

Ujjawal Kumar.

(Both Eyes)

- Olopatadine eye drops

2 times daily

8am / 8pm. x 15 Days.

- maxmoist eye drops.

3 times Daily

[Signature]

Mr. UJJAWAL KUMAR
32/Y M
05-04-2023 AF-001001729

Patient Name : M	MR No:
Age/Sex :	Date:
Referred By :	



Health Check-Up Report

PRESENT COMPLAINTS:

- None

PRESENT MEDICATIONS:

PERSONAL HISTORY

Unmarried / Married

Diet : Eggetarian / Vegetarian / Mixed

Habits: Tobacco : Chews/Smokes Smokes
Alcohol : N.

Bladder : normal

Bowels : normal

Sleep : Normal / Disturbed

Physical Activity : Active/ Moderate / Sedentary

Drug / Any other allergy : Allergic Rhinitis.

Menstrual History : NA.

PAST MEDICAL HISTORY

NA.

FAMILY HISTORY

Father (HTN)

Physical Examination Findings

General Examination

Height 181 cm
Weight 96.4 kg
BMI 29.4 kg/m²
Pulse 86. / min
BP 130/10. mm of Hg
RR 16 /min

SPO₂ = 98.1.

Evidence of : pallor / Icterus / Pedal Oedema / Cyanosis / Clubbing

Abdominal Examination:

Cardiovascular System:

Normal

Respiratory System:

Musculoskeletal System:

Advice:

Doctor's Sign & Stamp:



Dr Merchant Adnaan

Regn.No I-80064-A

Physician

ENT EVALUATION

Name: Ujjawal Kumar	MR NO:
Age/Gender: 32/M.	Date: 5/4/23

EAR :

Tympanic Membrane:

Pre-auricular :-

Pina / EAC:

Mastoid Tuning Fork tests :-

Pure tone audiometry

(R) EAC wax (+) (L) (R) (L)
 (L) TM intact SR + +
 No MI/FP / nyst wb ↔

NOSE :-

External Nose :-

Anterior Rhinoscopy:-

Post - Nasal space:-

THROAT :-

70% scopy :

Tongue / palate / Teeth :-

AB = pale mucosa

NECK :-

Nodes :-

Thyroid :-

Glands :-

NOSE

Sleep -Related examination:-

Tongue - Base :-

Palate:-

Uvula:

PPW - (N)

neck - (N)

INVESTIGATIONS :

IMPRESSION:-

(R) EAC wax (+), Allergic Rhinitis
 Rest - nm


R

Dr .PRIYANKA J HARDIKAR
 M.B.B.S, M.S. (ENT), DNB
 Reg No. 2018/ 10/5156 MMC

- F. Montek cc 0-0-07
 - Duonase nls 2-0-2 puffs
 - Solinax eld 2"-2"-2"-2" x 7D

x 1SD

OPHTHALMIC EVALUATION

Name:	Mr. UJJAWAL KUMAR 32/Y M	MR NO:
Age / Sex:	05-04-2023 AF-001001729  PLP581978	Date:

Examination

Right Eye

Left Eye

Visual Acuity

Distance Vision

— 6/6 —

Near Vision

— N6 —

Color Vision

Normal/Defective

Refraction Prescription :

Right Eye			Left Eye		
Sph.	Cyl.	Axis	Sph.	Cyl.	Axis
-4.50	-0.75	60	-5.00		
Remarks			Remarks		

SLIT LAMP EXAMINATION:

Anterior Segment: NAD

IOP :- 18 mm of Hg.

Posterior Segment: WNL

REMARKS: NORMAL



Dr. Poonawala Murtaza H.
M.S. (Ophthal)
Reg. No. 85594
Consultant Ophthalmologist

WNL = Within Normal Limits
NAD = No abnormality detected.

