Reg. No
 : 2301102253

 Name
 : MANGI DANGI

 Age/Sex
 : 37 Years / Female

Collected On : 28-Jan-2023 10:07 **Approved On** : 28-Jan-2023 11:47

Reg. Date

Ref. By

Client : MEDIWHEEL WELLNESS

Printed On : 30-Jan-2023 08:59

: 28-Jan-2023

<u>Parameter</u>	Result Unit		Reference Interval				
COMPLETE BLOOD COUNT (CBC)							
		N: EDTA BLOOD					
Hemoglobin	14.7	g/dL	12.0 - 15.0				
RBC Count	4.90	million/cmm	3.8 - 4.8				
Hematrocrit (PCV)	44.6	%	40 - 54				
MCH	30.0	Pg	27 - 32				
MCV	91.0	fL	83 - 101				
MCHC	33.0	%	31.5 - 34.5				
RDW	13.0	%	11.5 - 14.5				
WBC Count	6500	/cmm	4000 - 11000				
DIFFERENTIAL WBC COUNT (Flow	cytometry)						
Neutrophils (%)	62	%	38 - 70				
Lymphocytes (%)	30	%	20 - 40				
Monocytes (%)	06	%	2 - 8				
Eosinophils (%)	02	%	0 - 6				
Basophils (%)	00	%	0 - 2				
Neutrophils	4030	/cmm					
Lymphocytes	1950	/cmm					
Monocytes	390	/cmm					
Eosinophils	130	/cmm					
Basophils	0	/cmm					
Platelet Count (Flow cytometry)	174000	/cmm	150000 - 450000				
MPV	7.7	fL	7.5 - 11.5				
ERYTHROCYTE SEDIMENTATION F	RATE						
· · · · · · · · · · · · · · · · · · ·	10	mm/hr	0 - 21				

Page 1 of 10

DR PS RAO

MD Pathologist

----- End Of Report -----



: 2301102253 Reg. No Name : MANGI DANGI Age/Sex : 37 Years / Female

Ref. By

Client : MEDIWHEEL WELLNESS Reg. Date : 28-Jan-2023

Collected On : 28-Jan-2023 10:07 **Approved On** : 28-Jan-2023 15:18

Printed On : 30-Jan-2023 08:59

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval
------------------	---------------	-------------	--------------------

PLASMA GLUCOSE

Fasting Blood Sugar (FBS) 70.1 mg/dL 70 - 110

Hexokinase Method

70 - 140 Post Prandial Blood Sugar (PPBS) 89.0 mg/dL

Hexokinase Method

Criteria for the diagnosis of diabetes1. HbA1c >/= 6.5 *

2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

3. Two hour plasma glucose >/= 200mg/dL during an oral glucose tolerence test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >/= 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.

American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

----- End Of Report -----

Reg. No : 2301102253 Name : MANGI DANGI Age/Sex : 37 Years / Female

Collected On

Reg. Date

: 28-Jan-2023 : 28-Jan-2023 10:07

Approved On : 28-Jan-2023 11:47

Ref. By

Printed On

: 30-Jan-2023 08:59

Client

: MEDIWHEEL WELLNESS

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval	
	KIDNEY FI	INICTION TEST		
	KIDNEY FU	JNCTION TEST		
UREA (Urease & glutamate dehydrogenase)	20.9	mg/dL	10 - 50	
Creatinine (Jaffe method)	0.57	mg/dL	0.5 - 1.2	
Uric Acid (Enzymatic colorimetric)	4.0	mg/dL	2.5 - 7.0	

----- End Of Report -----

Reg. No : 2301102253 Name : MANGI DANGI Age/Sex : 37 Years / Female

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: 28-Jan-2023

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Ref. By

Client

: MEDIWHEEL WELLNESS

Printed On : 30-Jan-2023 08:59

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval				
LIVER FUNCTION TEST WITH GGT							
Total Bilirubin	1.08	mg/dL	0.20 - 1.0				
Colorimetric diazo method							
Conjugated Bilirubin	0.49	mg/dL	0.0 - 0.3				
Sulph acid dpl/caff-benz							
Unconjugated Bilirubin	0.59	mg/dL	0.0 - 1.1				
Sulph acid dpl/caff-benz							
SGOT	27.8	U/L	0 - 31				
(Enzymatic)							
SGPT	22.8	U/L	0 - 31				
(Enzymatic)							
GGT	11.4	U/L	7 - 32				
(Enzymatic colorimetric)							
Alakaline Phosphatase	111.3	U/L	42 - 141				
(Colorimetric standardized method)							
Protien with ratio							
Total Protein	6.7	g/dL	6.5 - 8.7				
(Colorimetric standardized method)							
Albumin	4.5	mg/dL	3.5 - 4.94				
(Colorimetric standardized method)							
Globulin	2.20	g/dL	2.3 - 3.5				
Calculated							
A/G Ratio	2.05		0.8 - 2.0				
Calculated							
	End Of	Report	-				

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MD Pathologist



Reg. No : 2301102253 Name : MANGI DANGI Age/Sex : 37 Years / Female

Collected On : 28-Jan-2023 10:07 Approved On : 28-Jan-2023 11:47

: 28-Jan-2023

Reg. Date

Ref. By

Printed On : 30-Jan-2023 08:59

Client : MEDIWHEEL WELLNESS

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval					
LIPID PROFILE								
Cholesterol (Enzymatic colorimetric)	155.8	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0					
Triglyceride (Enzymatic colorimetric)	63.2	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0					
VLDL	12.64	mg/dL	15 - 35					
Calculated								
LDL CHOLESTEROL	99.46	mg/dL	Optimal: < 100.0 Near / above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: >190.0					
HDL Cholesterol	43.7	mg/dL	30 - 85					
Homogeneous enzymatic colorin	netric							
Cholesterol /HDL Ratio Calculated	3.57		0 - 5.0					
LDL / HDL RATIO Calculated	2.28		0 - 3.5					

This is an electronically authenticated report.

