



CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 11:21

Use a QR Code Scanner  
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**

**CBC (Complete Blood Count), Blood**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	16.7	13.0-17.0 g/dL	Spectrophotometric
RBC COUNT	5.49	4.5-5.5 mil/cmm	Elect. Impedance
PCV	51.7	40-50 %	Measured
MCV	94	80-100 fl	Calculated
MCH	30.4	27-32 pg	Calculated
MCHC	32.3	31.5-34.5 g/dL	Calculated
RDW	13.1	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC TOTAL COUNT	5660	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	29.7	20-40 %	
Absolute Lymphocytes	1681.0	1000-3000 /cmm	Calculated
Monocytes	10.5	2-10 %	
Absolute Monocytes	594.3	200-1000 /cmm	Calculated
Neutrophils	53.6	40-80 %	
Absolute Neutrophils	3033.8	2000-7000 /cmm	Calculated
Eosinophils	5.8	1-6 %	
Absolute Eosinophils	328.3	20-500 /cmm	Calculated
Basophils	0.4	0.1-2 %	
Absolute Basophils	22.6	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
PLATELET COUNT	207000	150000-400000 /cmm	Elect. Impedance
MPV	8.8	6-11 fl	Calculated
PDW	14.7	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			
Hypochromia	-		
Microcytosis	-		



CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 12:02

Use a QR Code Scanner  
Application To Scan the Code

Macrocytosis	-
Anisocytosis	-
Poikilocytosis	-
Polychromasia	-
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others (CBC)	Normocytic, Normochromic
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	-
COMMENT	-

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR                      4                                      2-15 mm at 1 hr.                                      Sedimentation

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



*Bmhasakar*

**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**



CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 15:55

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
FBS (-F), Fluoride Plasma	118.8	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
PPBS (-P), Fluoride Plasma PP/R	126.1	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



MC-2111

*Bmhasakar*

**Dr.KETAKI MHASKAR**  
M.D. (PATH)  
Pathologist



CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 16:18

Use a QR Code Scanner  
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**KIDNEY FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	13.1	12.8-42.8 mg/dl	Kinetic
BLOOD UREA NITROGEN, Serum	6.1	6-20 mg/dl	Calculated
CREATININE, Serum	0.98	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	88	>60 ml/min/1.73sqm	Calculated
TOTAL PROTEINS, Serum	6.7	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.4	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.8	1 - 2	Calculated
URIC, Serum	6.9	3.5-7.2 mg/dl	Enzymatic
PHOS, Serum	2.5	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	8.3	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	139	135-148 mmol/l	ISE
POTASSIUM, Serum	4.3	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	107	98-107 mmol/l	ISE

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



MC-2111

*Bmhasakar*

**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**





CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 13:42

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**GLYCOSYLATED HEMOGLOBIN (HbA1c)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLYCO Hb, EDTA WB - CC	6.4	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	137.0	mg/dl	Calculated

**Intended use:**

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

**Clinical Significance:**

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

**Test Interpretation:**

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

**Factors affecting HbA1c results:**

**Increased in:** High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

**Decreased in:** Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

**Reflex tests:** Blood glucose levels, CGM (Continuous Glucose monitoring)

**References:** ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

\*\*\* End Of Report \*\*\*



*Bmhasakar*

**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**



CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 15:00

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**PROSTATE SPECIFIC ANTIGEN (PSA)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
TPSA, Serum	0.266	<4.0 ng/ml	CLIA

**Clinical Significance:**

- PSA is detected in the serum of males with normal, benign hyper-plastic, and malignant prostate tissue.
- Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
- Prostate cancer screening 4.The percentage of Free PSA (FPSA) in serum is described as being significantly higher in patients with BPH than in patients with prostate cancer. 5.Calculation of % free PSA (ie. FPSA/TPSA x 100 ), has been suggested as way of improving the differentiation of BPH and Prostate cancer.

**Interpretation:**

**Increased In-** Prostate diseases,Cancer,Prostatitis, Benign prostatic hyperplasia, Prostatic ischemia, Acute urinary retention, Manipulations like Prostatic massage, Cystoscopy, Needle biopsy, Transurethral resection,Digital rectal examination, Radiation therapy, Indwelling catheter, Vigorous bicycle exercise, Drugs (e.g., testosterone), Physiologic fluctuations. Also found in small amounts in other cancers (sweat and salivary glands, breast, colon, lung, ovary) and in Skene glands of female urethra and in term placenta ,Acute renal failure, Acute myocardial infarction,

**Decreased In-** Ejaculation within 24-48 hours, Castration, Antiandrogen drugs (e.g., finasteride), Radiation therapy, Prostatectomy, PSA falls 17% in 3 days after lying in hospital, Artifactual (e.g., improper specimen collection; very high PSA levels).Finasteride (5- $\alpha$ -reductase inhibitor) reduces PSA by 50% after 6 months in men without cancer.

**Reflex Tests:** % FREE PSA , USG Prostate

**Limitations:**

- tPSA values determined on patient samples by different testing procedures cannot be directly compared with one another and could be the cause of erroneous medical interpretations. If there is a change in the tPSA assay procedure used while monitoring therapy, then the tPSA values obtained upon changing over to the new procedure must be confirmed by parallelmeasurements with both methods. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels.
- Patients who have been regularly exposed to animals or have received immunotherapy or diagnostic procedures utilizing immunoglobulins or immunoglobulin fragments may produce antibodies, e.g. HAMA, that interferes with immunoassays.
- PSA results should be interpreted in light of the total clinical presentation of the patient, including: symptoms, clinical history, data from additional tests, and other appropriate information.
- Serum PSA concentrations should not be interpreted as absolute evidence for the presence or absence of prostate cancer.

