

| | | | |
|-----------------|------------------|------------|-----------------------|
| Name | AWASTHI HIMANSHU | ID | MED111107234 |
| Age & Gender | 33Year(s)/MALE | Visit Date | 5/23/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

| | | |
|-------------------------------|---|--------|
| AORTA | : | 2.7cms |
| LEFT ATRIUM | : | 2.6cms |
| AVS | : | ---- |
| LEFT VENTRICLE (DIASTOLE) | : | 4.6cms |
| (SYSTOLE) | : | 3.1cms |
| VENTRICULAR SEPTUM (DIASTOLE) | : | 0.9cms |
| (SYSTOLE) | : | 1.2cms |
| POSTERIOR WALL (DIASTOLE) | : | 0.9cms |
| (SYSTOLE) | : | 1.3cms |
| EDV | : | 95ml |
| ESV | : | 38ml |
| FRACTIONAL SHORTENING | : | 32% |
| EJECTION FRACTION | : | 60% |
| EPSS | : | --- |
| RVID | : | 1.6cms |

DOPPLER MEASUREMENTS:

| | | | | |
|-----------------|---|-------------|-------------|-------|
| MITRAL VALVE | : | E' 0.70 m/s | A' 0.53 m/s | NO MR |
| AORTIC VALVE | : | 1.00 m/s | | NO AR |
| TRICUSPID VALVE | : | E' 1.90 m/s | A' - m/s | NO TR |
| PULMONARY VALVE | : | 0.58 m/s | | NO PR |

| | | | |
|-----------------|------------------|------------|-----------------------|
| Name | AWASTHI HIMANSHU | ID | MED111107234 |
| Age & Gender | 33Year(s)/MALE | Visit Date | 5/23/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

2D ECHOCARDIOGRAPHY FINDINGS:

Left ventricle : Normal size, Normal systolic function.
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

IMPRESSION:

- **NORMAL SIZED CARDIAC CHAMBERS.**
- **NORMAL LV SYSTOLIC FUNCTION. EF: 60%.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

DR. K.S. SUBRAMANI. MBBS, MD, DM (CARDIOLOGY) FESC, FICC
SENIOR CONSULTANT INTERVENTIONAL CARDIOLOGIST
Kss/vp

Note:

- * **Report to be interpreted by qualified medical professional.**
- * **To be correlated with other clinical findings.**
- * **Parameters may be subjected to inter and intra observer variations.**

| | | | |
|-----------------|------------------|------------|-----------------------|
| Name | AWASTHI HIMANSHU | ID | MED111107234 |
| Age & Gender | 33Year(s)/MALE | Visit Date | 5/23/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

CLUMAX DIAGNOSTICS



--- A MEDALL COMPANY ---

Date 23-May-2022 9:01 AM

Customer Name : **MR.AWASTHI HIMANSHU**DOB : **13 Dec 1988**Ref Dr Name : **MediWheel**Age : **33Y/MALE**Customer Id : **MED111107234**Visit ID : **422044029**

Email Id :

