDTA Blood/Derived from Impedance)	42.68	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood/Impedance Variation)	7000	cells/cu.m m	4000 - 11000
Neutrophils (EDTA Blood/Impedance Variation & Flow Cytometry)	64.6	%	40 - 75
Lymphocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	26.3	%	20 - 45




 Dr Archana K MD Ph.D
 Consultant Pathologist
 Reg No : 79967
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The results pertain to sample tested.

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Eosinophils (EDTA Blood/Impedance Variation & Flow Cytometry)	2.1	%	01 - 06
Monocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	6.8	%	01 - 10
Basophils (EDTA Blood/Impedance Variation & Flow Cytometry)	0.2	%	00 - 02
INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	4.52	10 ³ / μ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	1.84	10 ³ / μ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.15	10 ³ / μ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.48	10 ³ / μ l	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.01	10 ³ / μ l	< 0.2
Platelet Count (EDTA Blood/Impedance Variation)	203	10 ³ / μ l	150 - 450
MPV (EDTA Blood/Derived from Impedance)	9.7	fL	8.0 - 13.3
PCT (EDTA Blood/Automated Blood cell Counter)	0.20	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated - Westergren method)	7	mm/hr	< 20



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Investigation	Observed Value	Unit	Biological Reference Interval
BUN / Creatinine Ratio	10.5		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	94.0	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
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Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	74.1	mg/dL	70 - 140
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INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

Remark: Please correlate clinically.

Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
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Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	7.5	mg/dL	7.0 - 21
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Creatinine (Serum/Modified Jaffe)	0.71	mg/dL	0.6 - 1.1
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INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetylcysteine, chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	3.4	mg/dL	2.6 - 6.0
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Liver Function Test

Bilirubin(Total) (Serum/DCA with ATCS)	1.15	mg/dL	0.1 - 1.2
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Bilirubin(Direct) (Serum/Diazotized Sulfamic Acid)	0.24	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.91	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	18.4	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	12.6	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	13.4	U/L	< 38
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	64.2	U/L	42 - 98
Total Protein (Serum/Biuret)	6.71	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	3.74	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.97	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.26		1.1 - 2.2
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	214.8	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	50.1	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500




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INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.			
HDL Cholesterol (Serum/Immuno-inhibition)	52.8	mg/dL	Optimal(Negative Risk Factor): ≥ 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	152	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: ≥ 190
VLDL Cholesterol (Serum/Calculated)	10	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	162.0	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: ≥ 220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	4.1		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	0.9		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0




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Investigation	Observed Value	Unit	Biological Reference Interval
LDL/HDL Cholesterol Ratio (Serum/Calculated)	2.9		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

Glycosylated Haemoglobin (HbA1c)

HbA1C (Whole Blood/HPLC)	5.7	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: \geq 6.5
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INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control \geq 8.1 %

Estimated Average Glucose (Whole Blood)	116.89	mg/dL
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INTERPRETATION: Comments

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency,

hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	0.88	ng/ml	0.7 - 2.04
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INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.


T4 (Tyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	7.78	μ g/dl	4.2 - 12.0
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INTERPRETATION:

Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.




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Investigation	Observed Value	Unit	Biological Reference Interval
TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Immunometric Assay (CLIA))	2.35	μIU/mL	0.35 - 5.50

INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment :

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&lt;0.03 μIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

Urine Analysis - Routine

COLOUR (Urine)	Colorless		Yellow to Amber
APPEARANCE (Urine)	Clear		Clear
Protein (Urine/Protein error of indicator)	Negative		Negative
Glucose (Urine/GOD - POD)	Negative		Negative
Pus Cells (Urine/Automated – Flow cytometry)	0 - 1	/hpf	NIL
Epithelial Cells (Urine/Automated – Flow cytometry)	0 - 1	/hpf	NIL
RBCs (Urine/Automated – Flow cytometry)	NIL	/HPF	NIL
Casts (Urine/Automated – Flow cytometry)	NIL	/hpf	NIL
Crystals (Urine/Automated – Flow cytometry)	NIL	/hpf	NIL



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Others (Urine)	NIL		

INTERPRETATION: Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.