**Reference:**

- Wallach's Interpretation of diagnostic tests
- Total PSA Pack insert

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab  
\*\*\* End Of Report \*\*\*



*Anupa*

**Dr.ANUPA DIXIT**  
**M.D.(PATH)**  
**Consultant Pathologist & Lab Director**



CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 13:19

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**EXAMINATION OF FAECES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>
<b><u>PHYSICAL EXAMINATION</u></b>		
Colour (Stool)	Brown	Brown
Form and Consistency	Semi Solid	Semi Solid
Mucus	Absent	Absent
Blood	Absent	Absent
<b><u>CHEMICAL EXAMINATION</u></b>		
pH-Stool	5.0	-
Occult Blood (stool)	Absent	Absent
<b><u>MICROSCOPIC EXAMINATION</u></b>		
Protozoa	Absent	Absent
Flagellates	Absent	Absent
Ciliates	Absent	Absent
Parasites	Absent	Absent
Macrophages	Absent	Absent
Mucus Strands	Absent	Absent
Fat Globules	Absent	Absent
RBC/hpf	Absent	Absent
WBC/hpf	Absent	Absent
Yeast Cells	Absent	Absent
Undigested Particles	Present +	-
Concentration Method (for ova)	No ova detected	Absent
Reducing Substances	-	Absent

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



MC-2111

*Bmhasakar*

**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**





CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 14:44

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**URINE EXAMINATION REPORT**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<b>PHYSICAL EXAMINATION</b>			
Color-U	Pale yellow	Pale Yellow	-
pH-Urine	7.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
<b>CHEMICAL EXAMINATION</b>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood (Urine)	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite (Urine)	Absent	Absent	Griess Test
<b>MICROSCOPIC EXAMINATION</b>			
Pus cells / hpf	1-2	0-5/hpf	
RBC / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	3-4	Less than 20/hpf	
Others	-		

**Interpretation:** The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein: (1+ ~25 mg/dl, 2+ ~75 mg/dl, 3+ ~ 150 mg/dl, 4+ ~ 500 mg/dl)
- Glucose: (1+ ~ 50 mg/dl, 2+ ~100 mg/dl, 3+ ~300 mg/dl, 4+ ~1000 mg/dl)
- Ketone: (1+ ~5 mg/dl, 2+ ~15 mg/dl, 3+ ~ 50 mg/dl, 4+ ~ 150 mg/dl)

**Reference:** Pack insert

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

\*\*\* End Of Report \*\*\*



MC-2111

*Bmhasakar*

**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**





CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 15:56

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO  
BLOOD GROUPING & Rh TYPING**

PARAMETER	RESULTS
ABO GRP	B
Rh TYPING	Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

Clinical significance:  
ABO system is most important of all blood group in transfusion medicine

**Limitations:**

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

**References:**

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab  
\*\*\* End Of Report \*\*\*



*Dr. Trupti Shetty*

**Dr. TRUPTI SHETTY**  
**M. D. (PATH)**  
**Pathologist**



CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 13:49

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**LIPID PROFILE**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
TOTAL CHOLESTEROL, Serum	185.7	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	317.0	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	25.2	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
Non HDL CHOLESTEROL, Serum	160.5	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	117.6	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL, Serum	42.9	< /= 30 mg/dl	Calculated
TC/HDLC RATIO, Serum	7.4	0-4.5 Ratio	Calculated
LDLC/HDLC RATIO, Serum	4.7	0-3.5 Ratio	Calculated

Note : LDL test is performed by direct measurement.

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



MC-2111

*Bmhasakar*

**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**



CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 14:36

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**THYROID FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
FT3, Serum	4.1	3.5-6.5 pmol/L	ECLIA
FT4, Serum	14.8	11.5-22.7 pmol/L	ECLIA
TSH, Serum	3.01	0.35-5.5 microIU/ml	ECLIA

**Interpretation:**

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

**Clinical Significance:**

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

**Diurnal Variation:**TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

**Reflex Tests:**Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

**Limitations:**

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

**Reference:**

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)



MC-2111

*Bmhasakar*

**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**



Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2311219730  
**Name** : MR.UDARAM VISHNOI  
**Age / Gender** : 44 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Borivali West (Main Centre)

**Collected** : 22-Apr-2023 / 08:00  
**Reported** : 22-Apr-2023 / 14:36

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*





CID : 2311219730  
Name : MR.UDARAM VISHNOI  
Age / Gender : 44 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Collected : 22-Apr-2023 / 08:00  
Reported : 22-Apr-2023 / 12:22

Use a QR Code Scanner  
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**LIVER FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.92	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	<b>0.32</b>	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.60	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.7	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.4	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.8	1 - 2	Calculated
SGOT, Serum	37.7	5-40 U/L	NADH (w/o P-5-P)
SGPT, Serum	41.5	5-45 U/L	NADH (w/o P-5-P)
GGT, Serum	47.1	3-60 U/L	Enzymatic
ALK PHOS, Serum	78.1	40-130 U/L	Colorimetric

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



MC-2111

*Bmhasakar*

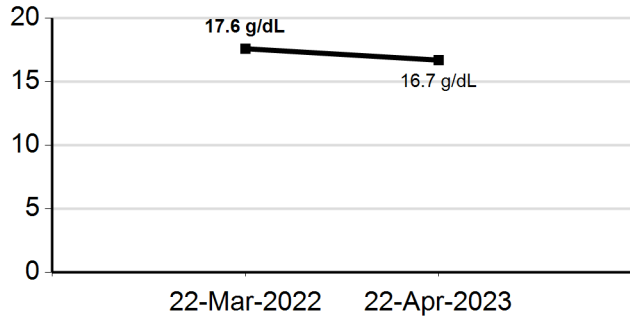
**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**