DR PS RAO MD Pathologist



: 2301102253 Reg. No Name MANGI DANGI Age/Sex 37 Years / Female

Approved On : 28-Jan-2023 11:47

Printed On

Collected On

Reg. Date

: 30-Jan-2023 08:59

: 28-Jan-2023 10:07

: 28-Jan-2023

Ref. By

Client

MEDIWHEEL WELLNESS

Parameter Result <u>Unit</u> Reference Interval

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP<?xml:namespace prefix = "o" ns = "urn:schemasmicrosoft-com:office:office"/>

> LDL CHOLESTEROL **CHOLESTEROL HDL CHOLESTEROL TRIGLYCERIDES** Optimal<100 Desirable<200 Low<40 Normal<150 Near Optimal 100-129

Border Line 200-239 High >60 Border High 150-199 Borderline 130-159 High >240

> High 200-499 High 160-189

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value

Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.

- Detail test interpreation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

For test performed on specimens received or collected from non-KSHIPRA locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender.

KSHIPRA will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

. All other responsibility will be of referring Laboratory.

----- End Of Report ------

This is an electronically authenticated report.

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 Reg. No
 : 2301102253

 Name
 : MANGI DANGI

 Age/Sex
 : 37 Years / Female

Collected On : 28-Jan-2023 10:07 **Approved On** : 28-Jan-2023 11:48

: 28-Jan-2023

Reg. Date

Ref. By Client

: Printed On : 30-Jan-2023 08:59 : MEDIWHEEL WELLNESS

<u>Parameter</u>	arameter Result		Reference Interval	
	THYRO	ID FUNCTION TE	ST	
T3 (Triiodothyronine) Chemiluminescence	1.29	ng/mL	0.87 - 1.78	
T4 (Thyroxine)	5.98	μg/dL	5.89 - 14.9	
Chemiluminescence				
TSH (ultra sensitive)	2.546	μIU/ml	0.34 - 5.6	
Chemiluminescence				

SUMMARY The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. LIMITATION Presence of autoantibodies may cause unexpected high value of TSH

----- End Of Report -----

MD Pathologist

TEST REPORT

: 2301102253 Reg. No Name : MANGI DANGI Age/Sex 37 Years / Female

Collected On : 28-Jan-2023 10:07 Approved On : 28-Jan-2023 11:47

Reg. Date

Ref. By

Printed On : 30-Jan-2023 08:59

: 28-Jan-2023

Client : MEDIWHEEL WELLNESS

Parameter

Result Unit Reference Interval

HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

Hb A1C Boronate Affinity with Fluorescent Quenching % of Total Hb

Poor Control: > 7.0 % Good Control: 6.2-7.0 % Non-diabetic Level: 4.3-6.2 %

Mean Blood Glucose

125.62

5.7

mg/dL

Calculated

Degree of Glucose Control Normal Range:

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

- * High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy,etc.
- * Some danger of hypoglycemic reaction in Type I diabetics.
- * Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

EXPLANATION:-

Total haemoglobin A1 c is continuously symthesised in the red blood cell throught its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose oncentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days. HbA1c has been accepted as a measurnment which effects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Errneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

----- End Of Report -----

This is an electronically authenticated report.

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DR PS RAO Approved by: MD Pathologist

Test done from collected sample

 Reg. No
 : 2301102253

 Name
 : MANGI DANGI

 Age/Sex
 : 37 Years / Female

Collected On : 28-Jan-2023 10:07 **Approved On** : 28-Jan-2023 11:48

Reg. Date

Ref. By

Parameter

Bv ·

Printed On : 30-Jan-2023 08:59

: 28-Jan-2023

Client: MEDIWHEEL WELLNESS

Result Unit Reference Interval

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity 20 cc
Colour Pale Yellow

Appearance Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC METHOD)

pH 6.0 5.0 - 8.0 Sp. Gravity 1.020 1.002 - 1.03

Nil Protein Nil Glucose Ketone Bodies Nil Urine Bile salt and Bile Pigment Nil Urine Bilirubin Nil Nitrite Nil Leucocytes Nil Blood Nil

MICROSCOPIC EXAMINATION (MANUAL BY MCIROSCOPY)

