

Patient Name : **MR. VARUN SOOD**  
Patient ID : 41227  
Age / Sex : 39 years / Male  
Referred by : MEDIWHEEL  
Bill ID : 68269

Collected : Sep 10, 2022, 09:52 a.m.  
Reported : Sep 10, 2022, 04:04 p.m.  
Sample ID :



Test Description	Results	Units	Biological Reference Range
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**TOTAL TRIIODOTHYRONINE (T3)**

Sample Type : Serum

TotalTriiodothyronine (T3) [ CLIA ]	2.06	ng/dL	0.69 - 2.15
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\*\*END OF REPORT\*\*



**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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191191

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**TOTAL THYROXINE ( T4 )**

Sample Type : Serum

Total Thyroxine ( T4 ) [ CLIA ]	85.75	ng/ml	52 - 127
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**\*\*END OF REPORT\*\***

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
	<b><u>ESR</u></b>		
Sample Type : EDTA / Whole Blood			
ESR	10	Mm/hr	0 - 15
Method	Westergren		

\*\*END OF REPORT\*\*

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**COMPLETE BLOOD COUNT**

Sample Type : EDTA / Whole Blood

Hemoglobin	<b>8.8</b>	g/dl	13.0 - 17.0
RBC COUNT	4.53	Millions/c	4.5 - 5.5
PCV(Hematocrit)	<b>29.6</b>	%	40.0 - 50.0
Mean Cell Volume(MCV)	<b>65.34</b>	fl	80.0 - 100.0
Mean Cell Hemoglobin(MCH)	<b>19.43</b>	pg	27.0 - 33.0
Mean Cell Hb Conc(MCHC)	<b>29.73</b>	g/dl	32 - 36
RDW	<b>18.3</b>	%	11.50 - 14.50
Total Leucocytes (WBC) Count	6480	/cumm	4000-11000

**DIFFERENTIAL COUNT**

Neutrophils	59.6	%	40 - 70
Lymphocytes	24.7	%	20 - 50
Eosionphils	<b>9.9</b>	%	01 - 06
Monocytes	5.7	%	00 - 08
Basophils	0.10	%	00-01

**SMEAR STUDY**

RBC Morphology	<b>Hypochromia(++),Microcytosis(++), Anisopoikilocytosis(+).</b>		
WBC Morphology	<b>Eosinophilia.</b>		
Platelets On Smear	Adequate on Smear		
Platelet Count	205000	/cumm	150000 - 450000
MPV	<b>10.9</b>	fL	6.5 - 10.0

**Comments :-****Method:-**

HB:-Colorimetric,Total WBC:-Impedance/Flow Cytometry,HCT, MCV, MCH, MCHC, RDW-CV:-Calculate, Diff. Count: Flow Cytometry / Manual Stained Smear Microscopy, RBC: Impedance,Platelets : Impedance Method.

**Technique :-**

Fully Automated 5 part Diff. Cell Counter .

All Test Results are subjected to stringent international External and Internal Quality Control Protocols

\*\*END OF REPORT\*\*

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**BLOOD UREA LEVEL ( BUL )**

Sample Type : Serum

<b>Urea</b>	16.60	mg/dl	10 - 40
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[ Urease - GLDH ]

<b>Bun</b>	7.75	mg/dl	6 - 21
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[ Calculated ]

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

\*\*END OF REPORT\*\*



**Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**CREATININE**

Sample Type : Serum

<b>Creatinine</b>	0.80	mg/dl	0.40 - 1.40
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[ Enzymatic ]

Formula

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

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

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**SR. URIC ACID**

Sample Type : Serum


<b>Uric Acid</b> [ Uricase - POD ]	3.60	mg/dl	3.6 - 7.7
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200.