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X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

IMPRESSION:

- *No significant abnormality detected.*



Dr.Hemanandini
Consultant Radiologist



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ECHOCARDIOGRAPHY

M-MODE MEASUREMENTS:-

<u>VALUES</u>	
AO	2.3 cm
LA	3.1 cm
LVID(D)	4.8 cm
LVID (S)	2.7 cm
IVS (D)	1.0 cm
IVS (S)	1.0 cm
LVPW (D)	0.9 cm
LVPW (S)	0.9 cm
EF	66 %
FS	36 %
TAPSE	18 mm

DOPPLER AND COLOUR FLOW PARAMETERS :-

<i>Aortic Valve Gradient</i>	: <i>V max – 1.06 m/sec</i>	
<i>Pulmonary Valve Gradient</i>	: <i>V max – 0.96 m/sec</i>	
<i>Mitral Valve Gradient</i>	: <i>E: 0.73 m/sec</i>	<i>A: 0.55 m/sec</i>
<i>Tricuspid Valve Gradient</i>	: <i>V max – 0.50 m/sec</i>	

VALVE MORPHOLOGY :-

<i>Aortic valve</i>	-	<i>Normal</i>
<i>Mitral valve</i>	-	<i>Normal</i>
<i>Tricuspid valve</i>	-	<i>Normal</i>
<i>Pulmonary valve</i>	-	<i>Normal</i>



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CHAMBERS	
LEFT ATRIUM	NORMAL
LEFT VENTRICLE	NORMAL
RIGHT ATRIUM	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTERVENTRICULAR SEPTUM	INTACT

ECHO FINDINGS:

No Regional Wall Motion Abnormality (RWMA)
Normal Left Ventricular systolic function, EF 66 %.
No Mitral Stenosis / Trivial Mitral Regurgitation.
No Aortic Stenosis / Aortic Regurgitation.
Normal RV Function / Trivial Tricuspid Regurgitation (2.2 m/s).
No Pulmonary Artery Hypertension.
No LA/LV Clot.
No Vegetation / Pericardial Effusion.
No ASD/VSD/ PDA/ CoA.

IMPRESSION:

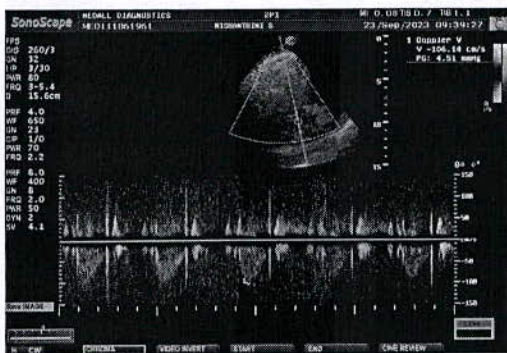
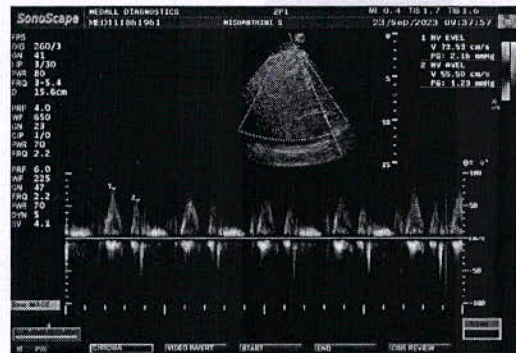
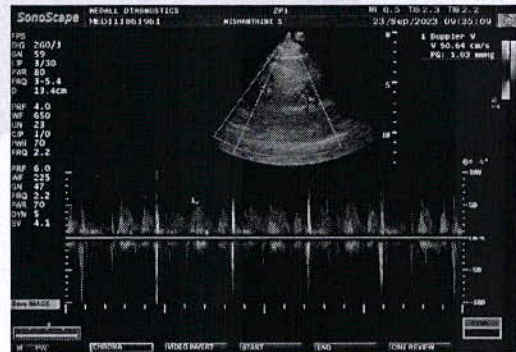
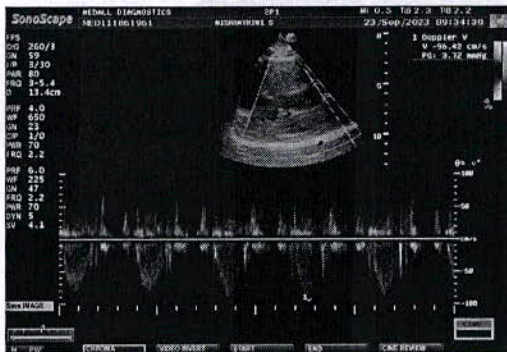
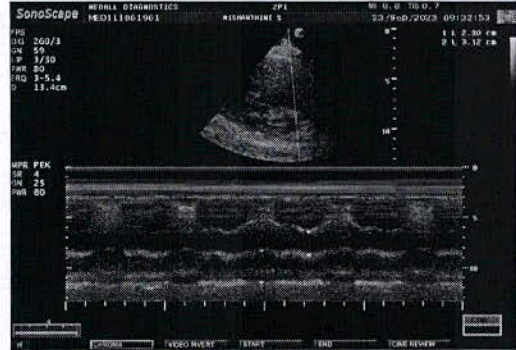
- * STRUCTURALLY NORMAL HEART.**
- * NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION, EF 66 %**