Leucocytes (Pus Cells) Nil

Erythrocytes (Red Cells) Occasional/hpf

Epithelial Cells 1-2/hpf
Amorphous Material Nil

Casts Nil
Crystals Nil
Bacteria Nil
Monilia Nil

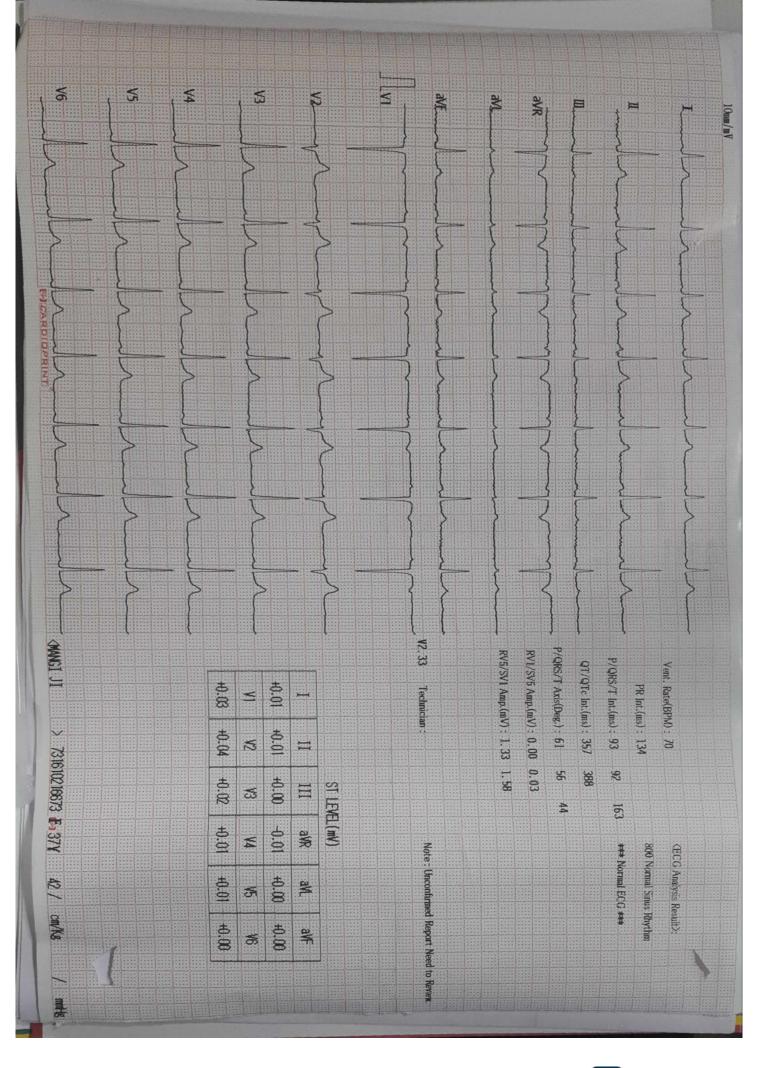
----- End Of Report -----

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Approved by: DR PS RAO

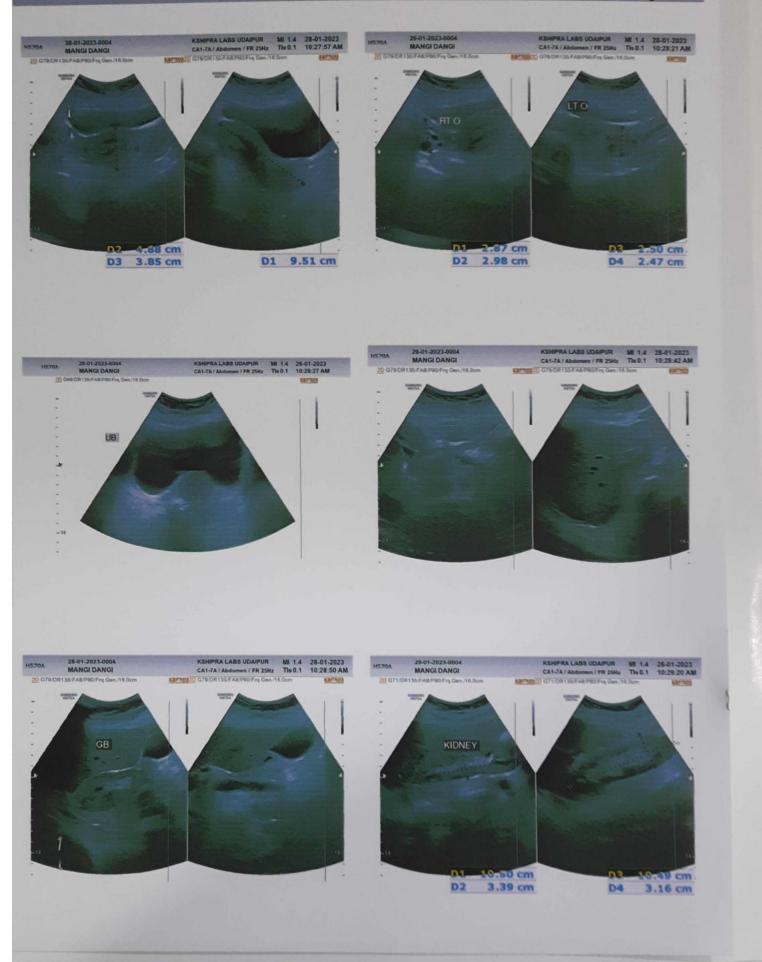
MD Pathologist

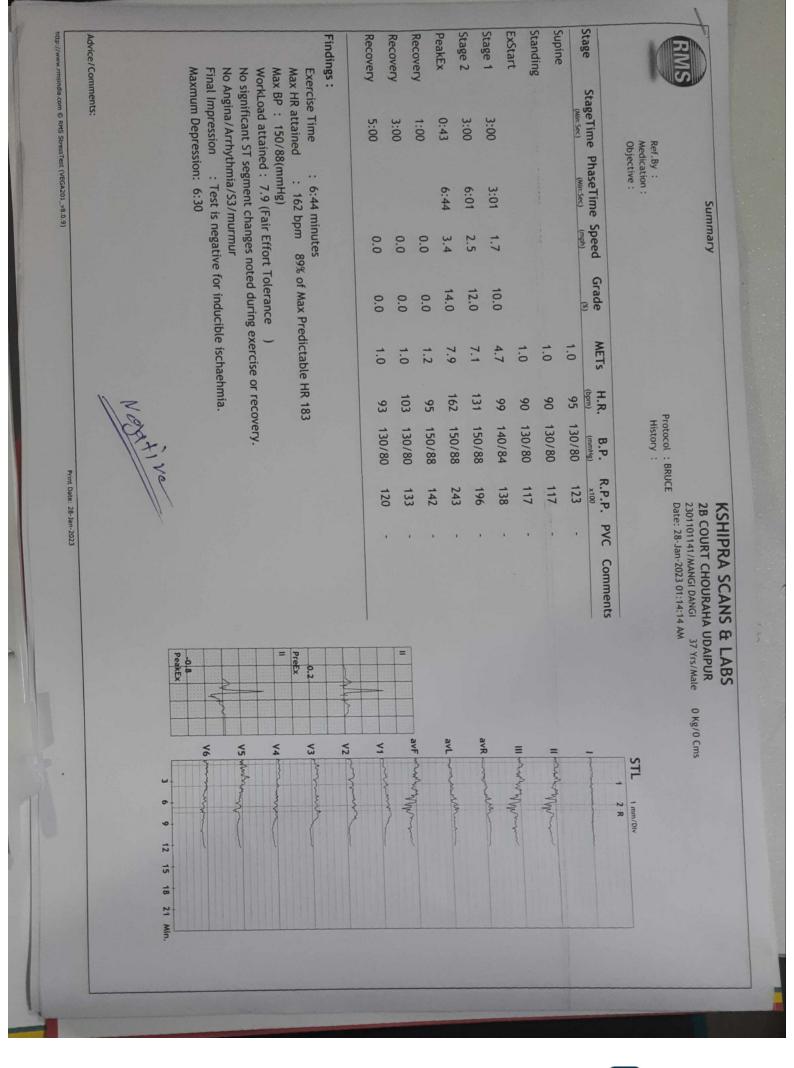
		TEST REPORT		
Reg. No	: 2301102253		Reg. Date	: 28-Jan-2023
Name	: MANGI DANGI		Collected On	: 28-Jan-2023 10:07
Age/Sex	: 37 Years / Female		Approved On	: 28-Jan-2023 11:51
Ref. By	:		Printed On	: 30-Jan-2023 08:59
Client	: MEDIWHEEL WELLNESS			
<u>Paramet</u>	<u>er</u>	Result		
	Specimer	BLOOD GROUP & RH a: EDTA and Serum; Method: Haemagg	utination	
ABO		'AB'		
Rh (D)		Positive		
		End Of Report		