Phone No : **9473896131**Corp Name : **MediWheel**Address : **#81,QUEENS ROAD**

HT - 162
 WT - 77.3
 BP - 110/80
 pulse - 74

complementary breakfast

Package Name : **Mediwheel Full Body Health Checkup Male Below 40**

| S.No | Modality | Study | Accession No | Time | Seq | Signature |
|------|----------|--|-----------------|------|-----|-----------|
| 1 | LAB | BLOOD UREA NITROGEN (BUN) | | | | |
| 2 | LAB | CREATININE | | | | |
| 3 | LAB | GLUCOSE - FASTING | | | | |
| 4 | LAB | GLUCOSE - POSTPRANDIAL (2 HRS) | | | | |
| 5 | LAB | GLYCOSYLATED HAEMOGLOBIN (HbA1c) | | | | |
| 6 | LAB | URIC ACID | | | | |
| 7 | LAB | LIPID PROFILE | | | | |
| 8 | LAB | LIVER FUNCTION TEST (LFT) | | | | |
| 9 | LAB | THYROID PROFILE/ TFT(T3, T4, TSH) | | | | |
| 10 | LAB | URINE GLUCOSE - FASTING | | | | |
| 11 | LAB | URINE GLUCOSE - POSTPRANDIAL (2 Hrs) | | | | |
| 12 | LAB | COMPLETE BLOOD COUNT WITH ESR | | | | |
| 13 | LAB | STOOL ANALYSIS - ROUTINE | | | | |
| 14 | LAB | URINE ROUTINE | | | | |
| 15 | LAB | BUN/CREATININE RATIO | | | | |
| 16 | LAB | BLOOD GROUP & RH TYPE (Forward Reverse) | | | | |
| 17 | OTHERS | Treadmill / 2D Echo ✓ | IND131400814690 | | | |