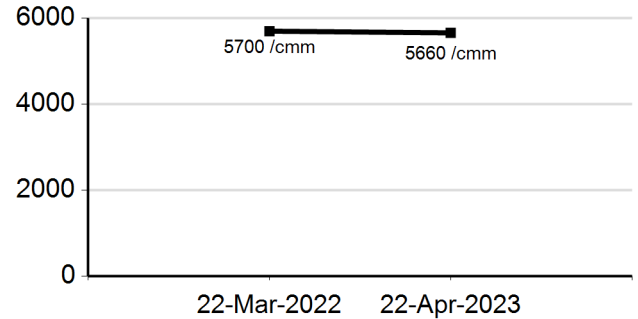
Use a QR Code Scanner Application To Scan the Code

**CID** : 2311219730  
**Name** : MR.UDARAM VISHNOI  
**Age / Gender** : 44 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Borivali West (Main Centre)

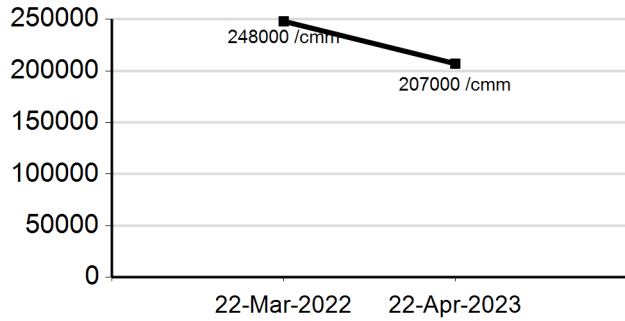
**Haemoglobin**



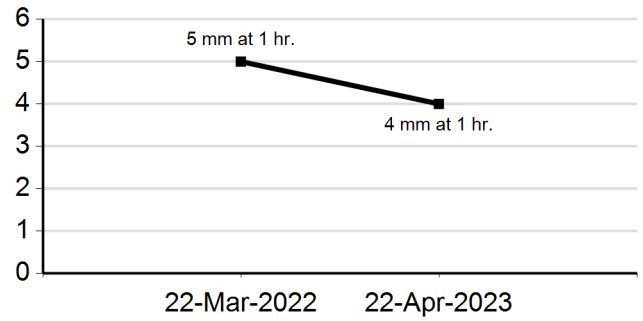
**WBC Total Count**



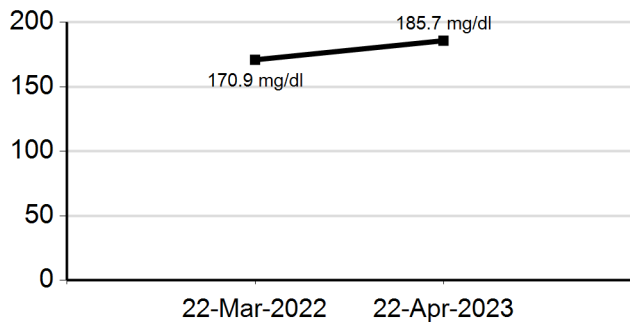
**Platelet Count**



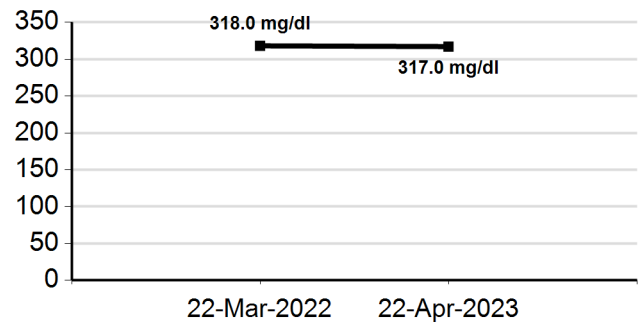
**ESR**



**CHOLESTEROL**



**TRIGLYCERIDES**

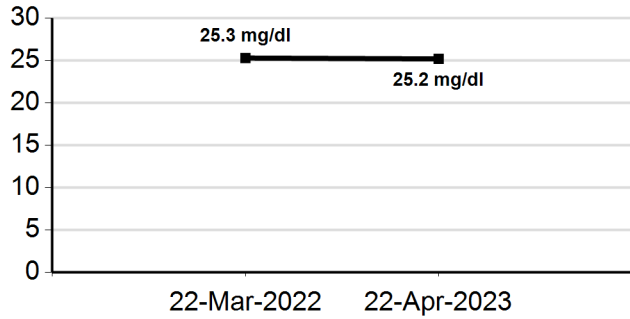




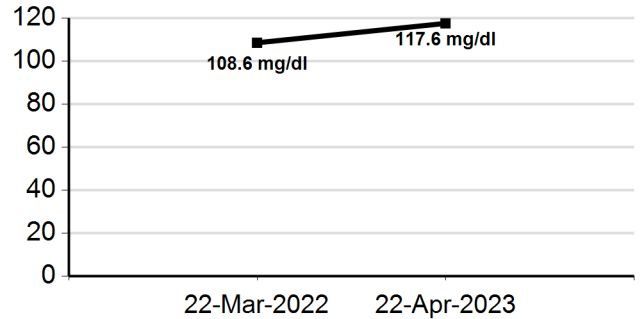
Use a QR Code Scanner  
 Application To Scan the Code

**CID** : 2311219730  
**Name** : MR.UDARAM VISHNOI  
**Age / Gender** : 44 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Borivali West (Main Centre)

