

ID: 500319 CASE

AGE: 40 Y M D

Cms Kg

AJIT KU SWAIN  
MALE

13/12/2022 12:17:32

ZENA HEAL THICARE  
PLOT-119, SAHIDNAGAR, BHUBANESWAR

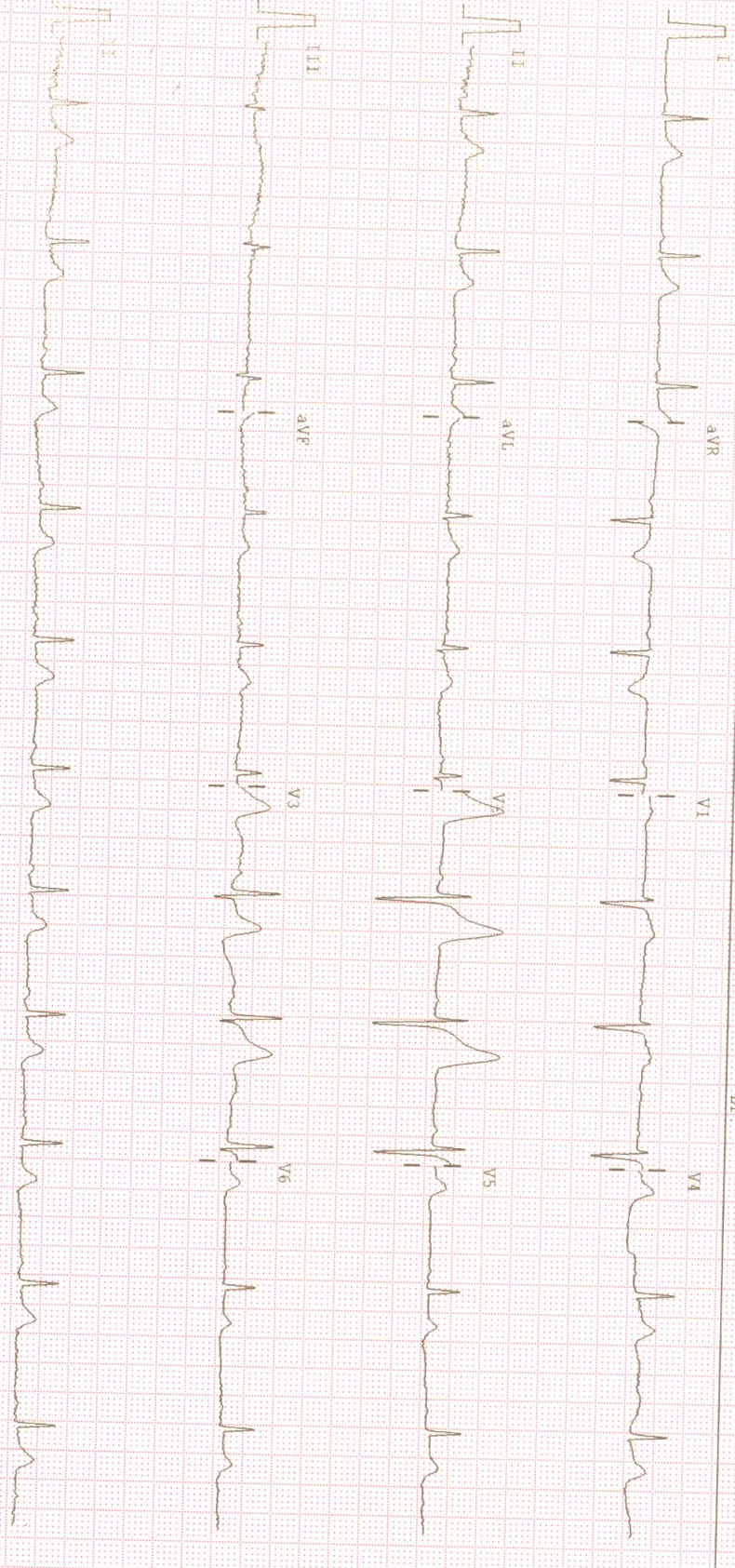
RATE	67 bpm	SINUS RHYTHM
P-R	889 ms	
P-R	140 ms	
QRS	70 ms	
QT	368 ms	
QTc	380 ms	
-AXIS-		
P	16°	
QRS	38°	
T	24°	

NORMAL ECG

12 SL. REPORT FORMAT 3x4+1L SQ

REF.

DR.