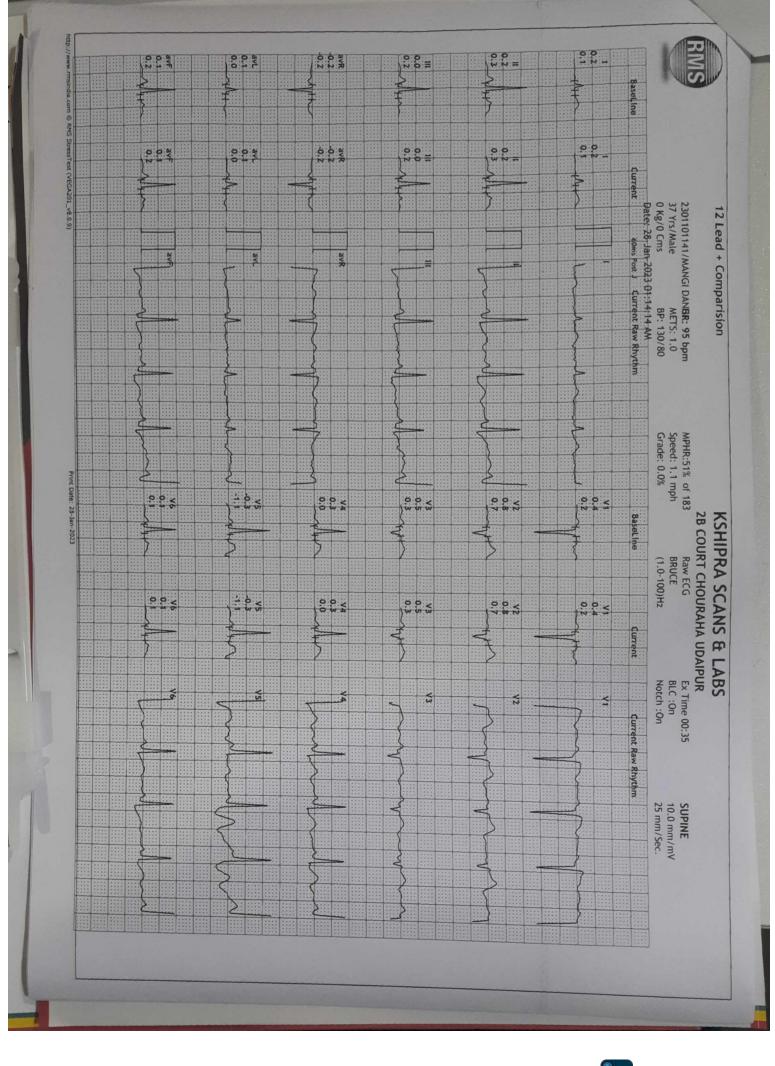


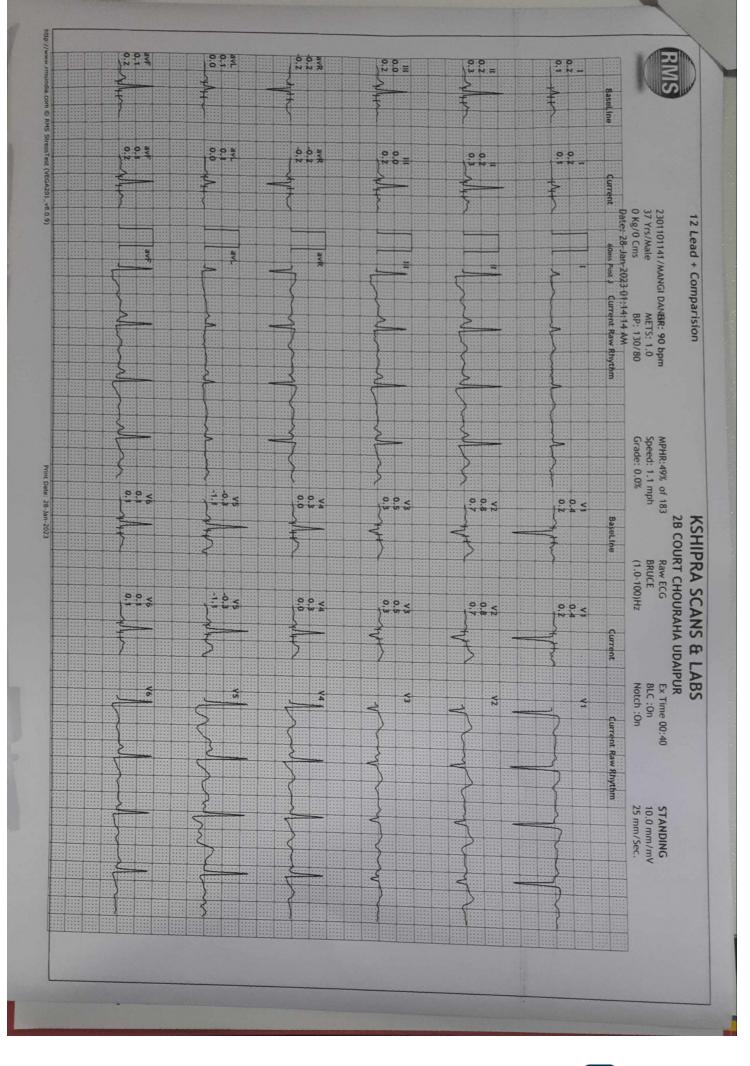
Ultrasound Image Report