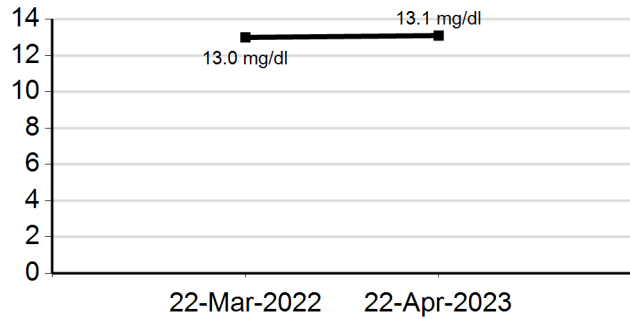
**HDL CHOLESTEROL**



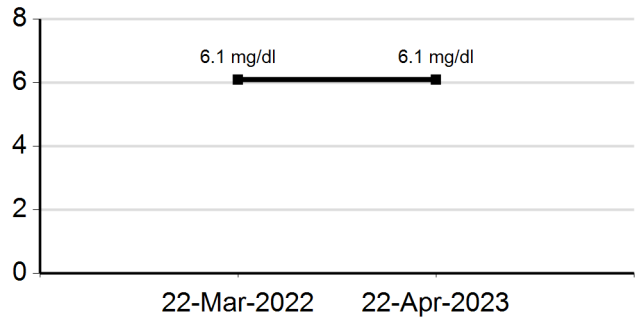
**LDL CHOLESTEROL**



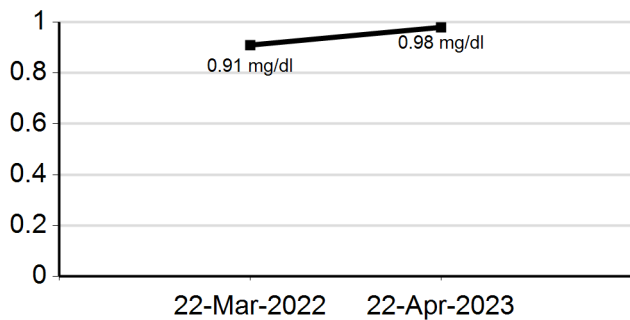
**BLOOD UREA**



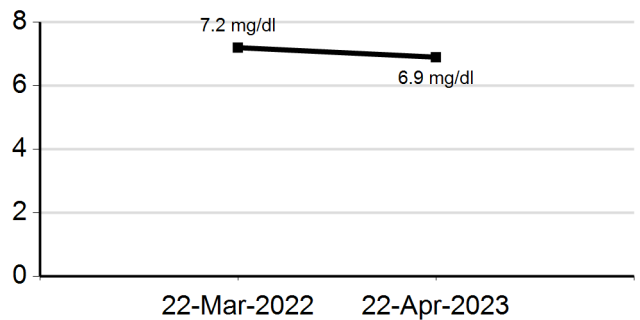
**BUN**



**CREATININE**



**URIC ACID**

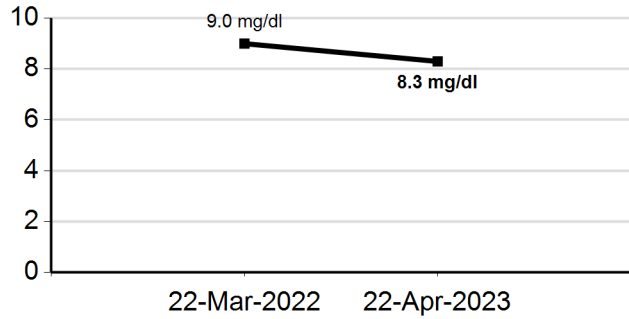




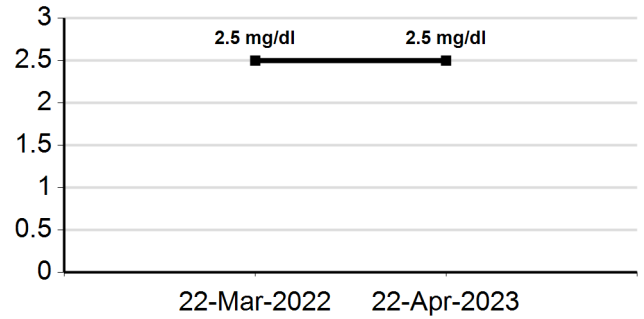
Use a QR Code Scanner Application To Scan the Code

**CID** : 2311219730  
**Name** : MR.UDARAM VISHNOI  
**Age / Gender** : 44 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Borivali West (Main Centre)