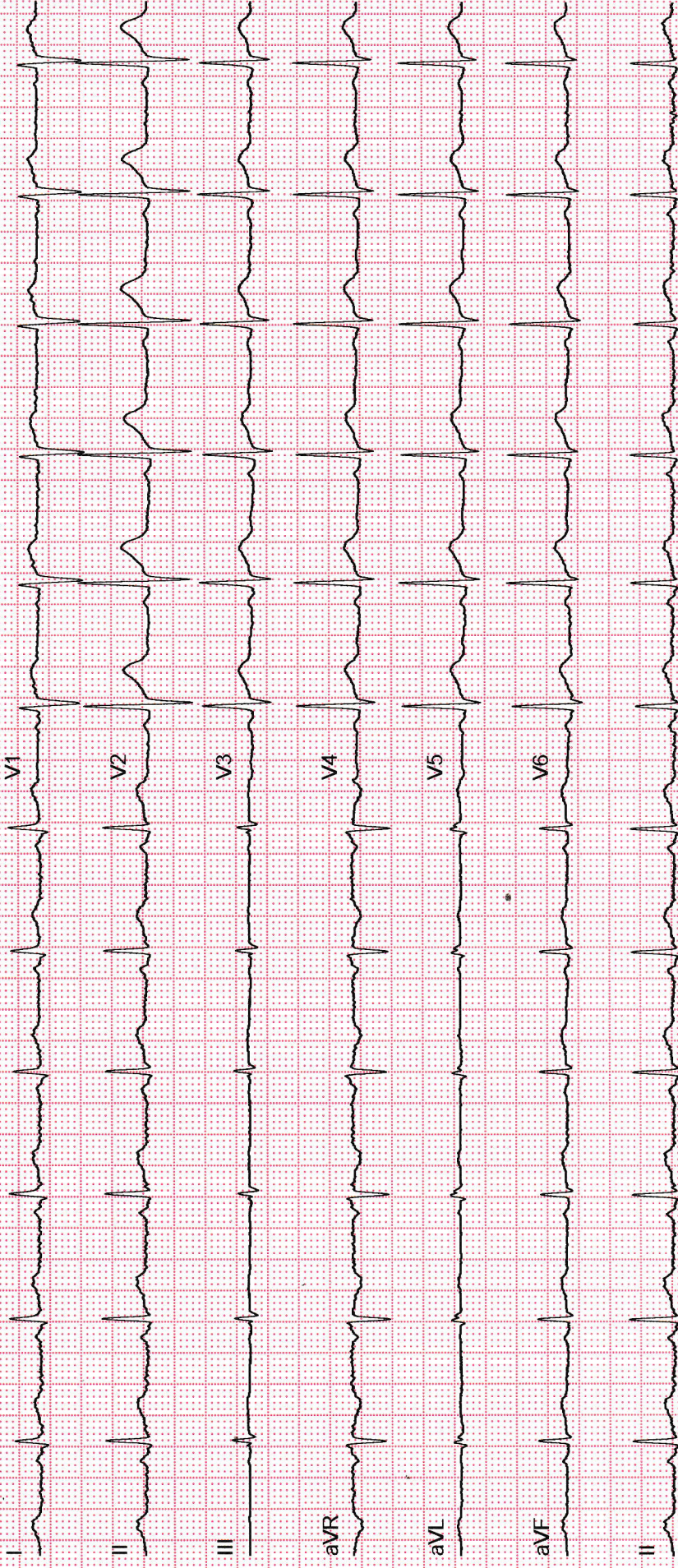
AWASTHI HIMANSHU
MED11107234

23.05.2022 10:46:43
CLUMAX DIAGNOSTICS
THIPPASANDRA
BANGALORE

74 bpm
/ / mmHg

Male

QRS : 72 ms
QT / QTcBaz : 382 / 424 ms
PR : 122 ms
P : 66 ms
RR / PP : 806 / 810 ms
P / QRS / T : 39 / 54 / 38 degrees



| | | | |
|-----------------|------------------|------------|-----------------------|
| Name | AWASTHI HIMANSHU | ID | MED111107234 |
| Age & Gender | 33Year(s)/MALE | Visit Date | 5/23/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has uniform echopattern. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

GALL BLADDER shows normal shape and has clear contents. Gall bladder wall is of normal thickness. CBD is of normal calibre.

PANCREAS has normal shape, size and uniform echopattern. No evidence of ductal dilatation or calcification.

SPLEEN shows normal shape, size and echopattern. No demonstrable Para -aortic lymphadenopathy.

KIDNEYS move well with respiration and have normal shape, size and echopattern. Cortico- medullary differentiations are well madeout. No evidence of calculus or hydronephrosis.

The kidney measures as follows:

| | Bipolar length (cms) | Parenchymal thickness (cms) |
|---------------------|-----------------------------|------------------------------------|
| Right Kidney | 10.7 | 1.6 |
| Left Kidney | 10.9 | 1.5 |

URINARY BLADDER shows normal shape and wall thickness. It has clear contents. No evidence of diverticula.

PROSTATE shows normal shape, size and echopattern. It measures 3.8 x 3.7 x 3.1cms (Vol:23cc).

No evidence of ascites / pleural effusion.

IMPRESSION:

➤ **NO SIGNIFICANT ABNORMALITY.**

DR. H.K. ANAND
CONSULTANT RADIOLOGISTS:

A/vp

DR. APARNA

| | | | |
|-----------------|------------------|------------|-----------------------|
| Name | AWASTHI HIMANSHU | ID | MED111107234 |
| Age & Gender | 33Year(s)/MALE | Visit Date | 5/23/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

| | | | |
|--------------|------------------|-------------|--------------------|
| Name | AWASTHI HIMANSHU | Customer ID | MED111107234 |
| Age & Gender | 33Y/M | Visit Date | May 23 2022 9:01AM |
| Ref Doctor | MediWheel | | |

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.

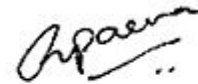
DR. H.K. ANAND

DR. SHWETHA S

DR. CHARUL

DR. APARNA

CONSULTANT RADIOLOGISTS



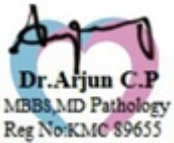
Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 Register On : 23/05/2022 9:02 AM
SID No. : 422044029 Collection On : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male Report On : 23/05/2022 5:09 PM
Type : OP Printed On : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

