

**Patient Name :** MR. AMIT KUMAR  
**Age / Gender :** 37 years / Male  
**Patient ID :** 19397  
**Source :** Sardar Patel Hospital (OPD)

**Referral :** Dr Mediwheel Full body Health Checkup

**Collection Time :** 12/02/2023, 11:02 AM

**Reporting Time :** 12/02/2023, 12:55 PM

**Sample ID :**



001404323

| Test Description  | Value(s) | Reference Range | Unit(s)             |
|---|----------|-----------------|---------------------|
| <b>CBC</b>  |          |                 |                     |
| Hemoglobin (Hb)*<br>Method : Cynmeth Photometric Measurement        | 14.6     | 13.5 - 18.0     | gm/dL               |
| Erythrocyte (RBC) Count*<br>Method : Electrical Impedence           | 4.81     | 4.7 - 6.0       | mil/cu.mm           |
| Packed Cell Volume (PCV)*<br>Method : Calculated                    | 42.7     | 42 - 52         | %                   |
| Mean Cell Volume (MCV)*<br>Method : Electrical Impedence            | 88.77    | 78 - 100        | fL                  |
| Mean Cell Haemoglobin (MCH)*<br>Method : Calculated                 | 30.35    | 27 - 31         | pg                  |
| Mean Corpuscular Hb Concn. (MCHC)*<br>Method : Calculated           | 34.19    | 32 - 36         | gm/dL               |
| Red Cell Distribution Width (RDW)*<br>Method : Electrical Impedence | 12.0     | 11.5 - 14.0     | %                   |
| Total Leucocytes (WBC) Count*<br>Method : Electrical Impedence      | 6270     | 4000-10000      | cell/cu.mm          |
| Neutrophils*<br>Method : VCSn Technology                            | 55       | 40 - 80         | %                   |
| Lymphocytes*<br>Method : VCSn Technology                            | 35       | 20 - 40         | %                   |
| Monocytes*<br>Method : VCSn Technology                              | 07       | 2 - 10          | %                   |
| Eosinophils*<br>Method : VCSn Technology                            | 03       | 1 - 6           | %                   |
| Basophils<br>Method : VCSn Technology                               | 00       | 0 - 4           | %                   |
| Platelet Count*<br>Method : Electrical Impedence                    | 163      | 150 - 450       | 10 <sup>3</sup> /ul |

**E.S.R**

|  |           |               |              |
|--|-----------|---------------|--------------|
| <b>Erythrocyte Sedimentation Rate</b><br>Method : EDTA Whole blood, modified westerngren | <b>34</b> | <b>&lt;15</b> | <b>mm/hr</b> |
|--|-----------|---------------|--------------|

**Interpretation:**

It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.

**\*\*END OF REPORT\*\***

**Dr. Bhavika Dholiya**  
M. D. Pathology  
Registration No: G-32571

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|------------------|----------|-----------------|---------|
|------------------|----------|-----------------|---------|

**BLOOD GROUP & RH (D) FACTOR, EDTA WHOLE BLOOD**

|   |          |  |  |
|---|----------|--|--|
| Blood Group                                 | "O"      |  |  |
| Method : Forward and Reverse By Tube Method |          |  |  |
| RH Factor                                   | Positive |  |  |

**Methodology**

This is done by forward and reverse grouping by tube Agglutination method.

**Interpretation**

Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required. Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2-4 years).

**GLYCOSYLATED HB (HBA1C)**

|                             |       |   |       |
|-----------------------------|-------|---|-------|
| Glyco Hb (HbA1C)            | 4.7   | Non-Diabetic: <=5.6<br>Pre Diabetic: 5.7-6.4<br>Diabetic: >=6.5 | %     |
| Estimated Average Glucose : | 88.19 |   | mg/dL |

**Interpretations**

- HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes using a cut off point of 6.5%
- Low glycated haemoglobin in a non diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency and haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
  - Excellent control-6-7 %
  - Fair to Good control – 7-8 %
  - Unsatisfactory control – 8 to 10 %
  - Poor Control – More than 10 %

**\*\*END OF REPORT\*\***

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| Test Description                 | Value(s)     | Reference Range   | Unit(s) |
|----------------------------------|--------------|-------------------|---------|
| <b>THYROID FUNCTION TEST 1</b>   |              |                   |         |
| T3-Total<br>Method : Serum, CLIA | 1.69         | 0.69 - 2.15 ng/mL | ng/mL   |
| T4-Total<br>Method : Serum, CLIA | 8.30         | 5.2 - 12.7 ug/dL  | ug/dL   |
| TSH<br>Method : Serum, CLIA      | <b>0.109</b> | 0.3 - 4.5 uIU/mL  | uIU/mL  |