DENTAL CHECKUP

Name:	Mr. UJJAWAL KUMAR 32/Y M 05-04-2023 AF-001001729	MR NO:
Age/Gender :	 SR01370771	Date:

Medical history: Diabetes Hypertension _____

EXAMINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Calculus& Stains	<i>A</i>	<i>+</i>	<i>+</i>	<i>+</i>
Mobility				
Caries (Cavities)				
a)Class 1 (Occlusal)	<i>16</i>		<i>36, 37</i>	
b)Class 2 (Proximal)				
c)Class 5 (Cervical)				
Faulty Restoration				
Faulty Crown				
Fractured Tooth				
Root Pieces				
Impacted Tooth				
Missing Tooth				
Existing Denture				

TREATMENT ADVISED:

TREATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Restoration / Filling	<i>16</i>		<i>36, 37</i>	
Root Canal Therapy				
Crown				
Extraction				

Oral Prophylaxis: Scaling & polishing
 Orthodontic Advice for Braces: Yes / No
 Prosthetic Advice to Replace Missing Teeth: Denture Bridge Implant
 Oral Habits: Tobacco Cigarette Others since ___ years
 Advice to quit any form of tobacco as it can cause cancer.
 Other Findings: _____

Dr. Prachi Shah
 Dr. Prachi Shah Manudhane
 BDS, GDC Mumbai (Reg.No. A-17381)
 Advanced Prosthodontics, UCLA, California, USA

Mr. UJJAWAL KUMAR
32/Y M
05-04-2023 AF-001001729
PLF1092397

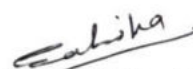
NUTRITION PRESCRIPTION For LOW FAT

	Registration Date:		
'rs./	Ht./Wt.:	Cms./	Kgs.

Keeping in mind your Medical Reports, health status, food intake, dietary habits, personalized Dietary Instructions are provided here.

DIETARY RECOMMENDATIONS:-Changes with regards to your present Dietary habits,

- Start your day with 1 tsp of methi seeds soaked overnight. Gulp methi along with water.
- Have 2 walnuts and 2 tsps of flaxseed daily.
- Have Salad vegs like- cucumber, tomato, onion, cabbage, carrots and raddish.
- Have roasted snacks like popcorns, channas, riceflakes, puffed rice.
- **CEREALS-** Include more of Whole grains in a diet and avoid refined flour and its products .
- **VEGS-** Include more of green leafy vegetables.
- **MILK-** Avoid butter, ghee, cream, cheese, whole milk, Dalda .
- **NUTS-** Avoid coconut, peanut, cashewnut.
- **NON-VEG-** Have more of Egg whites, chicken, fish.
- Limit papad, pickles, oily chutneys, fried foods, sugar, sweets, creamy foods, mayonnaise, chocolates, ice-cream, junk foods & fast foods.
- Use Non-stick cookware for cooking your food.
- Use groundnut, Mustard, Til ,Rice bran oil. ½ liter per person /month
- Oil /Ghee consumption – 3-4 tsp/day. Cook your meal separately to restrict fat in diet.
- Avoid vanaspati, margarine, bakery products like cakes, pastries, cream-biscuits.
- Drink plenty of water, at least 12-15 glasses (2.5 -3 liters) / day.
- Exercise daily for 45-60 mins either brisk walking, jogging, swimming. If medical complaint then as per doctor's advise.


Dr. Sabiha Siddiqui
BHSc,P.G.Dietetics,CDE,DNYS
(Head Clinical Dietitian & Nutritionist)



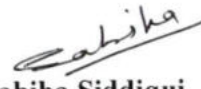
DIET CHART

TIME	MEAL	MENU	AMOUNT [HOUSEHOLD MEASURES]
7:30 am	Early morning	Warm Water	1 glass
		Aerobic Exercise	45 mins. (minimum)
9:00am	Breakfast	Tea / coffee/ Milk (skimmed)	50 ml milk
		Veg poha /Oats Upma / Veg Dahlia	1 vati
		Phulka / Methi Khakra / Bhakri	Medium size -2 nos (no oil / ghee)
11:00am	Mid – Morning	Fruit	1 Medium size
1: 00 pm	Lunch	Salad / Thin soup	1 Big Bowl
		Cucumber ,Tomato, cabbage, onion , sprouted pulses . etc	
		Roti / Phulka	2 small / 1 big
		Vegetables	1-2 Vati (cook in 1 tsp oil)
		Rice	1 vati
		Dal	1 Vati
		Curd (skimmed)/ Buttermilk	1/2 cup /1 glass
4:00pm – 6.00pm	Evening	Diet Khakra / digestive oats biscuit	1 / 2 nos only
		Roasted chana/Roastedrice flakes / sprouts bhel, /sweet corns	1 handful 1 small katori
		Tea	1 cup