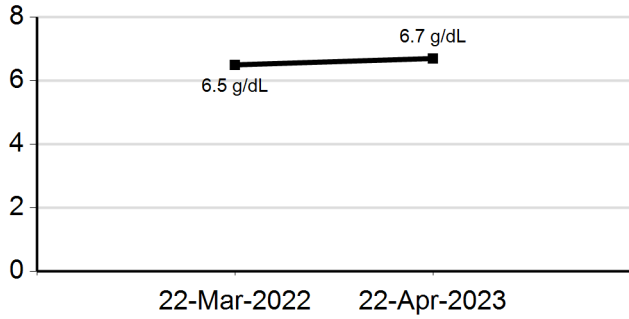
**CALCIUM**



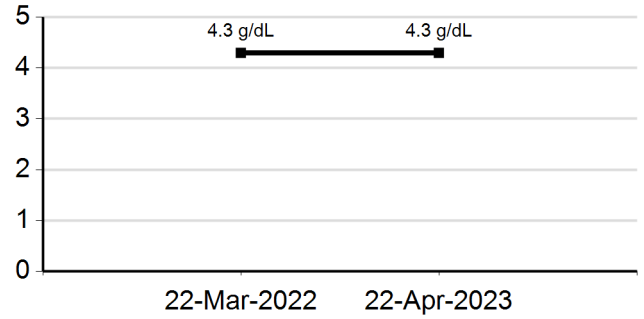
**PHOSPHORUS**



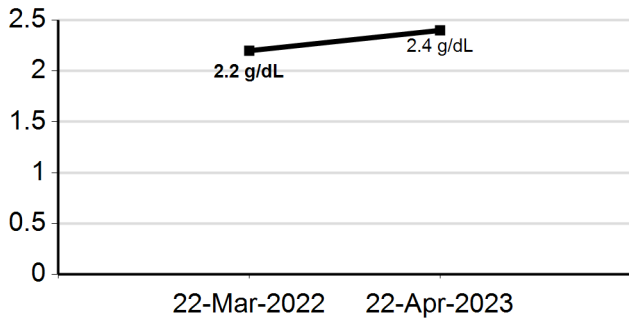
**TOTAL PROTEINS**



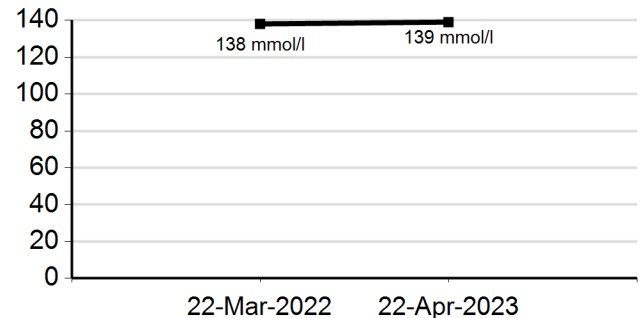
**ALBUMIN**



**GLOBULIN**



**SODIUM**



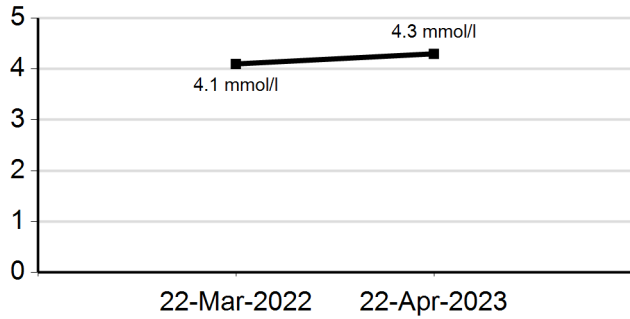




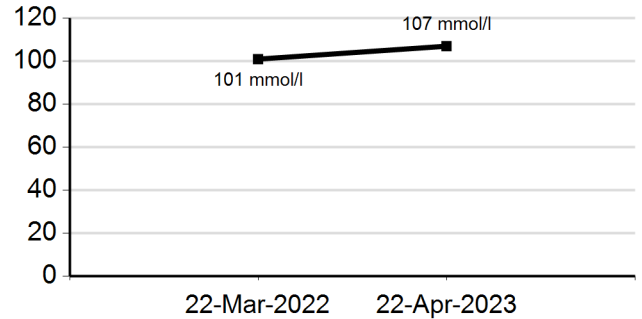
Use a QR Code Scanner Application To Scan the Code

CID : 2311219730  
 Name : MR.UDARAM VISHNOI  
 Age / Gender : 44 Years / Male  
 Consulting Dr. : -  
 Reg. Location : Borivali West (Main Centre)