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

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**LIVER FUNCTION TEST**

Sample Type : Serum

TOTAL BILIRUBIN [ DIAZO ]	0.81	mg/dl	0.3-1.3 mg/dl
BILIRUBIN-DIRECT [ DIAZO ]	0.39	mg/dl	0.1-0.4 mg/dl
BILLIRUBIN-INDIRECT [ CALCULATED ]	0.42	mg/dl	0.1-0.9 mg/dl
S.G.O.T. (AST) [ IFCC without Pyridoxal Phosphate ]	31.20	IU/L	5-40 IU/L
S.G.P.T.(ALT) [ IFCC without Pyridoxal Phosphate ]	24.20	IU/L	5-40 IU/L
ALKALINE PHOSPHATASE [ Amino Methyl Propanol (AMP) ]	95.00	IU/L	44-147 IU/L
TOTAL PROTEINS [ BIURET ]	7.56	IU/L	6.0 - 8.5g/dL
ALBUMIN [ BROMO CRESOL GREEN (BCG) ]	3.82	g/dl	3.5-5.0 g/dl
GLOBULIN [ CALCULATED ]	3.74	gm%	2.3-3.5 gm%
ALBUMIN/GLOBULIN RATIO [ CALCULATED ]	1.02		

Technique : Fully Automated Biochemistry Analyser ERBA EM-200

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

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461



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**URINE ANALYSE REPORT**

Sample Type : Urine

**PHYSICAL EXAMINATION**

COLOUR	Pale Yellow		
APPEARANCE	Clear		
REACTION (PH)	6.0		4.8 - 7.6
SPECIFIC GRAVITY	1.015		1.010 - 1.030
ALBUMIN	Absent		
GLUCOSE	Absent		
BLOOD (U)	Absent		
BILE PIGMENTS	Negative		
BILE SALTS	Absent		
KETONE	Negative		
LEUKOCYTES	Absent		
NITRITE	Absent		
UROBILINOGEN	Negative		

**MICROSCOPY**

PUS CELLS/hpf	1-2
RBCs/hpf	Absent
EPI.CELLS/hpf	1-2
CASTS	Absent
CRYSTALS	Absent
BACTERIA	Absent
Other	Absent

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

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
<b><u>GLYCOCYLATED HAEMOGLOBIN</u></b>			
Sample Type : EDTA / Whole Blood			
Glycocyalted Haemoglobin (HbA1c) [ Tosoh HPLC ]	5.3	%	<5.7%NON DIABETIC 5.7-6.4% PRE-DIABETIC >6.5% DIABETIC <7.0% GOAL FOR DIABETIC ON TREATMENT
MEAN BLOOD GLUCOSE	<b>105.41</b>	mg/dL	116.89 - 154.2

\*\*END OF REPORT\*\*

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**LIPID PROFILE**

Sample Type : Serum

TOTAL CHOLESTEROL

121.30

mg/dL

Desirable : &lt;200 mg/dl

[ CHOD-PAP ]

Borderline : 200 - 239mg/dl

High : &gt;240 mg/dl

TRIGLYCERIDES

95.80

mg/dL

Desirable : &lt;150 mg/dl

[ Glycerol Phosphate Oxidase ]

Borderline : 150 - 199mg/dl

High : &gt;200mg/dl

HDL CHOLESTEROL [ Direct ]

40.90

mg/dL

Desirable : &gt;40 mg/dl

Borderline Risk : 35 mg/dl

High Risk : &lt;30 mg/dl

LDL CHOLESTEROL [ Calculated ]

61.24

mg/dL

Desirable : &lt;100 mg/dl

Borderline : 130 - 160mg/dl

High : &gt;160mg/dl

VLDL Cholesterol

19.16

mg/dL

Desirable : &lt;26 mg/dl

[ Calculated ]

Borderline : &gt;30 mg/dl

Total Chol / HDL Chol Ratio

2.97

mg/dL

Desirable : &lt;5 %

[ Calculated ]

LDL / HDL Ratio

1.50

1.00 - 3.55

[ Calculated ]

NON-HDL CHOLESTEROL

80.40

mg/dL

Desirable : &lt;130 mg/dl

[ Calculated ]

Borderline : 160 - 189 mg/dl

High : &gt;220 mg/dl

**Technique:**

Fully Automated Biochemistry Analyser ERBA EM-200.