PRINT SPEED: 1mm/mV Notch: ON BIC: ON 0.05 39Hz ALL LEADS: PISCES 10121 VER 1.91 CLINICALLY CORRELATE THE FINDINGS



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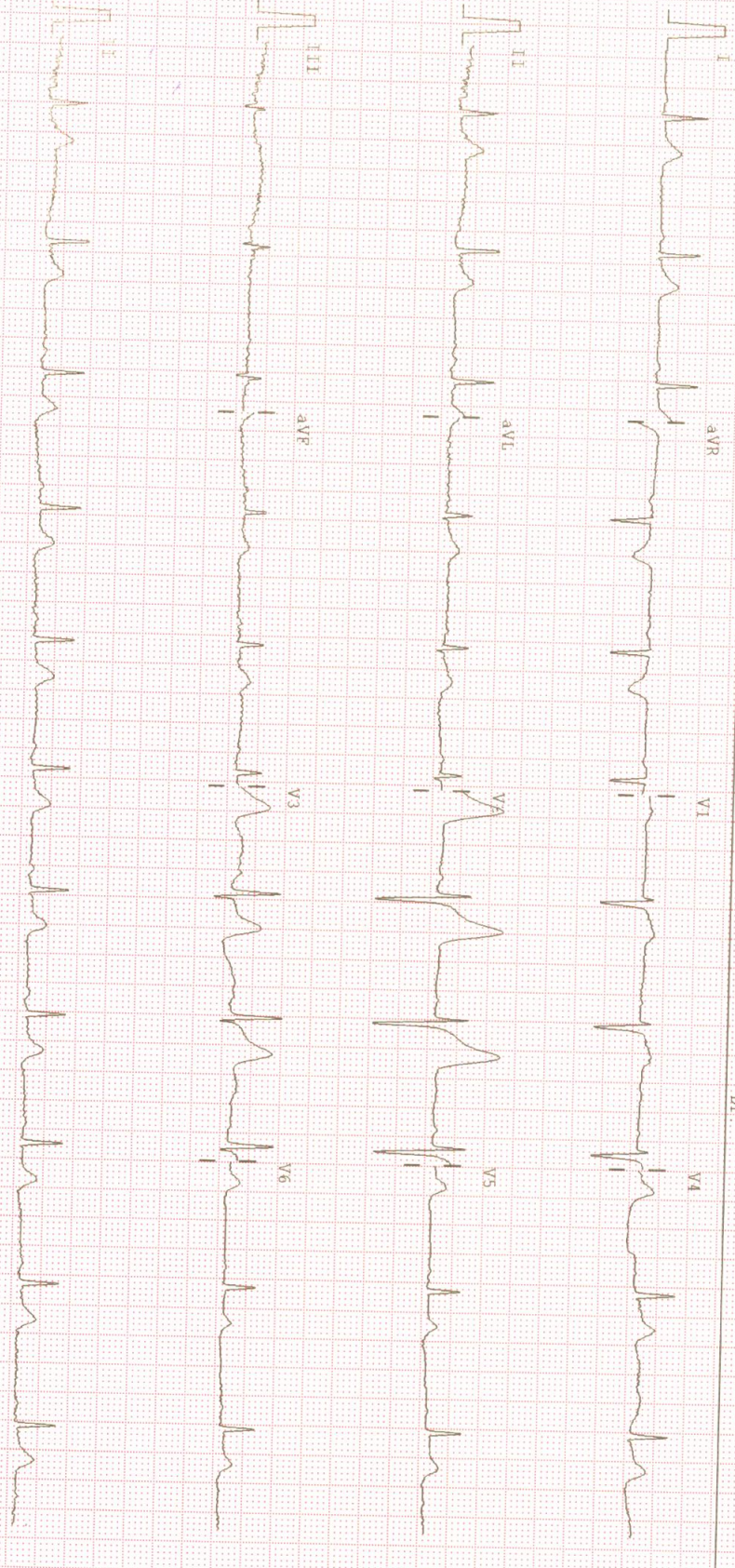
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**Patient Name :** MR. AJIT KUMAR SWAIN  
**Age / Gender :** 40 years / Male  
**Patient ID :** 14507

**Referral :** MEDI WHEEL  
**Collection Time :** 13/12/2022, 12:23 PM  
**Reporting Time :** 13/12/2022, 06:32 PM  
**Sample ID :**



