





# **Diagnostics & Speciality Centre**

NAME : **Mrs. PAVITHRA S** MR NO. : 22120266 AGE/SEX : 34 Yrs / Female VISIT NO. : 166823

REFERRED BY: DATE OF COLLECTION: 10-12-2022 at 08:42 AM

DATE OF REPORT : 10-12-2022 at 01:39 PM

REF CENTER : MEDIWHEEL

TEST PARAMETER RESULT REFERENCE RANGE SPECIMEN

#### MEDIWHEEL HEALTH CHECKUP FEMALE

## **HAEMATOLOGY**

## COMPLETE BLOOD COUNT (CBC) WITH ESR

Automated Cell Counter

HAEMOGLOBIN 14.2 gm/dL 12 - 16 gm/dL Colorimetric Method

HEMATOCRIT (PCV) 42.7 % 36 - 47 %

Calculated

RED BLOOD CELL (RBC) COUNT 5.10 4 - 5.2 million/cu.mm

Electrical Impedance

million/cu.mm

PLATELET COUNT 3.09 Lakhs/cumm1.5 - 4.5 Lakhs/cumm

Electrical Impedance

MEAN CELL VOLUME (MCV) 83.7 fl 80 - 100 fl

Calculated

Note: All normal and abnormal platelet counts are cross checked on peripheral smear.

MEAN CORPUSCULAR HEMOGLOBIN (MCH) 27.8 pg 26 - 34 pg

Calculated

MEAN CORPUSCULAR HEMOGLOBIN

33.2 % 31 - 35 %

CONCENTRATION (MCHC)

Calculated

TOTAL WBC COUNT (TC) 8980 cells/cumm 4000 - 11000 cells/cumm

Electrical Impedance

NEUTROPHILS 61 % 40 - 75 %

VCS Technology/Microscopic

35 % 25 - 40 %

LYMPHOCYTES

VCS Technology/Microscopic

**DIFFERENTIAL COUNT** 

EOSINOPHILS 03 % 0 - 7 % VCS Technology/Microscopic

MONOCYTES 01 % 1 - 8 % VCS Technology/Microscopic

BASOPHILS 00 %

Electrical Impedance

ESR 05 mm/hr 0 - 20 mm/hr

Westergren Method

BLOOD GROUP & Rh TYPING "O" Positive

Tube Agglutination (Forward and Reverse)

Segment of the segmen

Lab Seal



**BIOCHEMIST** 

Mladu. u.







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GLYCATED HAEMOGLOBIN (HbA1C) 5.3 % American Diabetic Association (ADA) recommendations:

Non diabetic adults: <5.7 %

At risk (Pre diabetic): 5.7 -

6.4%

Diabetic: >/= 6.5%

Therapeutic goal for glycemic control:

Goal for therapy: < 7.0%

Action suggested: > 8.0%

ESTIMATED AVERAGE GLUCOSE (eAG) 105.41 mg/dL

Calculation

#### Comments:

This assay is useful for diagnosing Diabetes and evaluating long term control of blood glucose concentrations in diabetic patients. It reflects the mean glucose concentration over the previous period of 8 to 12 weeks and is a better indicator of long term glycemic control as compared with blood and urine glucose measurements. This provides a additional criterion for assessing glucose control because glycated hemoglobin values are free of day-to-day glucose fluctuation and are unaffected by exercise or food ingestion.

After a sudden alteration in blood glucose concentration, the rate of change of HbA1c is rapid during initial 2 months, followed by more gradual change approaching steady state 3 months later.

Collegy. u.

Dr. KRISHNA MURTHY



Lab Seal









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0.38 mg/dL

0.2 - 1.2 mg/dL

80 - 150 mg/dl

#### **CLINICAL BIOCHEMISTRY**

CREATININE Jaffe Kinetic	0.59 mg/dL	0.4 - 1.4 mg/dL
URIC ACID Uricase-Peroxidase	6.3 mg/dL	2.5 - 6 mg/dL
SERUM ELECTROLYTES		

LIVER FUNCTION TEST (LFT)