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

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**BLOOD GROUP**

Sample Type : EDTA / Whole Blood

ABO Grouping

"O"

Rh Grouping

POSITIVE

**Note:**

These report is for information purpose only. Blood group needs to be reconfirmed at the time of cross matching for blood transfusion.

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\*\*END OF REPORT\*\*



**Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**POST PRANDIAL BLOOD SUGAR**

Sample Type : Flouride PP

Post Prandial Blood Sugar [ GOD - POD ]	<b>108.20</b>	mg/dl	110-180
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

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

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
<b><u>FASTING BLOOD SUGAR</u></b>			
Sample Type : Flouride R			
Fasting Blood Sugar [ GOD - POD ]	98.60	mg/dl	Normal : 70 - 99 mg/dl impaired Tolerance : 100 - 125mg/dl Diabetes Mellitus : >126 mg/dl
Technique :-	Fully Automated Biochemistry Analyser ERBA EM-200		

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

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**ULTRASENSITIVE THYROID STIMULATING HORMONE (TSH)**

Sample Type : Serum

<b>Ultrasensitive Thyroid Stimulative Hormone (TSH)</b> [ CLIA ]	1.45	μIU/mL	0.3 - 4.5 1st trimester - 0.1 - 2.5μIU/mL 2nd trimester - 0.2 - 3μIU/mL 3rd trimester - 0.3 - 3μIU/mL
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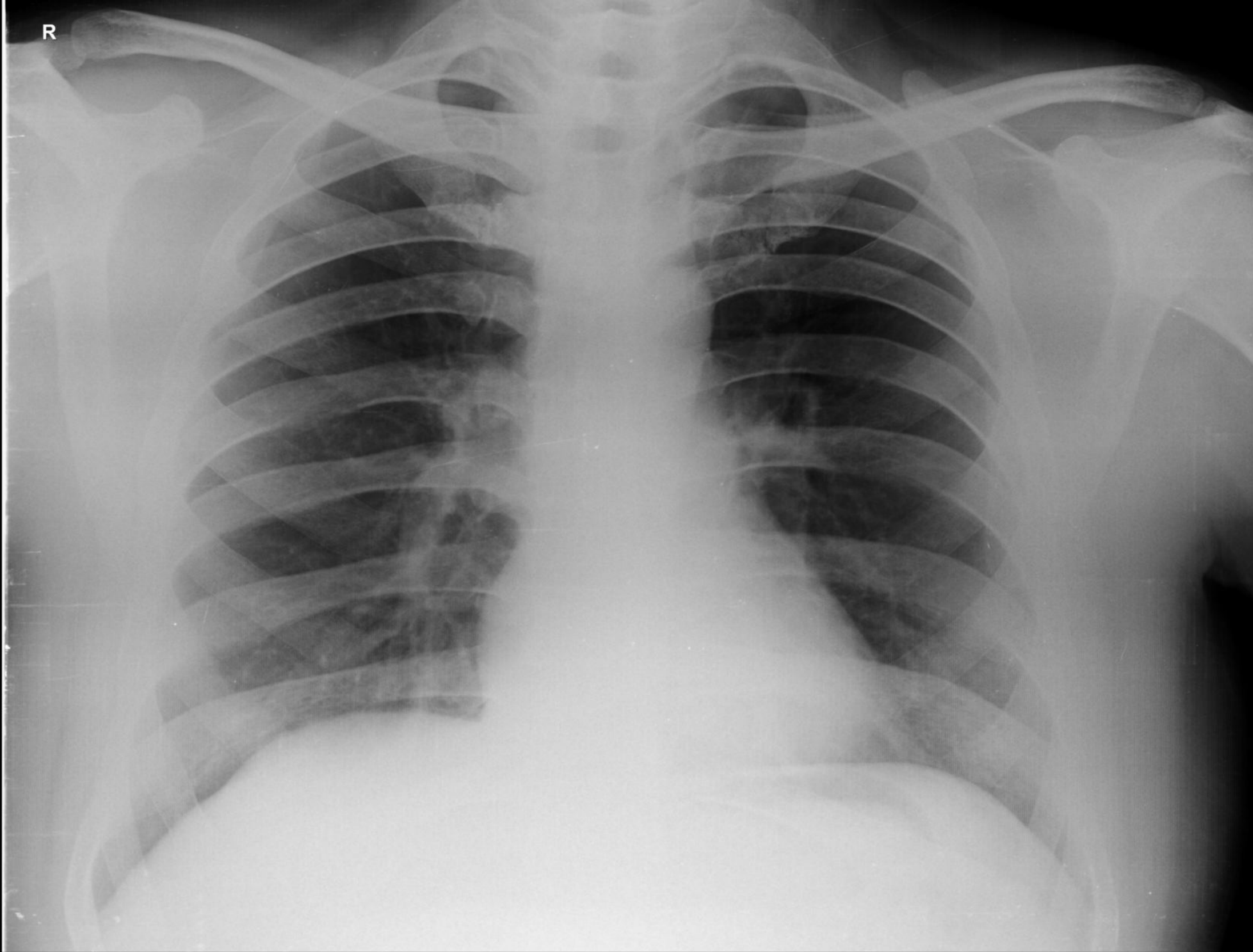
**Clinical Significance :-**

1. Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night.
2. Useful for: Screening for thyroid dysfunction and detecting mild (subclinical), as well as overt, primary hypo- or hyperthyroidism in ambulatory patients.
3. Monitoring patients on thyroid replacement therapy.
4. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine suppression therapy.
5. Prediction of thyrotropin-releasing hormone-stimulated TSH response.

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\*\*END OF REPORT\*\*

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461



**VARUN SOOD 38YRS                      9/10/2022**  
**OLIVE DIAGNOSTIC, SEAWOOD SEC40**



Name- VARUN SOOD

Date-10/9/2022

Age-38/M

**X-Ray Chest PA**

The Soft Tissues And Bony Thorax Are Normal.

Both The Costoprehnic And Cardiophrenic Angles Are Clear.

The Lung Field Appears Normal.

The Cardiac Shape And Size Are Normal.

Both The Hila Are Normal In Density And Position.

Both The Domes Of Diaphragm And Mediastinum Are Normal.

**Impression: Normal Chest X-Ray.**

For, 

**DR. MRUDULA BABAR  
CONSULTANT RADIOLOGIST****Dr. MRUDULA BABAR  
DMRE.CPS Mumbai 2009  
(RADIOLOGIST)  
Reg. No. 2005/03/2139**

ECHO Report

Date-10/09/2022

**Patient Details**

Patient ID –

Name- MR VARUN SOOD  
Age- 38YEARS  
Gender- MALE  
Blood Group NOT DETERMINED  
Referral Doctor MEDIWHEEL

**ECHO Identification Detail**

Doctor Incharge DR MAHESH PADSALGE

Clinical Status of Patient

ECHO Code

- Finding description-
1. Normal cardiac chambers dimensions.
  2. Normal LV systolic function .
  3. No RWMA.
  4. All cardiac valves are structurally normal.
  5. Trivial MR, Trivial PR,NO AR.
  6. No PAH.
  7. Normal RV systolic function.
  8. No clot/vegetation/pericardial effusion.
  9. No coarctation of aorta.