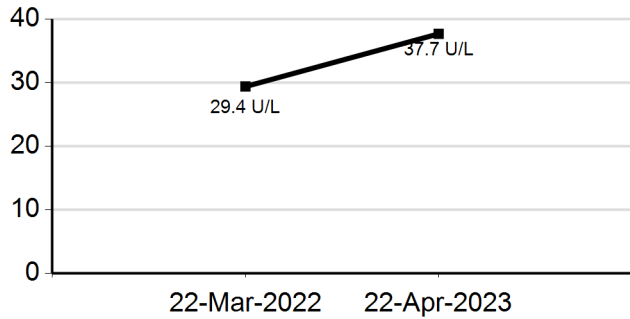
**POTASSIUM**



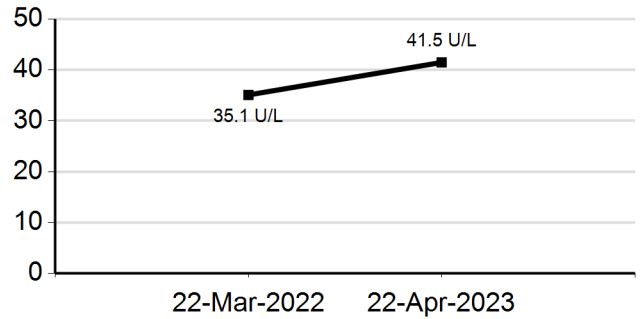
**CHLORIDE**



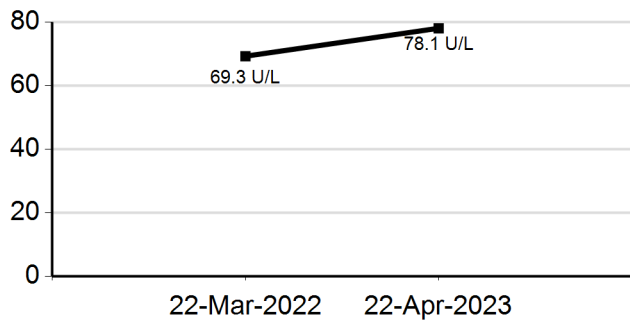
**SGOT (AST)**



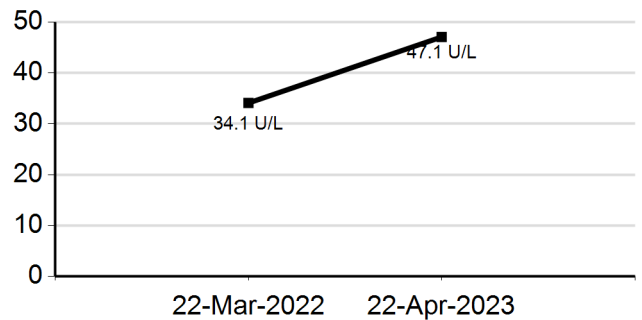
**SGPT (ALT)**



**ALKALINE PHOSPHATASE**



**GAMMA GT**

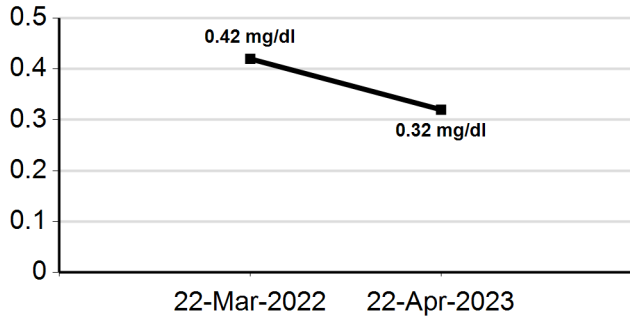




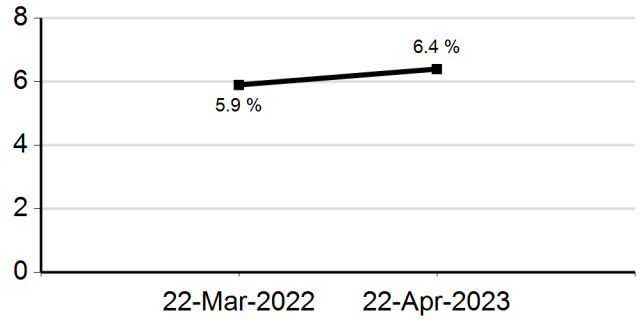
Use a QR Code Scanner Application To Scan the Code

CID : 2311219730  
 Name : MR.UDARAM VISHNOI  
 Age / Gender : 44 Years / Male  
 Consulting Dr. : -  
 Reg. Location : Borivali West (Main Centre)