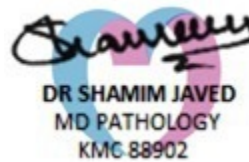
HAEMATOLOGY

Complete Blood Count With - ESR

| | | | |
|--|-------|-------------|--------------|
| Haemoglobin (EDTA Blood/Spectrophotometry) | 16.6 | g/dL | 13.5 - 18.0 |
| Packed Cell Volume(PCV)/Haematocrit (EDTA Blood) | 48.7 | % | 42 - 52 |
| RBC Count (EDTA Blood) | 5.40 | mill/cu.mm | 4.7 - 6.0 |
| Mean Corpuscular Volume(MCV) (EDTA Blood) | 90.2 | fL | 78 - 100 |
| Mean Corpuscular Haemoglobin(MCH) (EDTA Blood) | 30.6 | pg | 27 - 32 |
| Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood) | 34.0 | g/dL | 32 - 36 |
| RDW-CV (EDTA Blood) | 13.8 | % | 11.5 - 16.0 |
| RDW-SD (EDTA Blood) | 43.57 | fL | 39 - 46 |
| Total Leukocyte Count (TC) (EDTA Blood) | 9500 | cells/cu.mm | 4000 - 11000 |
| Neutrophils (EDTA Blood) | 52.3 | % | 40 - 75 |
| Lymphocytes (EDTA Blood) | 37.3 | % | 20 - 45 |
| Eosinophils (EDTA Blood) | 3.1 | % | 01 - 06 |



VERIFIED BY




APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234
SID No. : 422044029
Age / Sex : 33 Year(s) / Male
Type : OP
Ref. Dr : MediWheel


Register On : 23/05/2022 9:02 AM
Collection On : 23/05/2022 9:32 AM
Report On : 23/05/2022 5:09 PM
Printed On : 26/05/2022 3:07 PM

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|---|-----------------------|---------------------------|--------------------------------------|
| Monocytes (EDTA Blood) | 6.8 | % | 01 - 10 |
| Basophils (Blood) | 0.5 | % | 00 - 02 |
| INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically. | | | |
| Absolute Neutrophil count (EDTA Blood) | 4.97 | 10 ³ / μ l | 1.5 - 6.6 |
| Absolute Lymphocyte Count (EDTA Blood) | 3.54 | 10 ³ / μ l | 1.5 - 3.5 |
| Absolute Eosinophil Count (AEC) (EDTA Blood) | 0.29 | 10 ³ / μ l | 0.04 - 0.44 |
| Absolute Monocyte Count (EDTA Blood) | 0.65 | 10 ³ / μ l | < 1.0 |
| Absolute Basophil count (EDTA Blood) | 0.05 | 10 ³ / μ l | < 0.2 |
| Platelet Count (EDTA Blood) | 283 | 10 ³ / μ l | 150 - 450 |
| MPV (EDTA Blood) | 10.5 | fL | 7.9 - 13.7 |
| PCT (EDTA Blood/Automated Blood cell Counter) | 0.30 | % | 0.18 - 0.28 |
| ESR (Erythrocyte Sedimentation Rate) (Citratd Blood) | 10 | mm/hr | < 15 |



Dr. Arjun C.P
MBBS, MD Pathology
Reg No: KMC 89655

VERIFIED BY




DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902


APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 **Register On** : 23/05/2022 9:02 AM
SID No. : 422044029 **Collection On** : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male **Report On** : 23/05/2022 5:09 PM
Type : OP **Printed On** : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|--|-----------------------|-------------|--------------------------------------|
| <u>BIOCHEMISTRY</u> | | | |
| <u>Liver Function Test</u> | | | |
| Bilirubin(Total) (Serum/DCA with ATCS) | 0.48 | mg/dL | 0.1 - 1.2 |
| Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid) | 0.21 | mg/dL | 0.0 - 0.3 |
| Bilirubin(Indirect) (Serum/Derived) | 0.27 | mg/dL | 0.1 - 1.0 |
| SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC) | 26.29 | U/L | 5 - 40 |
| SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC) | 42.28 | U/L | 5 - 41 |
| GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic) | 50.73 | U/L | < 55 |
| Alkaline Phosphatase (SAP) (Serum/Modified IFCC) | 134.8 | U/L | 53 - 128 |
| Total Protein (Serum/Biuret) | 7.28 | gm/dl | 6.0 - 8.0 |
| Albumin (Serum/Bromocresol green) | 4.69 | gm/dl | 3.5 - 5.2 |
| Globulin (Serum/Derived) | 2.59 | gm/dL | 2.3 - 3.6 |
| A : G RATIO (Serum/Derived) | 1.81 | | 1.1 - 2.2 |