**Chamber Dimensions-M mode Findings**

Lvid (Diastole) 35-56(mm) - 35.00  
 IVS (Diastole) 8-12(mm) - 10.00  
 LVPWT (Diastole) 6-11(mm) - 10.00  
 LVEF (%) - 65%

Lvid (Systole) 24-42 (mm) - 29.00  
 IVS (Systole) 14-42 (mm) - 16.00  
 EPSS - 2.00  
 LVFS (%) - 36.00

LV Volume (Diastolic)(mm<sup>3</sup>)  
 Meridional Wall Stress in System

LV Volume (Systolic)(mm<sup>3</sup>)  
 Cubed LV Volume in Diastole (mm<sup>3</sup>)

Cubed LV+ myocardial volume (mm<sup>3</sup>)

Velocity of circumferential  
 Shortening (mm)

Aortic root 22-37(mm) - 29.00  
 Left Atrium Length (mm) - 27.00  
 Left Atrium Volume (mm<sup>3</sup>)  
 RV size Normal  
 RV volume (mm<sup>3</sup>)  
 Pericardium Normal  
 Effusion None  
 Resp Variation Present  
 Predicted RV Systolic Pressure

Left Atrium Width (mm)  
 Left Atrium Area (mm<sup>2</sup>)  
 RV Function Normal  
 RA Size Normal