8:30pm	Dinner	SAME AS LUNCH (except rice)	
	OPTIONS	Veg khichdi + kadhi /curd	2 Vatis / 1 vati
	OPTIONS	Bhakri -Wheat /Bajra/Jowar Vegetable Dal	2 nos 1 vati 1 vati
10:00pm	Bed – Time	Milk (Skimmed)	100 ml milk

Total calories/day	Oil /Ghee /day	Salt/day
1500 Kcals	4 tsps	3/4 tsp

- Oil intake should be ½ liter per person per month.
- Consume Green tea/ Herbal tea 2-3 cups/ day.
- Take 1 Tsp Flaxseed (Aisi) after lunch and dinner (optional)


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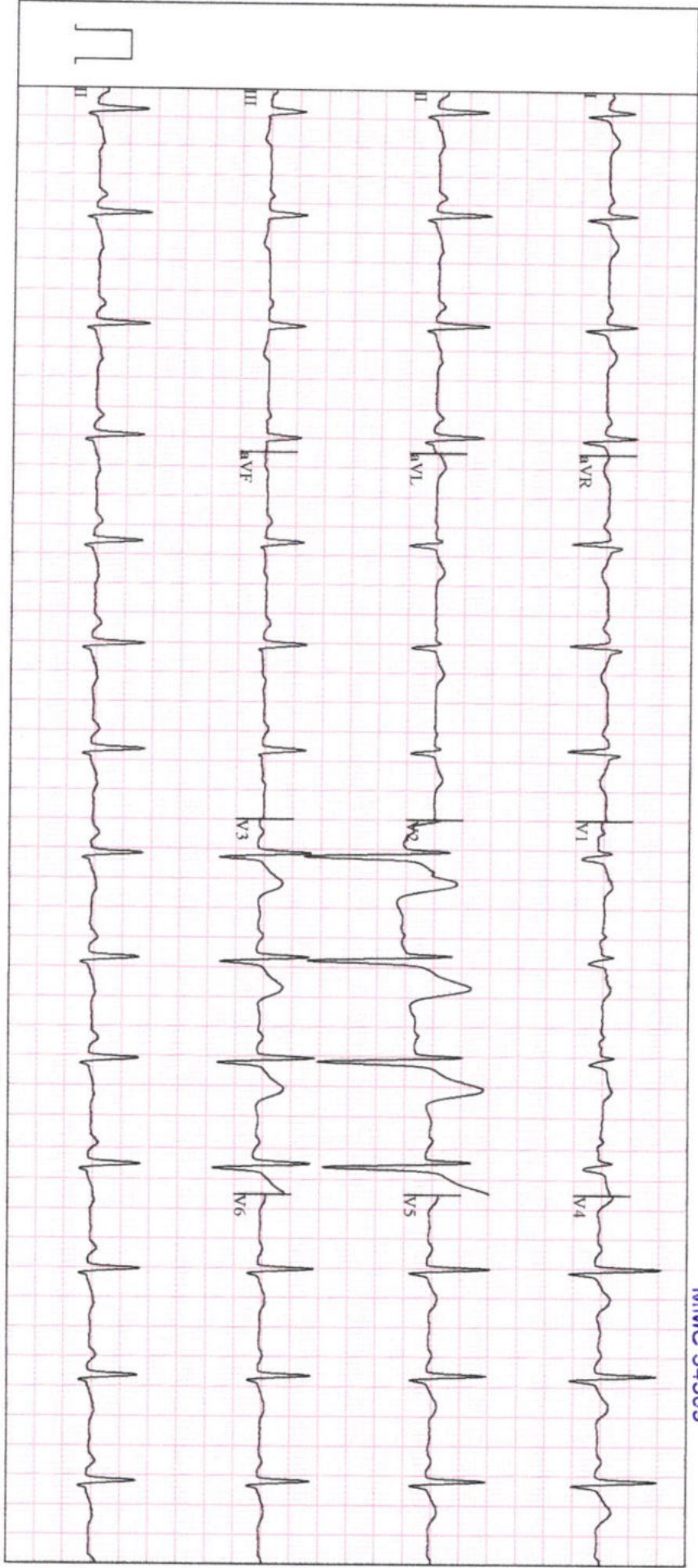
MR UJJAWAL KUMAR
1729