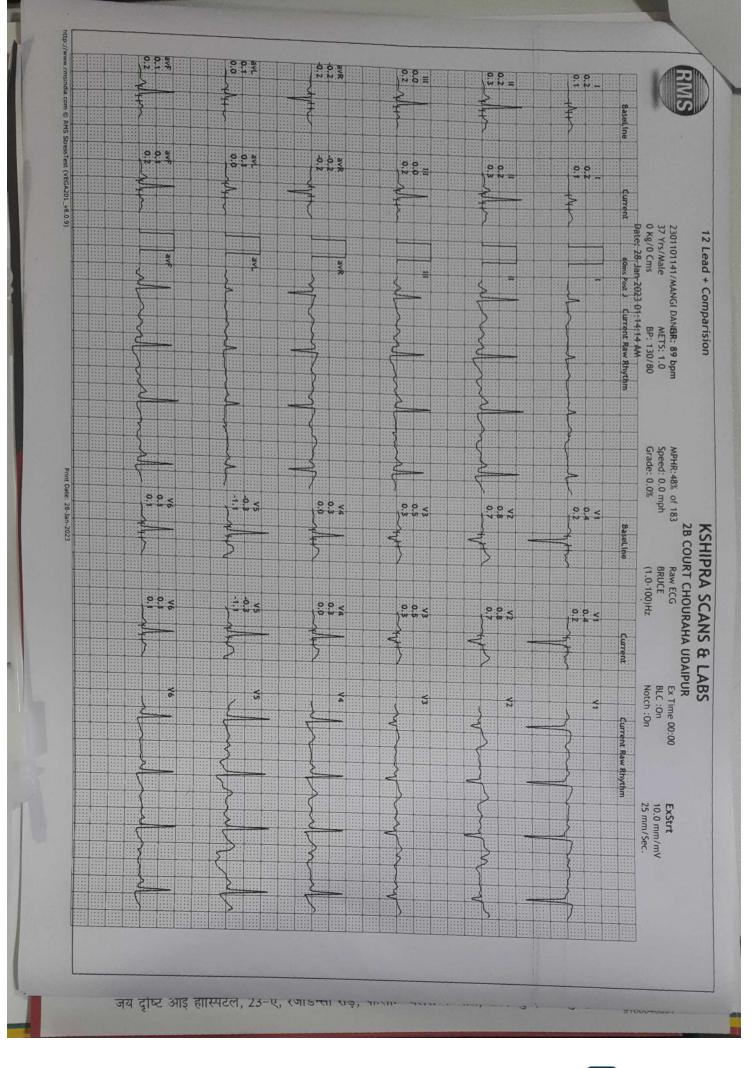
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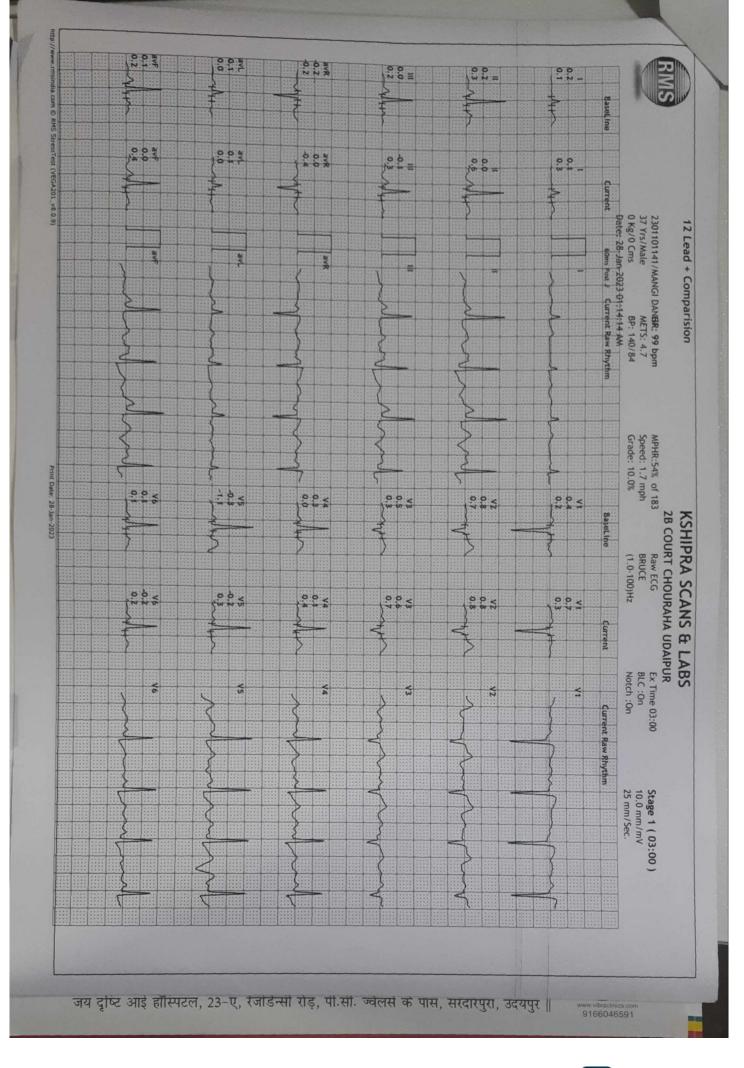