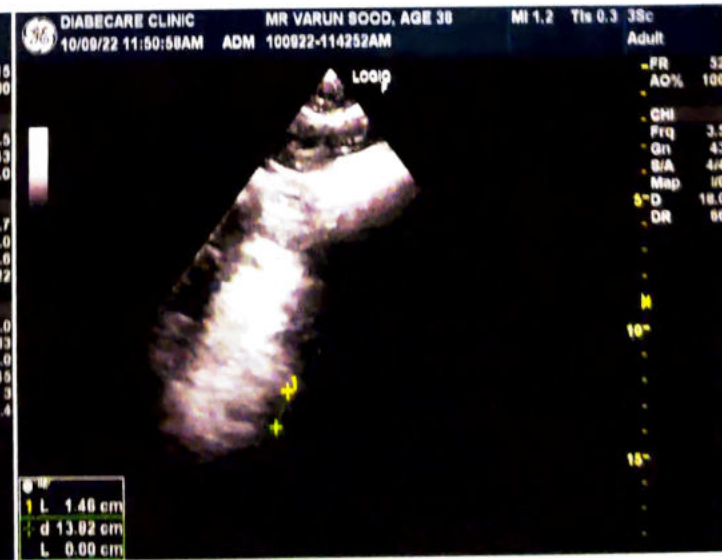
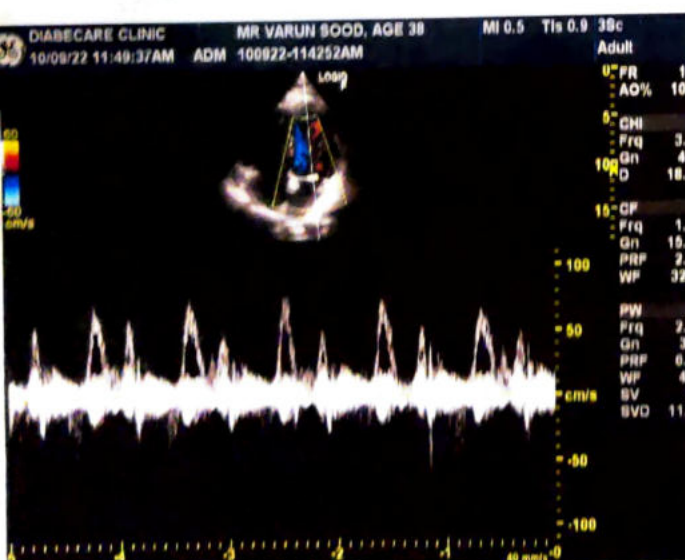
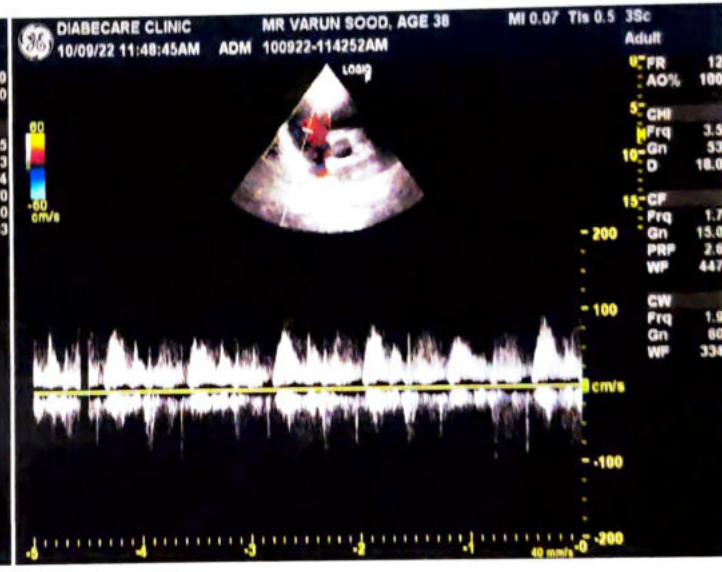
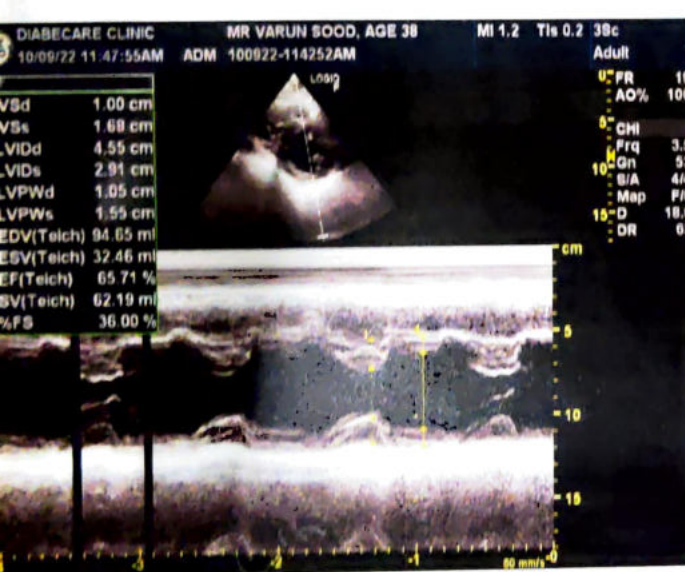
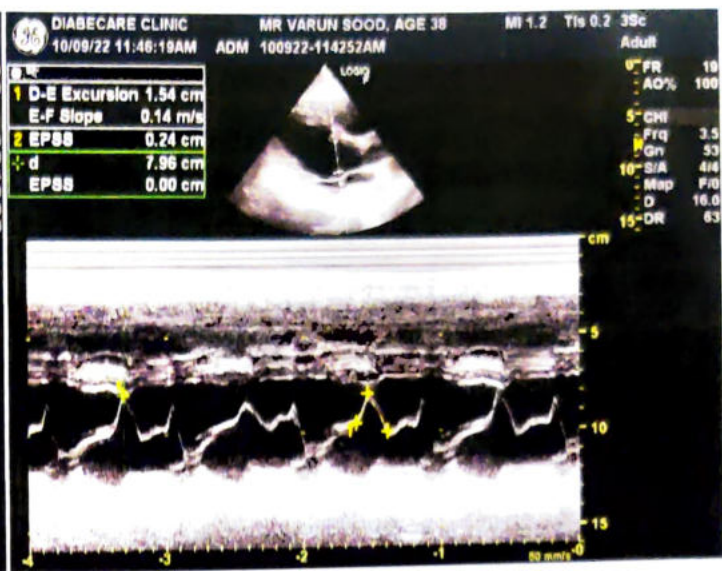
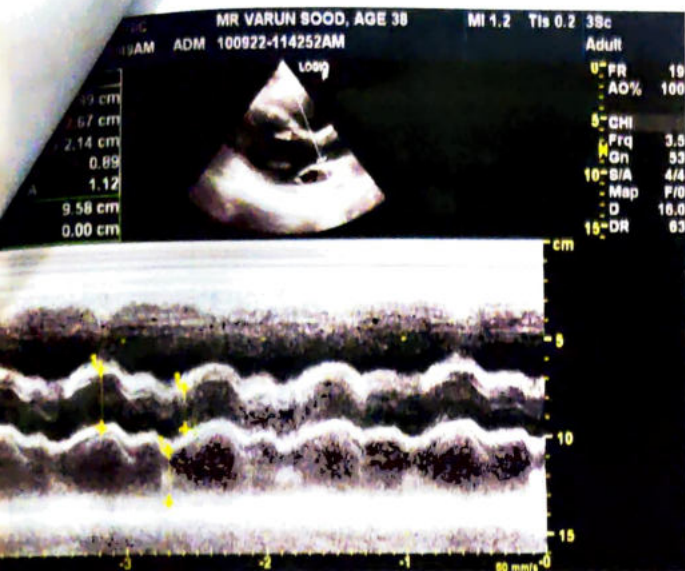
IVC Size (mm) 14 COLLAPSIBLE