32 Year Male

QRS : 82 ms
QT / QTcBaz : 348 / 411 ms
PR : 148 ms
P : 106 ms
RR / PP : 714 / 714 ms
P / QRS / T : 52 / 77 / 7 degrees

05.04.2023 10:21:31
THE APOLLO CLINIC
COLABA
MUMBAI-400001

Normal sinus rhythm
Nonspecific T wave abnormality
Abnormal ECG



GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz Unconfirmed 4x2.5x3_25_R1 1/1

*Nonspecific T wave
change in previous leads*

DR. JAGDISH VASWANI
M.B.S., M.D (MED)
MMC 54309

84 bpm
--/-- mmHg

NAME : MR. UJJAWAL KUMAR

AGE/SEX : 32 YEARS / MALE

MR NO : 1729

REF. BY : ACROFEMI MEDIWHEEL

DATE : 05/04/2023

2D ECHOCARDIOGRAPHY AND COLOR DOPPLER STUDY

2D ECHOCARDIOGRAPHY FINDINGS :

1. No LV Dilatation. No LV Wall Hypertrophy.
2. No Significant LV RWMA seen at rest.
3. Good LV Systolic function. LVEF appears to be 60 %.
4. No LV Diastolic Dysfunction. Normal LVEDP.
5. Structurally normal all cardiac valves. No PAH
6. Normal sized LA / RA/ RV with good RV contractility. No Hepatic Congestion.
7. IAS and IVS appear intact.
8. No obvious clot seen.
9. No vegetations or pericardial effusion.
10. Normal Sinus Rhythm.

IMPRESSION

Normal all Cardiac chambers.

Normal LV systolic function.

No LV DD. Normal LVEDP.

Normal valves. No PAH.

No Clots / Vegetations/Pericardial effusion.

Normal Sinus Rhythm.



DR SUNDEEP AMBERKAR
M.D., F. C. P.S., Dip. Echo.

APOLLO CLINIC (COLABA)

Name: UJJAWAL KUMAR
MRN: 23-04-05-104044

Study Date: 05/04/2023 10:40
Gender: Male

Cardiac

Dimension

MMode

IVSd (MM): 0.952 cm

IVSs (MM): 1.39 cm

LVIDd (MM): 4.68 cm

LVIDs (MM): 3.17 cm

LVPWd (MM): 1.03 cm

LVPWs (MM): 1.78 cm

AoR Diam (MM): 2.86 cm

AV Cusp Sep: 2.02 cm

LA Dimen (MM): 3.33 cm

EDV (MM-Teich): 101 ml

EF (MM-Teich): 60.4 %

ESV (MM-Teich): 40.1 ml

FS (MM-Teich): 32.2 %

IVS/LVPW (MM): 0.923

IVS % (MM): 45.8 %

LA/Ao (MM): 1.17

LV Mass (Cubed): 161 grams

LVPW % (MM): 73.1 %

Aortic Valve

Doppler

AV Vmax: 133 cm/s

LVOT VTI: 19.3 cm

AV Max PG: 7.06 mmHg

LVOT Vmax: 107 cm/s

LVOT Max PG: 4.57 mmHg

LVOT Vmean: 76.5 cm/s

LVOT Mean PG: 2.61 mmHg

Mitral Valve

MV E-F Slope: 9.43 cm/s
MV E-F Time: 0.193 sec
MV E-F Dist: 1.82 cm
MV EPSS: 0.397 cm

Doppler

MV Peak A Vel: 52.3 cm/s
MV Peak A PG: 1.09 mmHg

MV Peak E Vel: 74.5 cm/s (Avg.)
MV Peak E PG: 2.22 mmHg (Avg.)
MV Dec Slope: 486 cm/s²
MV Dec Slope Time: 0.157 sec
MV DS P1/2t: 44.7 msec

MV Peak E Vel: 74.5 cm/s (Avg.)
MV Peak E PG: 2.22 mmHg (Avg.)