LIVER	-UNC	IESI (	
Spectrometry			•

**TOTAL BILIRUBIN** 

Colorimetric Diazo Method

DIRECT BILIRUBIN Colorimetric Diazo Method	0.21 mg/dL	0 - 0.4 mg/dL
INDIRECT BILIRUBIN Calculation	<b>0.17</b> mg/dl	0.2 - 0.8 mg/dl
S G O T (AST)  IFCC Without Pyridoxal Phosphates	25 U/L	up to 31 U/L
S G P T (ALT)  IFCC Without Pyridoxal Phosphates	20.4 U/L	up to 46 U/L
ALKALINE PHOSPHATASE p-Nitrophenyl Phosphate	132 U/L	36 - 113 U/L
SERUM GAMMA GLUTAMYLTRANSFERASE	17.8 U/L	5 - 55 U/L
(GGT) GCNA-IFCC		
TOTAL PROTEIN Biuret Colorimetric	6.22 g/dl	6.2 - 8 g/dl
S.ALBUMIN Bromocresol Green (BCG)	4.07 g/dl	3.5 - 5.2 g/dl
S.GLOBULIN Calculation	<b>2.1</b> g/dl	2.5 - 3.8 g/dl
A/G RATIO Calculation	1.9	1 - 1.5

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**BIOCHEMIST** 

POST PRANDIAL BLOOD SUGAR



130 mg/dl

A. Hurudhay

Dr. KRISHNA MURTHY

Lab Seal

Dr. VAMSEEDHAR.A







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**LIPID PROFILE TEST** 

**TOTAL CHOLESTEROL** 149 mg/dL up to 200 mg/dL

Cholesterol Oxidase-Peroxidase (CHOD-POD) Border Line: 200 - 240 mg/dL

High: > 240 mg/dL

**TRIGLYCERIDES** 56.1 mg/dL up to 150 mg/dL

Glycerol Peroxidase-Peroxidase (GPO-POD) Desirable: <150 mg/dL Border Line: 150 - 200 mg/dL High: >200 - 500 mg/dL Very High: > 500 mg/dL

HDL CHOLESTEROL - DIRECT 42.8 mg/dl 40 - 60 mg/dl

PEG-Cholesterol Esterase

>/= 60mg/dL - Excellent (protects against heart disease) 40-59 mg/dL - Higher the better

<40 mg/dL - Lower than desired (major risk for heart disease)

LDL CHOLESTEROL - DIRECT 95.0 mg/dL up to 100 mg/dL

Cholesterol Esterase-Cholesterol Oxidase 100-129 mg/dL- Near optimal/above

optimal

. 130-159 mg/dL- Borderline High 160-189 mg/dL- High 190->190 mg/dL - Very High

**VLDL CHOLESTEROL** 11.2 mg/dL 2 - 30 mg/dL

Calculation

TOTAL CHOLESTROL/HDL RATIO 3.5 up to 3

Calculation

Hexokinase

3.0-4.4 - Moderate

>4.4 - High

LDL/HDL RATIO 2.2 up to 2.5 Calculation

2.5-3.3 - Moderate

>3.3 - High

**FASTING BLOOD SUGAR** 110 mg/dl 70 - 110 mg/dl



Dr. KRISHNA MURTHY

**BIOCHEMIST** 

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#### **CLINICAL PATHOLOGY**

## **URINE ROUTINE & MICROSCOPIC**

Strps & Microscopy

#### PHYSICAL EXAMINATION

Colour Pale Yellow Pale yellow- yellow Visual Method

Appearance Visual Method

Clear Clear/Transparent

Specific Gravity 1.015 1.005-1.035 Strips Method

pH 6.0 4.6-8.5

## **CHEMICAL EXAMINATION (DIPSTICK)**

Protein Nil Nil -Trace Strips Method

Glucose Nil Nil

Strips Method

Blood Negative Negative Strips Method

Ketone Bodies Absent Negative

Strips Method

Urobilinogen Normal Normal

Bile Salt Negative Negative Strips Method

Bilirubin Negative Negative

Strips Method

Bile Pigments Negative NIL

#### **MICROSCOPY**

Pus Cells (WBC)
Light Microscopic

Epithelial Cells
Light Microscopic

RBC
Light Microscopic

Not Seen /hpf

O-5/hpf

0-4/hpf

Not Seen /hpf

O-2/hpf

Light Microscopic

Cast NIL NIL Light Microscopic

Crystal NIL Nil Light Microscopic

FASTING URINE SUGAR (FUS) NIL NIL

Collegy. u.