Dr. Mahesh Padsalge

**Dr. Mahesh V. Padsalge**  
 MD. (Medicine)  
 Consultant Physician  
 Reg. No. 91424 (MMC)





Varun Sood

38/M

10/9/22

Optics

(R)

(L)

VA (A) 6/6

(A) 6/6

NC

NC

Color Vn

(A)

(A)

A/seg

(A)

(A)

Fundus

(A)

(A)

(150)

water

ly

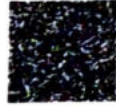
Varun Sood



भारत सरकार  
Government of India



वरुण सूद  
Varun Sood  
जन्म तिथि/DOB: 07/08/1984  
पुरुष/ MALE



3718 0323 8025  
VID: 9165 5975 2670 4287

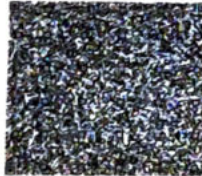
मेरा आधार, मेरी पहचान

*Varun Sood*



भारत सरकार  
Unique Identification Authority of India

पता:  
S/O राम कृष्ण सूद, ७४, टॉप फ्लोर, लोअर बाजार,  
शिमला अर्बन, शिमला,  
हिमाचल प्रदेश - 171001



**Address:**  
S/O Ram Krishan Sood, 74, Top Floor,  
Lower Bazar, Shimla Urban(T), Shimla,  
Himachal Pradesh - 171001

3718 0323 8025  
VID: 9165 5975 2670 4287



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www.uidai.gov.in

*Dr. Mahesh V. Padsalge*

Dr. Mahesh V. Padsalge  
MD. (Medicine)  
Consultant Physician  
Reg. No. 91424 (MMC)



Male

QRS : 136 ms  
QT / QTcBaz : 390 / 427 ms  
PR : 152 ms  
P : 110 ms  
RR / PP : 832 / 833 ms  
P / QRS / T : 49 / 90 / 46 degrees