MV E/A: 1.43

Tricuspid Valve

Doppler

TR Vmax: 219 cm/s (Avg.)
TR Max PG: 19.2 mmHg (Avg.)

Pulm Valve

Doppler

PI End Dias Vel: 162 cm/s
PI End Dias PG: 10.5 mmHg
PV Vmax: 108 cm/s
PV Max PG: 4.70 mmHg

Interpretation Summary

Comments

Patient Name : Mr. Ujjawal Kumar

Age : 32 yrs

Ref. By : Arcofemi

MR No : AF001001729

Sex : Male

Date : 05-04-2023

X-RAY CHEST PA VIEW

The lungs are clear.

Heart size is normal.

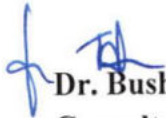
Pleural spaces are clear.

Bilateral costophrenic angles are clear.

Bony thorax and soft tissues are unremarkable.

IMPRESSION:

No significant abnormality detected.



Dr. Bushra Rasool
Consultant Radiologist

Patient Name : Mr. Ujjawal Kumar

MR No : AF001001729

Age : 32 yrs

Sex : Male

Ref. By : Arcofemi

Date : 05-04-2023

ULTRASOUND OF ABDOMEN AND PELVIS

LIVER: It is mildly enlarged in size . It measures 15.4 cm. The parenchyma shows mildly increased in echo-texture. No focal lesion seen. Intra-hepatic biliary and portal radicles are normal. The main portal vein is normal.

GALL BLADDER: is partially distended. No calculus or mass seen. The wall thickness is normal. No peri-cholic abnormality seen. The common bile duct is normal. No evidence of choledocholithiasis seen.

PANCREAS: It is normal in size and echotexture. No focal lesion seen. No peri-pancreatic collection noted. The main pancreatic duct is normal.

SPLEEN: It is normal in size and echotexture. Splenic vein is normal.

BOTH KIDNEYS: Both kidneys are normal in size, shape and position. The parenchyma shows normal echo-texture. Cortico-medullary differentiation is well maintained.

Right kidney measures 11.3 x 4.9 cm.

Left kidney measures 12.5 x 5.0 cm. **Mid pole cortical cyst approx measuring 8.2 mm. Mid pole small calculi are noted approx measuring 2.8 mm and 2.3 mm.**

No evidence of hydronephrosis seen.

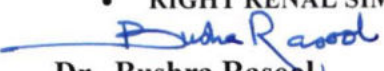
URINARY BLADDER: It is adequately distended. The margins are smooth. No vesical mass or calculus seen.

PROSTATE: is normal in size and shape. The parenchyma is normal. It measures 4.2 x 2.9 x 3.2 cm. The weight measures approx 20 cc.

No ascitis or lymphadenopathy noted.

IMPRESSION:

- MILD HEPATOMEGALY WITH GRADE I FATTY LIVER.
- RIGHT RENAL SIMPLE CORTICAL CYST AND SMALL NON-OBSTRUCTING CALCULI.


Dr. Bushra Rasool
Consultant Radiologist

Note: USG examinations have their limitations due to patient body habitus and bowel gas. Bowel abnormalities may not be detected on sonography. This document is not valid for medico-legal purpose.



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Close to Delhi Darbar Hotel, Convent Street, Colaba, Mumbai - 400 001.
Tel.: 022-22021122, ☎: 8450982226,
E:apolloclicmumbai@gmail.com, apollocliniccolaba@gmail.com



Name : Mr. Ujjawal Kumar Gender : Male Age : 32 Years
UHID : AF-001001729 Bill No : Lab No : c-499-23
Ref. by : Arcofemi Healthcare Sample Col.Dt : 05/04/2023 09:13
Barcode No : 1484 Reported On : 05/04/2023 14:06

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

URINE REPORT

PHYSICAL EXAMINATION

QUANTITY	30	mL
COLOUR	Pale Yellow	
APPEARANCE	Clear	Clear
SEDIMENT	Absent	Absent

CHEMICAL EXAMINATION(Strip Method)