DR. VANITHA R. SWAMY MD
 Consultant Pathologist
 Reg No : 99049

VERIFIED BY


DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902


APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 **Register On** : 23/05/2022 9:02 AM
SID No. : 422044029 **Collection On** : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male **Report On** : 23/05/2022 5:09 PM
Type : OP **Printed On** : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|---|-----------------------|-------------|---|
| <u>Lipid Profile</u> | | | |
| Cholesterol Total (Serum/CHOD-PAP with ATCS) | 204.59 | mg/dL | Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240 |
| Triglycerides (Serum/GPO-PAP with ATCS) | 629.98 | mg/dL | Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500 |

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/Immunoinhibition) | 27.63 | mg/dL | Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40 |
| LDL Cholesterol (Serum/Calculated) | 51 | mg/dL | Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190 |
| VLDL Cholesterol (Serum/Calculated) | 126 | mg/dL | < 30 |
| Non HDL Cholesterol (Serum/Calculated) | 177.0 | mg/dL | Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220 |


DR. VANITHA R. SWAMY MD
 Consultant Pathologist
 Reg No : 99049
VERIFIED BY


DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902
APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 **Register On** : 23/05/2022 9:02 AM
SID No. : 422044029 **Collection On** : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male **Report On** : 23/05/2022 5:09 PM
Type : OP **Printed On** : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

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) | 7.4 | | 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) | 22.8 | | Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0 |
|--|------|--|--|

| | | | |
|---|-----|--|---|
| LDL/HDL Cholesterol Ratio (Serum/Calculated) | 1.8 | | Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0 |
|---|-----|--|---|



DR .VANITHA.R.SWAMY MD
 Consultant Pathologist
 Reg No : 99049
VERIFIED BY



DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902
APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 Register On : 23/05/2022 9:02 AM
SID No. : 422044029 Collection On : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male Report On : 23/05/2022 5:09 PM
Type : OP Printed On : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|--|-----------------------|-------------|---|
| <u>Glycosylated Haemoglobin (HbA1c)</u> | | | |
| HbA1C (Whole Blood/HPLC) | 5.7 | % | Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5 |

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %


Estimated Average Glucose 116.89 mg/dL
(Whole Blood)

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 glycaemic 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.


DR. VANITHA R. SWAMY MD
Consultant Pathologist
Reg No : 99049
VERIFIED BY


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902
APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 Register On : 23/05/2022 9:02 AM
SID No. : 422044029 Collection On : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male Report On : 23/05/2022 5:09 PM
Type : OP Printed On : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

IMMUNOASSAY

THYROID PROFILE / TFT

| | | | |
|--|------|-------|------------|
| T3 (Triiodothyronine) - Total (Serum/ECLIA) | 1.35 | ng/ml | 0.7 - 2.04 |
|--|------|-------|------------|

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/ECLIA) | 9.99 | µg/dl | 4.2 - 12.0 |
|--|------|-------|------------|

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.

| | | | |
|--|------|--------|-------------|
| TSH (Thyroid Stimulating Hormone) (Serum/ECLIA) | 1.27 | 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.


DR .VANITHA.R.SWAMY MD
Consultant Pathologist
Reg No : 99049

VERIFIED BY


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 **Register On** : 23/05/2022 9:02 AM
SID No. : 422044029 **Collection On** : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male **Report On** : 23/05/2022 5:09 PM
Type : OP **Printed On** : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

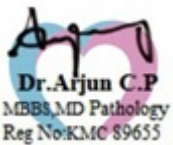
CLINICAL PATHOLOGY

PHYSICAL EXAMINATION (URINE COMPLETE)