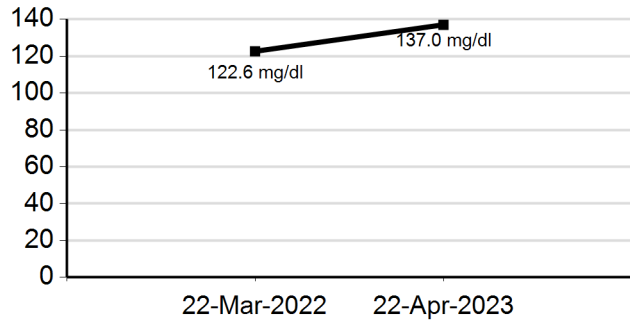
**BILIRUBIN (DIRECT)**



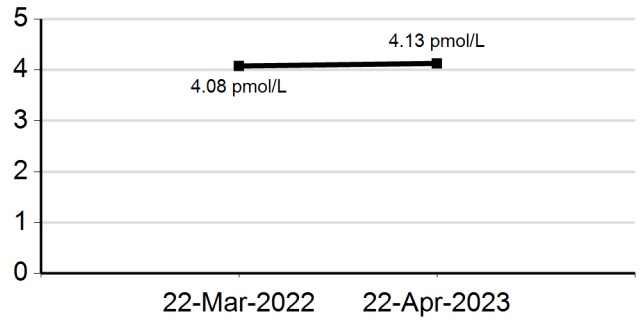
**Glycosylated Hemoglobin (HbA1c)**



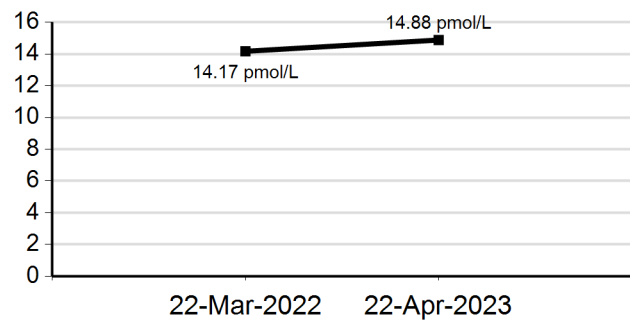
**Estimated Average Glucose (eAG)**



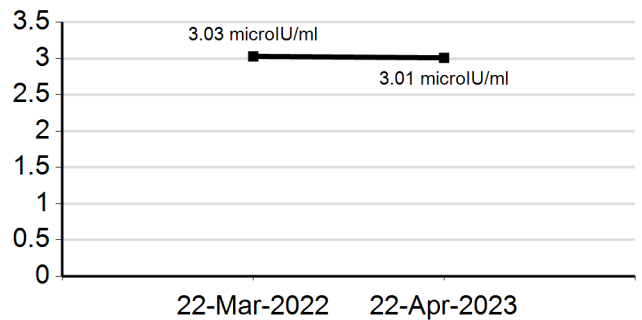
**Free T3**



**Free T4**



**sensitiveTSH**



# SUBURBAN DIAGNOSTICS - BORIVALI WEST

Patient Name: UDARAM VISHNOI  
Patient ID: 2311219730

Date and Time: 22nd Apr 23 9:15 AM

Age **44** NA **22**  
years months days

Gender **Male**

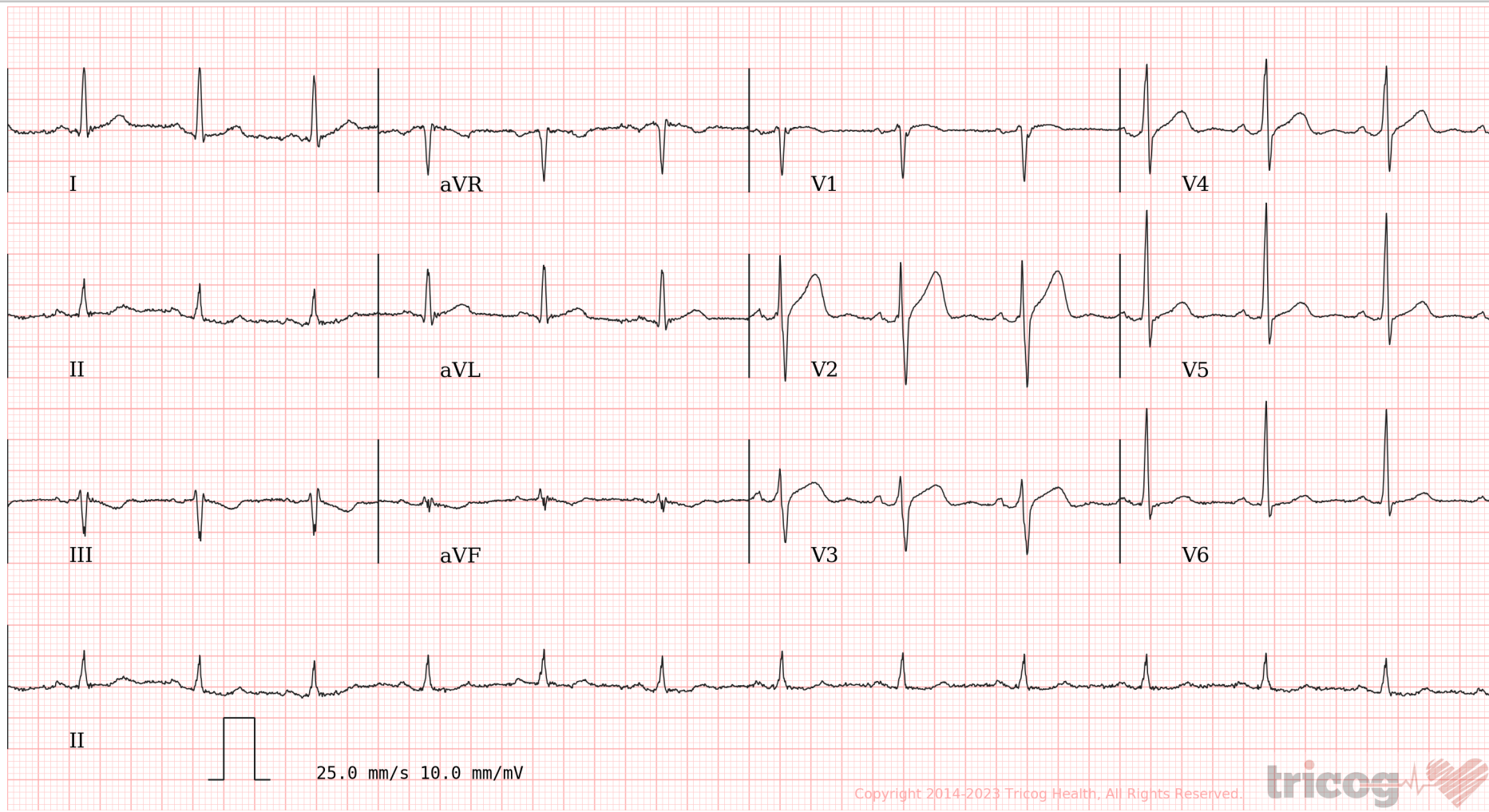
Heart Rate **78bpm**

### Patient Vitals

BP: NA  
Weight: NA  
Height: NA  
Pulse: NA  
Spo2: NA  
Resp: NA  
Others: \_\_\_\_\_

### Measurements

QRSD: 112ms  
QT: 380ms  
QTcB: 433ms  
PR: 148ms  
P-R-T: 15° 3° -17°



Sinus Rhythm. T inversion in III avf. Please correlate clinically.

REPORTED BY

Dr Nitin Sonavane  
M.B.B.S.AFLH, D.DIAB,D.CARD  
Consultant Cardiologist  
87714

Name : Mr. UDARAM VISHNOI  
VID : 2311219730  
Ref By : Arcofemi Healthcare Limited

Reg Date : 22-Apr-2023 07:52  
Age/Gender : 44 Years  
Regn Centre : Borivali West (Main Centre)

**History and Complaints:**

**EXAMINATION FINDINGS:**

Height (cms):	173	Weight (kg):	84
Temp (0c):	Afebrile	Skin:	NAD
Blood Pressure (mm/hg):	130/80	Nails:	NAD
Pulse:	72/Per min	Lymph Node:	Not palpable

**Systems**

Cardiovascular: S1S2 - NORMAL  
Respiratory: CHEST CLEAR  
Genitourinary: NAD  
GI System: NAD  
CNS: NAD

**IMPRESSION:**

*Bl. sugar  
Sr. calcium*

**ADVICE:**

*Sr. TGT, HPL &  
USG*

*physician ref.*

**CHIEF COMPLAINTS:**

- |  |     |
|--|-----|
| 1) Hypertension:                         | NO  |
| 2) IHD                                   | NO  |
| 3) Arrhythmia                            | NO  |
| 4) Diabetes Mellitus                     | NO  |
| 5) Tuberculosis                          | NO  |
| 6) Asthama                               | NO  |
| 7) Pulmonary Disease                     | NO  |
| 8) Thyroid/ Endocrine disorders          | NO  |
| 9) Nervous disorders                     | NO  |
| 10) GI system                            | NO  |
| 11) Genital urinary disorder             | NO  |
| 12) Rheumatic joint diseases or symptoms | NO  |
| 13) Blood disease or disorder            | NO  |
| 14) Cancer/lump growth/cyst              | NO  |
| 15) Congenital disease                   | NO  |
| 16) Surgeries                            | YES |

*left leg bullet injury 20 yrs back*



Name : Mr. UDARAM VISHNOI  
VID : 2311219730  
Ref By : Arcofemi Healthcare Limited

Reg Date : 22-Apr-2023 07:52  
Age/Gender : 44 Years  
Regn Centre : Borivali West (Main Centre)

**PERSONAL HISTORY:**

- 1) Alcohol
- 2) Smoking
- 3) Diet
- 4) Medication

YES  
YES  
MIX  
NO

180ml Thrice a wk  $\therefore$  15g  
2/day  $\therefore$  10g

  
Dr. Nitin Sonavane  
PHYSICIAN

**Suburban Diagnostics (P) Pvt. Ltd.**  
301 & 302, 3rd Floor, Vira Elegance,  
Above Tropic Skyline, T. Road,  
Borivali (West), Mumbai - 400 092.