REACTION(PH)	7.0	4.6 - 8.0
SPECIFIC GRAVITY	1.015	1.005 - 1.030
URINE ALBUMIN	Absent	Absent
URINE SUGAR(Qualitative)	Absent	Absent
KETONES	Absent	Absent
BILE SALTS	Absent	Absent
BILE PIGMENTS	Absent	Absent
UROBILINOGEN	Normal(<1 mg/dl)	Normal
OCCULT BLOOD	Absent	Absent
Nitrites	Absent	Absent

MICROSCOPIC EXAMINATION

PUS CELLS	1 - 2/hpf	0 - 3/hpf
RED BLOOD CELLS	Nil /HPF	Absent
EPITHELIAL CELLS	2 - 3 /hpf	3 - 4/hpf
CASTS	Absent	Absent
CRYSTALS	Absent	Absent
BACTERIA	Absent	Absent

Shweta Unavane
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically



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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Fasting Plasma Glucose :	94	mg/dL	Normal < 100 mg/dL Impaired Fasting glucose : 101 to 125 mg/dL Diabetes Mellitus : >= 126 mg/dL (on more than one occasion) (American diabetes association guidelines 2016)
Post Prandial Plasma Glucose :	122	mg/dL	Normal < 140 mg/dL Impaired Post Prandial glucose : 140 to 199 mg/dL Diabetes Mellitus : >= 200 mg/dL (on more than one occasion) (American diabetes association guidelines 2016)
Fasting Urine Glucose :	Absent		
Fasting Urine Acetone :	Absent		
Post Prandial Urine Glucose :	Absent		
Post Prandial Urine Acetone :	Absent		
Method :	Hexokinase		

Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By


Page 2 of 2
Dr. Milind Patwardhan
MD(Path)
Chief Pathologist

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

HbA1c(Glycosylated Haemoglobin)WB-EDTA

(HbA1C) Glycosylated Haemoglobin : 5.8 % Normal <5.7 %
Pre Diabetic 5.7 - 6.5 %
Diabetic >6.5 %
Target for Diabetes on therapy < 7.0 %
Re-evaluation of therapy > 8.0 %

Mean Blood Glucose : 119.76 mg/dL

Correlation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298

Method High Performance Liquid Chromatography (HPLC).

INTERPRETATION

- * The HbA1c levels correlate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- * This Methodology is better than the routine chromatographic methods & also for the diabetic pts. having HEMOGLBINOPATHIES OR UREMIA as Hb variants and uremia does not INTERFERE with the results in this methodology.
- * It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts. & every 3 - 4 months in well controlled diabetics .
- * Mean blood glucose (MBG) in first 30 days (0-30) before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels

Sushant Gaikwad
Entered By

Ms Kaveri Gaonkar
Verified By


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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

LFT(Liver Function Tests)-Serum

S.Total Protein (Biuret method)	7.52	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.75	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.77	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.71		0.9 - 2
S.Total Bilirubin (DPD):	0.70	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.23	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.47	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	33	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	47	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	129	U/L	40 - 129
S.GGT(IFCC Kinetic):	47	U/L	11 - 50

Vasanti Gondal
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Verified By

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

Lipid Profile- Serum

S. Cholesterol(Oxidase)	153	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	115	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	23	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	<u>34.6</u>	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	95.4	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	4.4		3.5 - 5
Ratio of LDL/HDL	2.8		2.5 - 3.5

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

RFT - Renal Profile-serum

S.Urea(Urease-GLDH)	18.0	mg/dL	10.0 - 45.0
S. Urea Nitrogen(Calculated)	8.4	mg/dL	5 - 20
S.Creatinine(Jaffe's Kinetic)	0.88	mg/dL	0.50 - 1.3
S.Uric Acid(Uricase-POD)	6.2	mg/dL	3.4 - 7.0
S.Total Protein(Biuret)	7.52	g/dL	6.6 - 8.7
S.Albumin(BCG)	4.75	g/dL	3.5 - 5.2
S.Globulin(Calculated)	2.77	g/dL	2 - 3.5
A/G Ratio(Calculated)	1.71		0.9 - 2
S.Sodium(Na) (ISE-Direct)	141	mmol/L	135 - 145
S.Potassium(K) (ISE-Direct)	4.5	mmol/L	3.5 - 5.3
S.Chloride(Cl) (ISE-Direct)	105	mmol/L	95 - 106
S.Calcium(NM-BAPTA)	9.43	mg/dL	8.6 - 10.0
S.Phosphorus(UV Phosphomolybdate)	2.67	mg/dL	2.5 - 4.5

Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically



Indira Health And Lifestyle Private Limited.
NABL Accredited Laboratory
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Close to Delhi Darbar Hotel, Convent Street, Colaba, Mumbai - 400 001.
Tel.: 022-22021122, ☎: 8450982226,
E: apolloclinicmumbai@gmail.com, apollocliniccolaba@gmail.com



Name : Mr. Ujjawal Kumar Gender : Male Age : 32 Years
UHID : AF-001001729 Bill No : Lab No : c-499-23
Ref. by : Arcofemi Healthcare Sample Col.Dt : 05/04/2023 09:13
Barcode No : 1484 Reported On : 05/04/2023 18:55

TEST

RESULTS

Blood Grouping (ABO & Rh)-WB(EDTA) Serum

ABO Group: **:A:**
Rh Type: **Positive**
Method : Tube Agglutination (forward and reverse)

Anushka Chavan
Entered By

Ms Kaveri Gaonkar
Verified By

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)

Haemoglobin(Colorimetric method)	14.3	g/dl	13 - 18
RBC Count (Impedance)	4.69	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	44.3	%	35 - 55
MCV:(Calculated)	94.3	fl	78 - 98
MCH:(Calculated)	30.5	pg	26 - 34
MCHC:(Calculated)	32.4	gm/dl	30 - 36
RDW-CV:	16.2	%	11.5 - 16.5
Total Leucocyte count(Impedance)	8890	/cumm.	4000 - 10500
Neutrophils:	55	%	40 - 75
Lymphocytes:	32	%	20 - 40
Eosinophils:	10	%	0 - 6
Monocytes:	03	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	1.69	Lakhs/c.mm	1.5 - 4.5
MPV	11.1	fl	6.0 - 11.0
ESR(Westergren Method)	02	mm/1st hr	0 - 20

Peripheral Smear (Microscopic examination)

RBCs: Normochromic, Normocytic

WBCs: Eosinophilia

Platelets: Adequate

Note: Test Run on 5 part cell counter. Manual diff performed.

Sushant Gaikwad
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
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Chief Pathologist

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

Thyroid (T3,T4,TSH)- Serum

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
Total T3 (Tri-iodo Thyronine) (ECLIA)	2.01	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	72.25	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	1.82	µIU/ml	Euthyroid : 0.35 - 5.50 µIU/ml Hyperthyroid : < 0.35 µIU/ml Hypothyroid : > 5.50 µIU/ml

Grey zone values observed in physiological/therapeutic effect.

Note:

T3 :

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyroidism.
2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites ,Pregnancy, Drugs (Androgens,Estrogens,O C pills, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

T4 :

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

TSH :

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

Vasanti Gondal
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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Fasting Plasma Glucose : 94 mg/dL Normal < 100 mg/dL
Impaired Fasting glucose : 101 to 125 mg/dL
Diabetes Mellitus : >= 126 mg/dL
(on more than one occasion)
(American diabetes association guidelines 2016)

Post Prandial Plasma Glucose : 122 mg/dL Normal < 140 mg/dL
Impaired Post Prandial glucose : 140 to 199 mg/dL
Diabetes Mellitus : >= 200 mg/dL
(on more than one occasion)
(American diabetes association guidelines 2016)

Fasting Urine Glucose : Absent
Fasting Urine Acetone : Absent

Post Prandial Urine Glucose : Absent
Post Prandial Urine Acetone : Absent

Method : Hexokinase

Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By


Dr. Milind Patwardhan
Page 10 of 10 (Path)
Chief Pathologist

End of Report
Results are to be correlated clinically

Mr. UJJAWAL KUMAR

32/Y

M

05-04-2023 AF-001001729



PLP581978

Pls:
- Low fat diet
- PK abt 2-3 hrs
- for day