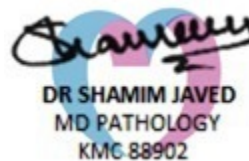
| | | | |
|------------------------|-------------|--|-----------------|
| Colour (Urine) | Pale Yellow | | Yellow to Amber |
| Appearance (Urine) | Clear | | Clear |
| Volume(CLU) (Urine) | 30 | | |

CHEMICAL EXAMINATION (URINE COMPLETE)

| | | | |
|-----------------------------|----------|--|---------------|
| pH (Urine) | 7.0 | | 4.5 - 8.0 |
| Specific Gravity (Urine) | 1.010 | | 1.002 - 1.035 |
| Ketone (Urine) | Negative | | Negative |
| Urobilinogen (Urine) | Normal | | Normal |
| Blood (Urine) | Negative | | Negative |
| Nitrite (Urine) | Negative | | Negative |
| Bilirubin (Urine) | Negative | | Negative |
| Protein (Urine) | Negative | | Negative |



VERIFIED BY



APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 Register On : 23/05/2022 9:02 AM
SID No. : 422044029 Collection On : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male Report On : 23/05/2022 5:09 PM
Type : OP Printed On : 26/05/2022 3:07 PM
Ref. Dr : MediWheel


| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|------------------------------|-----------------------|-------------|--------------------------------------|
| Glucose (Urine/GOD - POD) | Negative | | Negative |
| Leukocytes(CP) (Urine) | Negative | | |

MICROSCOPIC EXAMINATION
(URINE COMPLETE)


| | | | |
|-----------------------------|-----|------|-----|
| Pus Cells (Urine) | 2-3 | /hpf | NIL |
| Epithelial Cells (Urine) | 2-3 | /hpf | NIL |
| RBCs (Urine) | NIL | /hpf | NIL |
| Others (Urine) | NIL | | |

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

| | | | |
|---------------------|-----|------|-----|
| Casts (Urine) | NIL | /hpf | NIL |
| Crystals (Urine) | NIL | /hpf | NIL |


Dr. Arjun C.P
MBBS, MD Pathology
Reg No:KMC 89655

VERIFIED BY


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902


APPROVED BY


Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 Register On : 23/05/2022 9:02 AM
SID No. : 422044029 Collection On : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male Report On : 23/05/2022 5:09 PM
Type : OP Printed On : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

IMMUNOHAEMATOLOGY

| | | | |
|--|---------------|--|--|
| BLOOD GROUPING AND Rh TYPING (EDTA Blood/Agglutination) | 'A' Positive' | | |
|--|---------------|--|--|


DR .VANITHA.R.SWAMY MD
Consultant Pathologist
Reg No : 99049
VERIFIED BY


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name : Mr. AWASTHI HIMANSHU
PID No. : MED111107234 **Register On** : 23/05/2022 9:02 AM
SID No. : 422044029 **Collection On** : 23/05/2022 9:32 AM
Age / Sex : 33 Year(s) / Male **Report On** : 23/05/2022 5:09 PM
Type : OP **Printed On** : 26/05/2022 3:07 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|---|-----------------------|-------------|--|
| <u>BIOCHEMISTRY</u> | | | |
| BUN / Creatinine Ratio | 7 | | 6.0 - 22.0 |
| Glucose Fasting (FBS) (Plasma - F/GOD-PAP) | 114.41 | 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 |
| Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP) | 118.34 | mg/dL | 70 - 140 |

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.

| | | | |
|--|------------|-------|-----------|
| Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived) | 6.2 | mg/dL | 7.0 - 21 |
| Creatinine (Serum/Modified Jaffe) | 0.93 | mg/dL | 0.9 - 1.3 |

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-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

| | | | |
|--------------------------------|------|-------|-----------|
| Uric Acid (Serum/Enzymatic) | 3.87 | mg/dL | 3.5 - 7.2 |
|--------------------------------|------|-------|-----------|


DR .VANITHA.R.SWAMY MD
 Consultant Pathologist
 Reg No : 99049
VERIFIED BY


DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902
APPROVED BY

-- End of Report --