**DR. NITIN SONAVANE**  
M.B.B.S.AFLH, D.D.M.B., D.CARD.  
CONSULTANT-CARDIOLOGIST  
REGD. NO. : 87714

CID NO: 2311219730		
NAME: MR. UDARAM VISHNOI	AGE: 44 YRS	SEX: MALE
REF. BY : ----	DATE: 22/04/2023	

### USG WHOLE ABDOMEN

**LIVER:** Liver is mildly enlarged in size (15.6 cm), shape and shows bright echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any obvious focal lesion.

**GALL BLADDER:** Gall bladder is distended and appears normal. No obvious wall thickening is noted. There is no evidence of any calculus.

**PORTAL VEIN:** Portal vein is normal(11 mm). **CBD:** CBD is normal.

**PANCREAS:** Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification.

**KIDNEYS:** Right kidney measures 10.1 x 3.8 cm. Left kidney measures 10.8 x 4.9 cm. Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

**SPLEEN:** Spleen is marginally enlarged in size (11.0 cm), shape and echotexture. No focal lesion is seen.

**URINARY BLADDER:** Urinary bladder is distended and normal. Wall thickness is within normal limits.


**PROSTATE:** Prostate is normal in size and echotexture. Prostate measures 3.0 x 3.0 x 2.8 cm and prostatic weight is 13 gm. No evidence of any obvious focal lesion.

No free fluid or size significant lymphadenopathy is seen.

#### Opinion:

- Mild hepatomegaly with grade I fatty liver.
- Marginal splenomegaly.

*For clinical correlation and follow up.*

  
**Dr. Ravi Kumar, MD**  
**Consultant Radiologist**  
**Reg no.2008041721**

Investigations have their limitations. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly.



Use a QR Code Scanner  
Application To Scan the Code

CID : 2311219730  
Name : Mr UDARAM VISHNOI  
Age / Sex : 44 Years/Male  
Ref. Dr :  
Reg. Location : Borivali West

Reg. Date : 22-Apr-2023  
Reported : 22-Apr-2023 / 16:30

**X-RAY CHEST PA VIEW**

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

**IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

-----End of Report-----

*Rohit Malik*

DR. ROHIT MALIK  
DNB, DMRD, DMRE (MUM)  
RADIO DIAGNOSIS  
REG. No. 82356

CID NO: 2311219730	
PATIENT'S NAME: MR.UDARAM VISHNOI	AGE/SEX: 44 Y/M
REF BY: DR. -----	DATE: 22/04/2023

**2-D ECHOCARDIOGRAPHY**

1. RA, LA RV is Normal Size.
2. No LV Hypertrophy.
3. Normal LV systolic function. LVEF 60 % by bi-plane
4. No RWMA at rest.
5. Aortic, Pulmonary, Mitral, Tricuspid valves normal.
6. Great arteries: Aorta: Normal
  - a. No mitral valve prolaps.
7. Inter-ventricular septum is intact and normal.
8. Intra Atrial Septum intact.
9. Pulmonary vein, IVC, hepatic are normal.
- 10.No LV clot.
- 11.No Pericardial Effusion
- 12.No Diastolic dysfunction. No Doppler evidence of raised LVEDP.



<b>PATIENT'S NAME: MR.UDARAM VISHNOI</b>	<b>AGE/SEX: 44 Y/M</b>
<b>REF BY: DR. -----</b>	<b>DATE: 22/04/2023</b>

1. AO root diameter	3.0 cm
2. IVSd	1.3 cm
3. LVIDd	4.3 cm
4. LVIDs	2.2 cm
5. LVPWd	1.3 cm
6. LA dimension	3.7 cm
7. RA dimension	3.6 cm
8. RV dimension	3.0 cm
9. Pulmonary flow vel:	0.9 m/s
10. Pulmonary Gradient	5.0 m/s
11. Tricuspid flow vel	1.6 m/s
12. Tricuspid Gradient	11 m/s
13. PASP by TR Jet	22 mm Hg
14. TAPSE	3.0 cm
15. Aortic flow vel	1.1 m/s
16. Aortic Gradient	5 m/s
17. MV:E	0.7 m/s
18. A vel	0.5 m/s
19. IVC	16 mm
20. E/E'	10


**Impression:**

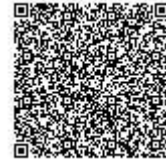
**Normal 2d echo study.**

**Disclaimer**

Echo may have inter/Intra observer variations in measurements as the study is observer dependent and changes with Pt's hemodynamics. Please co-relate findings with patients clinical status.

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

  
**DR. S. NITIN**  
**Consultant Cardiologist**  
**Reg. No. 87714**



Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2311219730  
**Name** : Mr UDARAM VISHNOI  
**Age / Sex** : 44 Years/Male  
**Ref. Dr** :  
**Reg. Location** : Borivali West

**Reg. Date** : 22-Apr-2023  
**Reported** : 22-Apr-2023/16:30

**X-RAY CHEST PA VIEW**

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

**IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

-----End of Report-----

**DR. ROHIT MALIK**  
**DNB, DMRD, DMRE (MUM)**  
**RADIO DIAGNOSIS**  
**REG. No. 82356**



Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2311219730  
**Name** : Mr UDARAM VISHNOI  
**Age / Sex** : 44 Years/Male  
**Ref. Dr** :  
**Reg. Location** : Borivali West

**Reg. Date** : 22-Apr-2023  
**Reported** : 22-Apr-2023/16:30