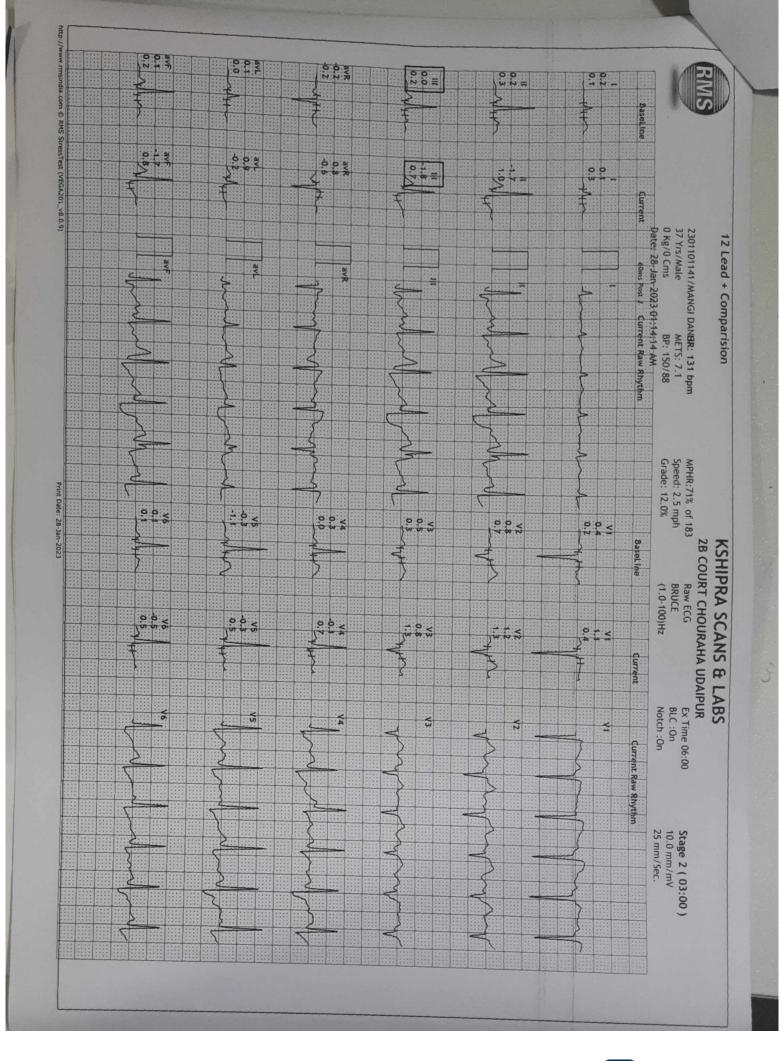


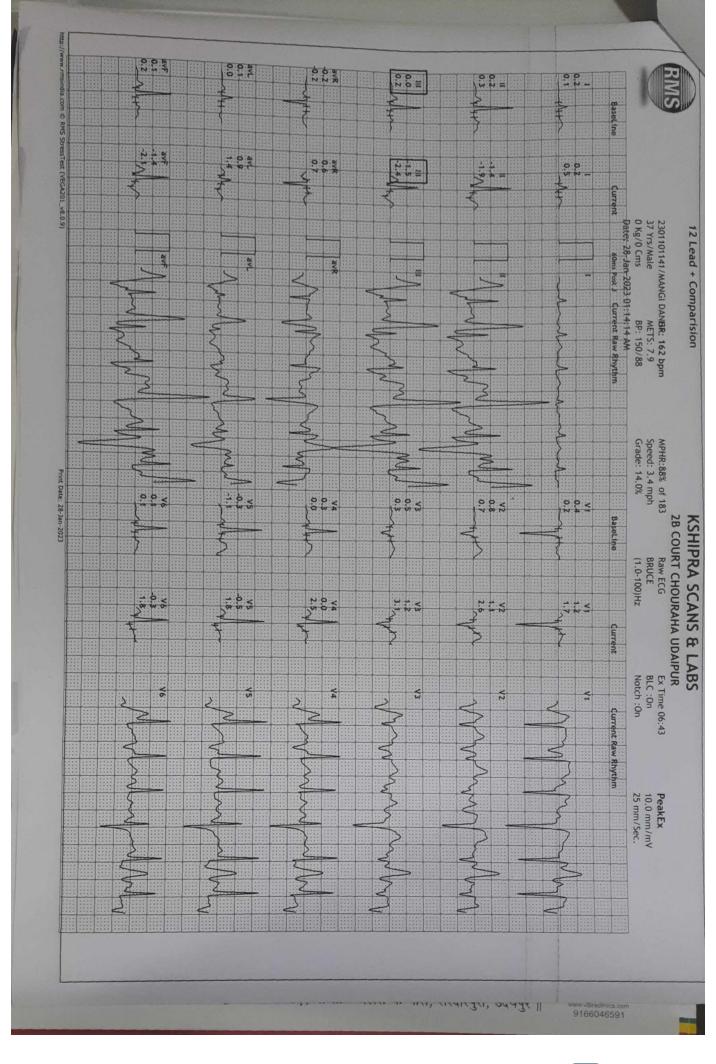


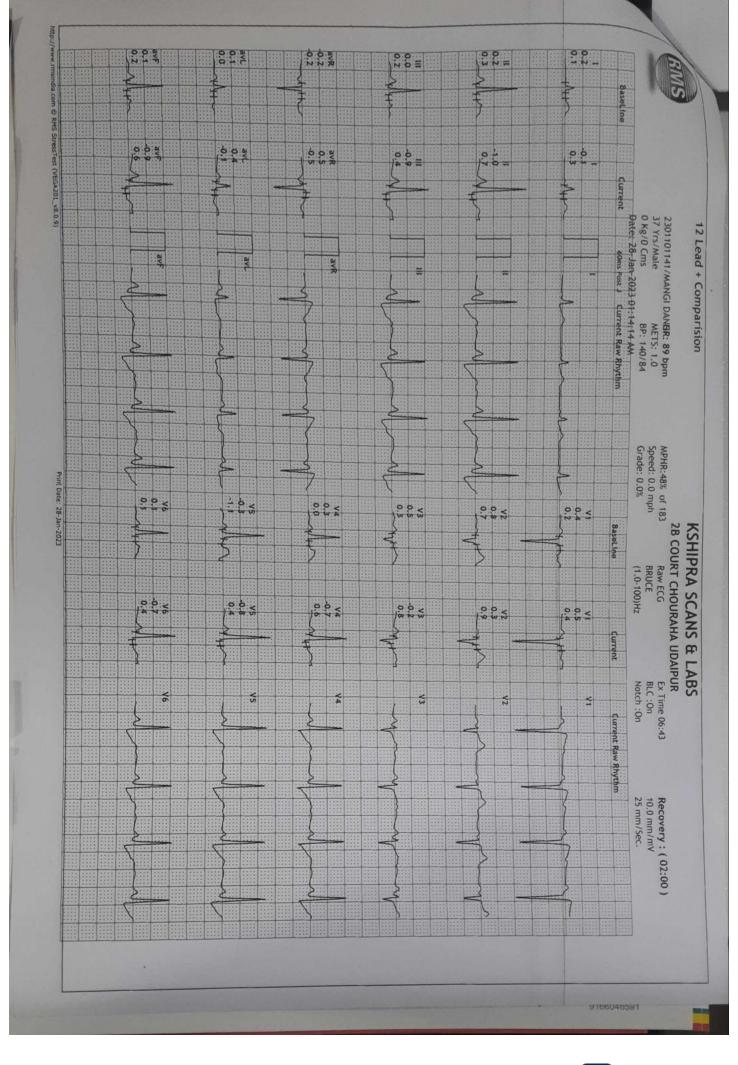


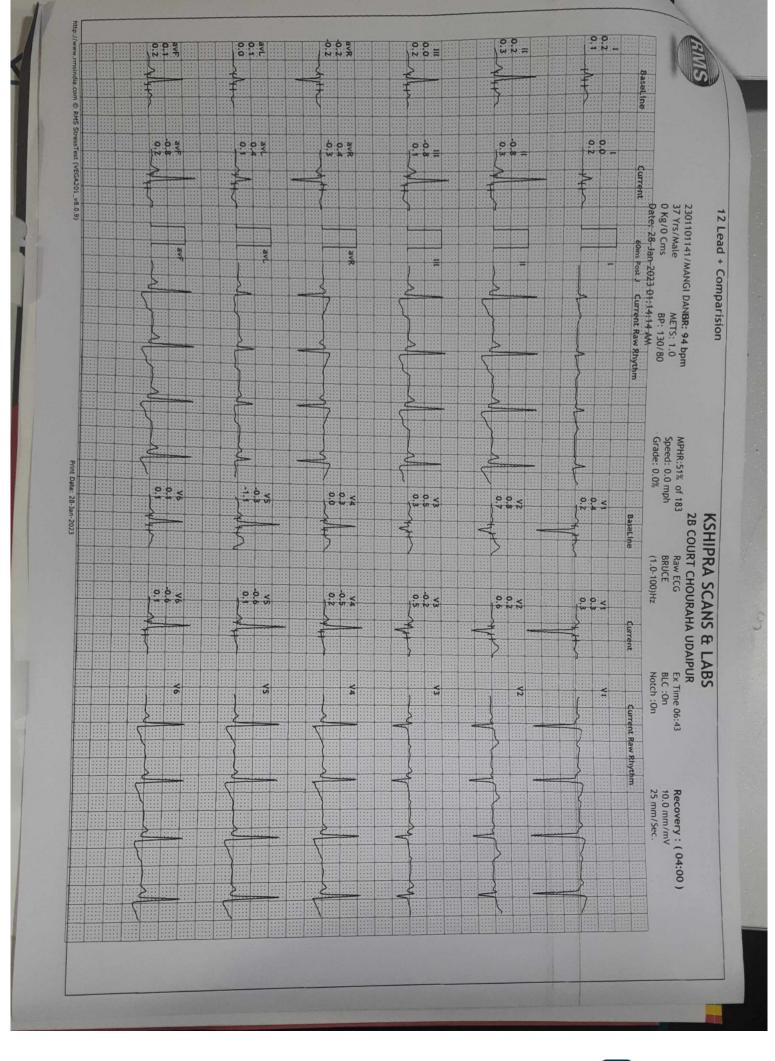














www.drishtihospital.com Call: 9982996666

MRS:- Mampi

dungi

37/F

clo- for Eye check Up (BE)

DUA < 6/29

BE Colour vision

vision (v

Ref. < -0.75×180 616

Dr. Sharva Pandya

MBBS, M.S., (Ophthalmology) RMC Reg. No.: 021537

डॉ. शर्वा पण्ड्या

वरिष्ठ नेत्र रोग विशेषज्ञ सर्जन

28/01/23

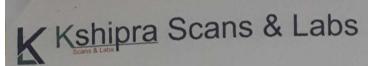
Dr. SHARVA PANDYA M.B.B.S.,M.S. (Ophth.) Jai Drishti Eye Hospital Udaipur (Raj.)

Cosmetology Partner:

Jai Drishti Eye Hospital, 23A, Residency Road, Near PC Jewellers, Sardarpura, Udaipur जय दृष्टि आई हॉस्पिटल, 23-ए, रेजीडेन्सी रोड़, पी.सी. ज्वेलर्स के पास, सरदारपुरा, उदयपुर







	Mangi dangi	Age	:	37Yrs. / F
Name	: Mangi dangi	Date	:	28/01/2023
Thanks To	: Self			

X-RAY CHEST (PA VIEW)

Both lung fields appear normal.

No e/o Koch's lesion or consolidation seen.

Both CP angles appear clear.

Both domes of diaphragm appear normal.

Heart size and aorta are within normal limits.

Bony thorax under vision appears normal.

Both hila appear normal.

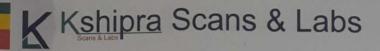
Consultant Radiologist

(This report is not valid for any Medico-legal purpose)

2-B, Ground Floor, Court Choraha, Main Road Tehsil Ke Samne, Udaipur 313001 (Raj.)
Mob.: 7229961115, 7229970005, 7229901188

(24 x 7 Customer Service) Email: Kshipralabsudaipur@gmail.com





Name	:	Mangi dangi	Age	:	37Yrs. / F	
Thanks To	. :	Self	Date	:	28/01/2023	

ULTRASOUND STUDY OF WHOLE ABDOMEN

LIVER:

Liver is normal in size, shape & echotexture. No focal mass lesion is seen. Intra hepatic biliary radicles are normal. Portal vein is normal in caliber.

GALL BLADDER

Gall bladder is well distended. The wall thickness appears normal. No evidence of calculus or mass lesion is seen. C.B.D. appears normal.

PANCREAS :

Pancreas is normal in size, shape & echotexture. No focal mass lesion is seen.

SPLEEN

Spleen is normal in size, shape & echotexture. No focal mass lesion is seen.

BOTH KIDNEYS

Both kidneys are normal in size, shape & echotexture. Renal parenchyma appears normal. No evidence of hydronephrosis, calculus or cortical scarring is seen in either kidney.

Right kidney measures

10.5 x 3.3 cms.

Left kidney measures

10.4 x 3.1 cms.

URINARY BLADDER

Urinary bladder is well distended and appears normal in contour. The wall thickness appears normal.

UTERUS

Uterus is AVAF, normal in size, shape and echotexture. It measures $9.5 \times 4.8 \times 3.9$ cms. Endometrial appears normal and measures5mm.

BOTH OVARIES

Both ovaries are normal in size, shape and echotexture.

Right ovary measures:

2.8 x 2.9 cms.

Left ovary measures:

2.5 x 2.4 cms.

No obvious abdominal lymphadenopathy is seen.

No free fluid is seen in peritoneal cavity.

OPINION:

• No significant abnormality is seen.

Di Ravi Soni MD (Radio-Diagnosis) Consultant Radiologist

(This report is not valid for any Medico-legal purpose)

ENCL:- PCPNDT Registration Certificate is printed on the back side of this report.

2-B, Ground Floor, Court Choraha, Main Road Tehsil Ke Samne, Udaipur 313001 (Raj.)

Mob.: 7229961115, 7229970005, 7229901188

(24 x 7 Customer Service) Email : Kshipralabsudaipur@gmail.com