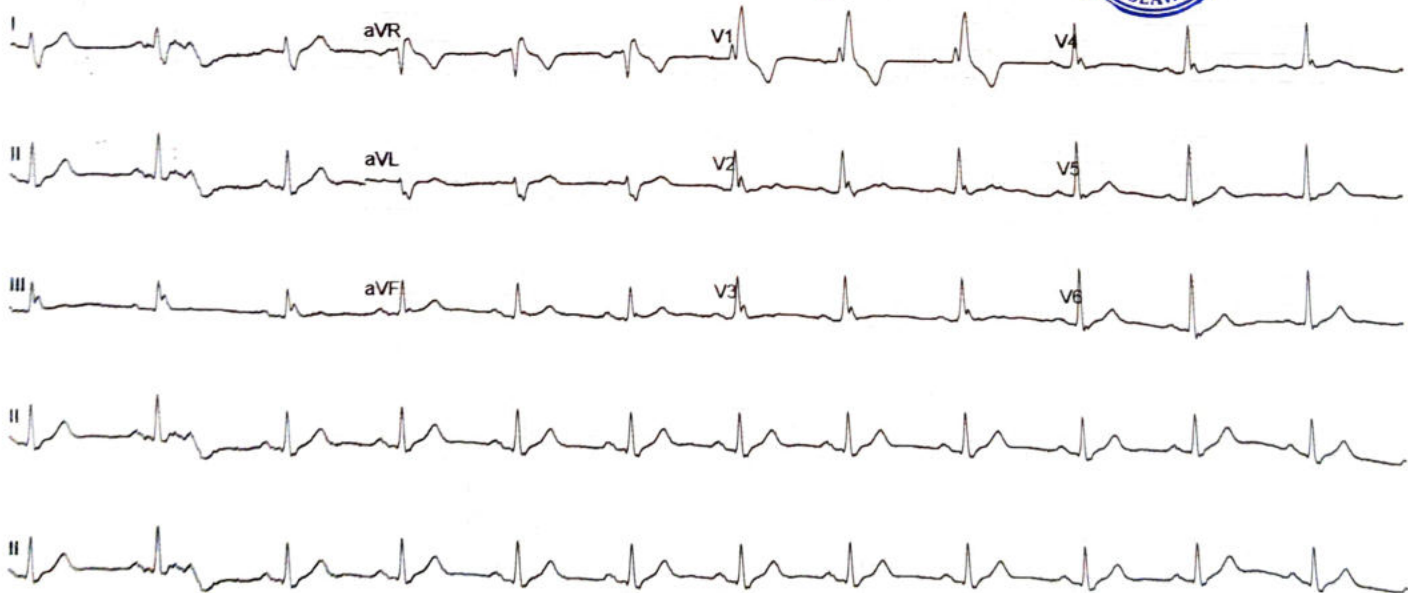
Normal sinus rhythm  
Right bundle branch block  
Abnormal ECG

RBBB

*Dr. Mahesh V. Padsalge*  
MD (Medicine)  
Consultant Physician  
Reg. No. 91424 (MMC)



*Handwritten signature*



Name : MR VARUN SOOD	Age/sex: 38Yrs. /MALE
Ref by: MEDIWHEEL	Date: 10/09/2022

**ULTRASOUND EXAMINATION OF ABDOMEN & PELVIS**

**Findings-**

The Liver is normal in size ,shape and echogenicity. No focal lesion is seen. The Hepatic veins appear normal. There is no IHBR dilatation. The portal vein appears normal.

The gall bladder is contracted . The proximal C.B.D. is normal caliber

Visualized head of Pancreas appears normal in size and reflectivity. The pancreatic duct is not dilated. Rest of the pancreas and retro peritoneum is obscured by bowel gases

The spleen is normal in size, No focal lesion is seen. Splenic vein is normal at hilum.

Both kidneys are normal in position and size. They show normal cortical reflectivity and cortico-medullary differentiation. There is no evidence of renal calculus, hydronephrosis or mass.

Right kidney measures 10.2 x 5.3 cm

Left kidney measures 10.3 x 4.3 cm

The Urinary bladder is well distended. No evidence of any intraluminal mass or calculi.

The visualized Prostate appears normal in size, shape and homogenous echotexture.

There is no free fluid is seen in the pelvis. No probe tenderness in present study.

**IMPRESSION:-**

➤ No significant abnormality is seen in present study.

• Adv : clinical correlation.



**Dr. MRUDULA BABAR**  
**CONSULTANT RADIOLOGIST**

**Dr. MRUDULA BABAR**  
**DMRE CPS Mumbai 2009**  
**(RADIOLOGIST)**  
**Reg. No. 2005/03/2139**