A. Hurudhay

Dr. KRISHNA MURTHY

**BIOCHEMIST** 

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POSTPRANDIAL URINE SUGAR NIL NIL

Dispatched by: KIRAN \*\*\*\* End of Report \*\*\*\*

Printed by: Kiran kumar H P on 10-12-2022 at 01:39

PM



Collegy. u.



A. Hurudhay

**BIOCHEMIST** 







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REFERRED BY: BILL NO: 198541

REF CENTER : MEDIWHEEL DATE OF REPORT : 10-12-2022 at 01:01 PM

#### MEDIWHEEL HEALTH CHECKUP FEMALE

#### **RADIOLOGY**

#### **USG REPORT - ABDOMEN AND PELVIS**

## **OBSERVATION:**

#### LIVER:

Liver is normal in size (15.4 cm) and normal homogenous echotexture. No obvious focal lesion is seen. Intrahepatic biliary radicles not dilated. Hepatic & portal veins are normal. CBD is normal.

#### **GALL BLADDER:**

Normal in distension. Lumen echo free. Wall thickness is normal.

#### **PANCREAS:**

Head and body visualized appear normal. No obvious focal lesion is seen. Pancreatic duct not dilated. Tail not visualized.

#### **SPLEEN:**

Normal in size (8.7 cm) with normal echotexture. No focal lesion is seen.

## **RIGHT KIDNEY:**

Right kidney measures  $9.3 \times 1.2$  cm (Length x parenchymal thickness) with normal echo pattern and cortical thickness.

# There is a small non obstructive calculus measuring 2.4 mm in the mid pole.

The shape, size and contour of the right kidney appear normal.

Cortical medullary differentiation is maintained.

No evidence of pelvicalyceal dilatation.

## **LEFT KIDNEY:**

Left kidney measures 11.9 x 1.2 cm (Length x parenchymal thickness) with normal







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echo pattern and cortical thickness.

The shape, size and contour of the left kidney appear normal.

Cortical medullary differentiation is maintained.

No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

#### **URINARY BLADDER:**

Is normal in contour. No intraluminal echoes are seen. No calculus or diverticulum is seen.

#### **UTERUS:**

Anteverted, normal in size measures 9.0 x 3.7 x 5.4 cm with normal echotexture.

Well defined hyperechoic lesion noted in the right lateral wall in fundal region measuring 10  $\times$  9 mm.

Endometrial thickness measures 4.4 mm.

#### **OVARIES:**

Both ovaries are normal in size with normal echo pattern.

Right ovary measures 2.5 x 1.8 x 2.2 cm (Vol-5.5 cc).

Left ovary measures 2.4 x 1.4 x 2.3 cm (Vol-4.3 cc).

No adnexal mass lesion seen.

No evidence of free fluid in the abdomen or pelvis.

## **IMPRESSION:**

- Well defined hyperechoic lesion in the uterus- Likely intramural fibroid.
- Right renal non obstructive calculus.

Dr. MOHAN S

MDRD

CONSULTANT RADIOLOGIST







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Note: All abnormalities cannot be detected by Ultrasound scan due to technical limitation, obesity and other factors. Scan findings to be correlated with old reports or other investigations.

Dispatched by: Bindu

\*\*\*\* End of Report \*\*\*\*

Printed by: Bindu on 10-12-2022 at 01:02 PM









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#### MEDIWHEEL HEALTH CHECKUP FEMALE

#### **RADIOLOGY**

## X-RAY REPORT- CHEST (PA VIEW)

## **OBSERVATIONS:**

The lung fields are clear bilaterally.

CP angles are clear.

Both the hila appear normal.

Cardiac diameter is within normal limits.

Trachea is midline.

Visible bony thoracic cage is normal.

Prominent bilateral breast shadow.

## **IMPRESSION:**

Dispatched by: Bindu

No significant abnormality in the visualized lung fields.

\*\*\*\* End of Report \*\*\*\*

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