MOHANRAJ
ECHO TECHNOLOGIST



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SONOGRAM REPORT

WHOLE ABDOMEN

The liver is normal in size and shows uniform echotexture with no focal abnormality.

The gall bladder is partially distended.

There is no intra or extra hepatic biliary ductal dilatation.

The pancreas shows a normal configuration and echotexture. The pancreatic duct is normal.

The portal vein and the IVC are normal.

The spleen is normal.

There is no free or loculated peritoneal fluid.

No para aortic lymphadenopathy is seen.

No abnormality is seen in the region of the adrenal glands.

The right kidney measures ~ 11.2 x 4.2 cm.

The left kidney measures ~ 11.4 x 5.2 cm.

Both kidneys are normal in size, shape and position. Cortical echoes are normal bilaterally.

There is no calculus or calyceal dilatation.

The ureters are not dilated.

The bladder is smooth walled and uniformly transonic. There is no intravesical mass or calculus.

Bulky uterus measures ~ 8.9 x 6.5 x 4.5 cm. Two fibroids, largest measuring ~ 2.7 x 3.6 cm in the anterior wall of the uterus.

The endometrial thickness is ~ 7.1 mm.



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Ref Doctor	MediWheel		

The right ovary measures ~ 2.8 x 1.2 cm.

The left ovary measures ~ 2.9 x 1.9 cm.

No significant mass or cyst is seen in the ovaries.

Parametria are free.

Iliac fossae are normal.

IMPRESSION:

- **Bulky uterus with fibroids (Two).**



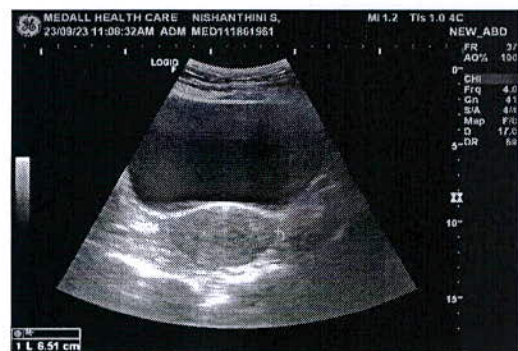
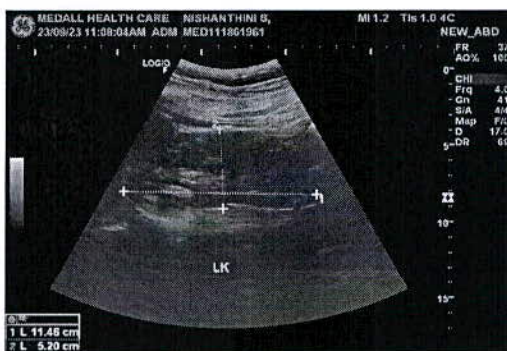
**DR. UMALAKSHMI
SONOLOGIST**



Medall Healthcare Pvt Ltd

58/6, Revathy street, Jawarlal nehru road, 100 feet Road, (Former State Election Commission Office),