**Interpretation**

**BLOOD GLUCOSE FASTING (FBS)**

|   |        |   |       |
|---|--------|---|-------|
| Glucose fasting<br>Method : Fluoride Plasma-F, Hexokinase | 100.0  | Normal: 70 - 99<br>Impaired Tolerance: 100-125<br>Diabetes mellitus: >= 126<br>(on more than one occassion)<br>(American diabetes association<br>guidelines 2018) | mg/dL |
| Urine Fasting   | Absent |   |       |

**BLOOD GLUCOSE POST PRANDIAL (PP2BS)**

|  |        |          |       |
|--|--------|----------|-------|
| Blood Glucose-Post Prandial<br>Method : Hexokinase | 97.3   | 70 - 140 | mg/dL |
| Urine Post Prandial                                | Absent |          |       |

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001404323

| Test Description                                 | Value(s) | Reference Range                | Unit(s) |
|--|----------|--------------------------------|---------|
| <b>RENAL PROFILE</b>                             |          |                                |         |
| Urea *   | 19.7     | 17- 55 mg/dL                   | mg/dL   |
| Method : Serum, Urease                           |          |                                |         |
| Creatinine*                                      | 0.78     | 0.6 - 1.4 mg/dl                | mg/dL   |
| Method : Serum, Enzymatic                        |          |                                |         |
| Uric Acid*                                       | 7.8      | 3.5 - 7.2                      | mg/dL   |
| Method : Serum, Uricase/POD                      |          |                                |         |
| Blood Urea Nitrogen-BUN*                         | 9.21     | 7 - 25 mg/dL                   | mg/dL   |
| Method : Calculated                              |          |                                |         |
| Calcium*   | 10.20    | 8.8 - 10.6                     | mg/dL   |
| Method : Arsenazo III                            |          |                                |         |
| Sodium*  | 142.7    | 136 - 146                      | mmol/L  |
| Method : Serum, Indirect ISE                     |          |                                |         |
| Potassium*                                       | 4.24     | 3.5 - 5.1                      | mmol/L  |
| Method : Serum, Indirect ISE                     |          |                                |         |
| Chloride*  | 102.0    | 97.0 - 108.0                   | mmol/L  |
| Method : Serum, Indirect ISE                     |          |                                |         |
| <b>LIVER FUNCTION TEST-1</b>                     |          |                                |         |
| Bilirubin - Total                                | 0.43     | 0.3 - 1.2                      | mg/dL   |
| Method : Diazotization                           |          |                                |         |
| Bilirubin - Direct                               | 0.31     | Adults and Children: 0.0 - 0.4 | mg/dL   |
| Method : Serum, Diazotization                    |          |                                |         |
| Bilirubin - Indirect                             | 0.12     |                                |         |
| Method : Calculated                              |          |                                |         |
| SGOT   | 56.0     | < 50                           | U/L     |
| Method : Serum, UV without P5P                   |          |                                |         |
| SGPT   | 61.6     | < 50                           | U/L     |
| Method : Serum, UV without P5P                   |          |                                |         |
| Alkaline Phosphatase-ALPI                        | 127      | 30-120                         | U/L     |
| Method : Serum, PNPP, AMP Buffer, IFCC 37 degree |          |                                |         |
| Total Protein                                    | 7.29     | 6.6 - 8.3                      | g/dL    |
| Method : Serum, Biuret, reagent blank end point  |          |                                |         |
| Albumin  | 4.4      | Adults: 3.5 - 5.2              | g/dL    |
| Method : Serum, Bromocresol green                |          |                                |         |
| Globulin   | 2.89     | 1.8 - 3.6                      | g/dL    |
| Method : Calculated                              |          |                                |         |
| A/G Ratio  | 1.52     | 1.2 - 2.2                      | ratio   |
| Method : Calculated                              |          |                                |         |

**\*\*END OF REPORT\*\***

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| Test Description   | Value(s) | Reference Range   | Unit(s) |
|--|----------|---|---------|
| <b>LIPID PROFILE (D)</b>   |          |   |         |
| <b>Cholesterol-Total</b><br>Method : Serum, Cholesterol oxidase esterase, peroxidase | 139.0    | Desirable: <= 200<br>Borderline High: 201-239<br>High: > 239  | mg/dL   |
| <b>Triglycerides</b><br>Method : Serum, Enzymatic, endpoint                          | 94.6     | Normal: < 150<br>Borderline High: 150-199<br>High: 200-499<br>Very High: >= 500   | mg/dL   |
| <b>Cholesterol-HDL Direct</b><br>Method : Serum, Direct measure-PEG                  | 41.6     | Normal: > 40<br>Major Heart Risk: < 40  | mg/dL   |
| <b>LDL Cholesterol</b><br>Method : Calculated  | 78.48    | Optimal: < 100<br>Near optimal/above optimal: 100-129<br>Borderline high: 130-159<br>High: 160-189<br>Very High: >= 190 | mg/dL   |
| <b>Non - HDL Cholesterol, Serum</b><br>Method : calculated                           | 97.40    | Desirable: < 130 mg/dL<br>Borderline High: 130-159mg/dL<br>High: 160-189 mg/dL<br>Very High: > or = 190 mg/dL           | mg/dL   |
| <b>VLDL Cholesterol</b><br>Method : calculated                                       | 18.92    | 6 - 38  | mg/dL   |
| <b>CHOL/HDL RATIO</b><br>Method : calculated   | 3.34     | 3.5 - 5.0   | ratio   |
| <b>LDL/HDL RATIO</b><br>Method : calculated  | 1.89     | Desirable / low risk - 0.5 -3.0<br>Low/ Moderate risk - 3.0- 6.0<br>Elevated / High risk - > 6.0                        | ratio   |
| <b>HDL/LDL RATIO</b><br>Method : calculated  | 0.53     | Desirable / low risk - 0.5 -3.0<br>Low/ Moderate risk - 3.0- 6.0<br>Elevated / High risk - > 6.0                        | ratio   |