Customer Name	MS.NISHANTHINI S	Customer ID	MED111861961
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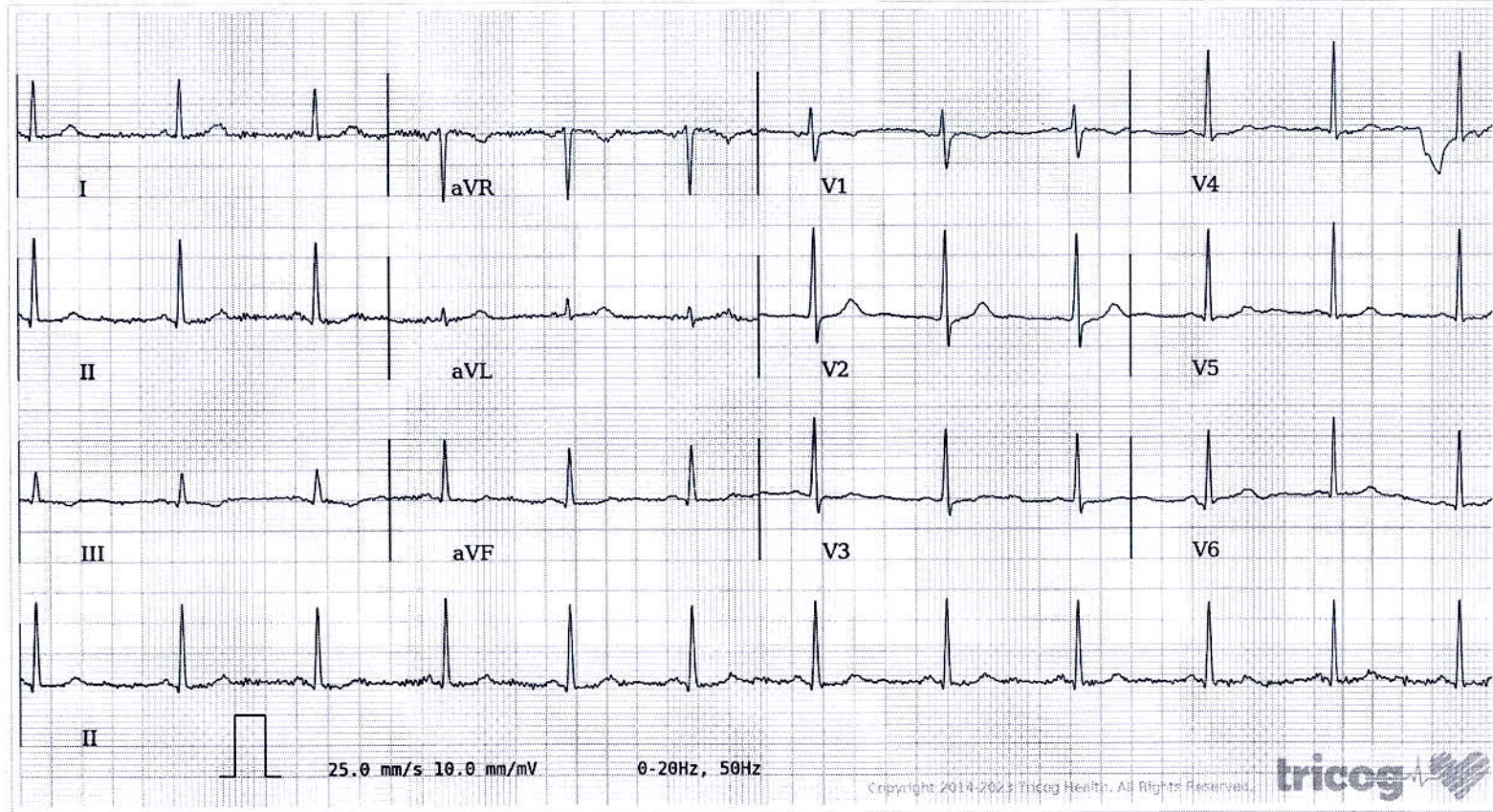


Medall Diagnostic Vadapalani



Age / Gender: 36/Female
Patient ID: med111861961
Patient Name: Ms nishanthini s

Date and Time: 23rd Sep 23 9:27 AM



AR: 72bpm VR: 71bpm QRSD: 76ms QT: 356ms QTcB: 387.26ms PRI: 140ms P-R-T: 47° 50° 11°

ECG Within Normal Limits: Sinus Rhythm. Baseline artefacts. Please correlate clinically.

Disclaimer: Analysis in this report is based on ECG alone and should only 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.

REPORTED BY



Dr Anunkumar Kakhandaki