**Note:** 8-10 hours fasting sample is required. Test results may show interferences due to pregnancy, certain drugs such as estrogens and other drugs(such as androgenic and related steroids), and insulin therapy etc. 12 hours fast is recommended prior to the test as non fasting status may result in falsely elevated test values. Alcohol should not be consumed for atleast 24 hours before the test. Values may be increased in acute illness, colds or flu. Obesity, stress, physical inactivity, cigarette smoking may lead to increase test values. If possible all medications should be withheld for atleast 24 hours before testing(On Doctors Advice). Intraindividual variations, seasonal as well as positional variations(levels lower when sitting compared to standing etc.)have been observed. Cholesterol and HDL-C should not be measured immediately after MI, and 3 months wait is suggested.

**\*\*END OF REPORT\*\***

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| Test Description  | Value(s)       | Reference Range | Unit(s) |
|---|----------------|-----------------|---------|
| <b>URINE ROUTINE</b>  |                |                 |         |
| Volume*   | 20             | ml -            | ml      |
| Colour*   | Pale Yellow    | Pale Yellow     |         |
| Transparency (Appearance)*                                    | <b>Turbid</b>  | Clear           |         |
| Deposit*  | <b>Present</b> | Absent          |         |
| Reaction (pH)*  | 6.0            | 4.5 - 8         |         |
| Specific Gravity*   | 1.025          | 1.010 - 1.030   |         |
| <b>Chemical Examination (Automated Dipstick Method) Urine</b> |                |                 |         |
| Urine Glucose (sugar)*  | Absent         | Absent          |         |
| Urine Protein (Albumin)*                                      | Absent         | Absent          |         |
| Urine Ketones (Acetone)*                                      | Absent         | Absent          |         |
| Blood*  | Absent         | Absent          |         |
| Bile pigments*  | Absent         | Absent          |         |
| Nitrite*  | Absent         | Absent          |         |
| <b>Microscopic Examination Urine</b>                          |                |                 |         |
| Pus Cells (WBCs)*   | <b>10-12</b>   | 0 - 5           | /hpf    |
| Epithelial Cells*   | <b>18-20</b>   | 0 - 4           | /hpf    |
| Red blood Cells*  | Absent         | Absent          | /hpf    |
| Crystals*   | Absent         | Absent          |         |
| Cast*   | Absent         | Absent          |         |
| Trichomonas Vaginalis*  | Absent         | Absent          |         |
| Yeast Cells*  | Absent         | Absent          |         |
| Amorphous deposits*   | Absent         | Absent          |         |
| Bacteria*   | Absent         | Absent          |         |

**\*\*END OF REPORT\*\***

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|                |            |   |         |            |
|----------------|------------|---|---------|------------|
| Patient Name:- | AMIT_KUMAR |   | Date :- | 12/02/2023 |
| Age & Sex :-   | 37 Y       | M |         |            |
|                |            |   |         |            |

### X-RAY CHEST PA VIEW

Both lung zones are clear

Cardiac silhouette is normal.

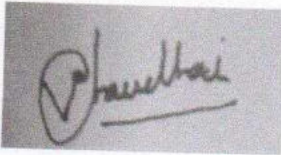
Both costophrenic angles clear.

Both domes of diaphragm are at normal level.

Bony thorax is unremarkable.

Impression-No significant abnormality detected in present study.

Please correlate with clinical findings and relevant investigations.



**Dr.Vivek Chaudhari**  
D.M.R.E.  
Consultant Radiologist

12.07.2023 11:17:49  
SARC PATEL HOSPITAL & HEART  
CHIKUWADI OPP RAILWAY STATION  
ANKLISHWER

Room:

Location:  
Or Number:  
Visit:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

66 bpm  
-- / -- mmHg

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 74 ms  
QT / QTcBaz : 364 / 381 ms  
PR : 140 ms  
P : 98 ms  
RR / PP : 908 / 909 ms  
P / QRS / T : 61 / 31 / -13 degrees

Normal sinus rhythm with sinus arrhythmia  
Normal ECG