Test Description	Value(s)	Reference Range	Unit
<b><u>Glucose, Fasting (FBS)</u></b>			
Glucose fasting Method : Fluoride Plasma-F, Hexokinase	79.61	75 - 115	mg/dL
<b><u>Glucose, Post Prandial (PP)</u></b>			
Blood Glucose-Post Prandial Method : Hexokinase	114.54	70 - 140	mg/dL
<b><u>BUN, Serum</u></b>			
BUN-Blood Urea Nitroge Method : Serum, Urease	17.2	10 - 50	mg/dL
<b><u>Creatinine</u></b>			
Creatinine Method : Serum, Jaffe	0.74	0.60 - 1.30	mg/dL
<b><u>Uric acid, Serum</u></b>			
Uric Acid Method : Uricase, Colorimetric	3.85	3.4 - 7.0	mg/dL

\*\*END OF REPORT\*\*

Lab technician

Dr. Kundan Kumar Sahoo  
CONSULTANT PATHOLOGIST /  
MICROBIOLOGIST

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**Zena Healthcare Services**

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Blood Glucose-Post Prandial Method : Hexokinase	114.54	70 - 140	mg/dL
<b><u>BUN, Serum</u></b>			
BUN-Blood Urea Nitroge Method : Serum, Urease	17.2	10 - 50	mg/dL
<b><u>Creatinine</u></b>			
Creatinine Method : Serum, Jaffe	0.74	0.60 - 1.30	mg/dL
<b><u>Uric acid, Serum</u></b>			
Uric Acid Method : Uricase, Colorimetric	3.85	3.4 - 7.0	mg/dL

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Test Description	Value(s)	Reference Range	Unit
------------------	----------	-----------------	------

**ESR, Erythrocyte Sedimentation Rate**

**ESR - Erythrocyte Sedimentation Rate**      8      0 - 15      mm/hr

Method : EDTA Whole Blood, Manual Westergren

**Interpretation:**

- It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.
- It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis and polymyalgia rheumatica.
- It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

**Blood Group ABO & Rh Typing, Blood**

Blood Group (ABO typing)

"B"

Method : Manual-Hemagglutination

RhD Factor (Rh Typing)

Positive

Method : Manual hemagglutination

\*\*END OF REPORT\*\*

Lab technician

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**Patient ID :** 14507

**Referral :** MEDI WHEEL

**Collection Time :** 13/12/2022, 12:23 PM

**Reporting Time :** 13/12/2022, 06:28 PM

**Sample ID :**



16623

Test Description	Value(s)	Reference Range	Unit
------------------	----------	-----------------	------

**HbA1c, Glycosylated Hemoglobin**

<b>HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD</b>	5.91		%
<b>Method :</b> (HPLC, NGSP certified)			
Estimated Average Glucose :	122.92	-	mg/dL

**Interpretation**

As per American Diabetes Association (ADA)	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	<5.7
At risk (Prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemc control	Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5

**Note:**

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

**Comments**

HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemc control as compared to blood and urinary glucose determinations.

**ADA criteria for correlation between HbA1c & Mean plasma glucose levels.**

HbA1c(%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183
9	212

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**Sample ID :**



16623

Test Description	Value(s)	Reference Range	Unit
10	240		
11	269		
12	298		

\*\*END OF REPORT\*\*

Lab Technician

*Wah*  
Dr. Kundan Kumar Sahoo  
CONSULTANT PATHOLOGIST /  
MICROBIOLOGIST

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16623

Test Description	Value(s)	Reference Range	Unit
<b>Complete Blood Count</b>			
Hemoglobin (Hb)	15.0	13.5 - 18.0	gm/dL
Erythrocyte (RBC) Count	4.95	4.7 - 6.0	mil/cu.mm
Packed Cell Volume (PCV)	42.3	42 - 52	%
Mean Cell Volume (MCV)	85.45	78 - 100	fL
Mean Cell Haemoglobin (MCH)	30.30	27 - 31	pg
Mean Corpuscular Hb Concn. (MCHC)	35.46	32 - 36	g/dL
Red Cell Distribution Width (RDW)	13.2	11.5 - 14.0	%
Total Leucocytes (WBC) Count	9200	4000-10000	cell/cu.mm
Neutrophils	66	40 - 80	%
Lymphocytes	30	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	02	1 - 6	%
Basophils	<b>00</b>	1-2	%
Platelet Count	301	150 - 450	10 <sup>3</sup> /ul
Mean Platelet Volume (MPV)	10.2	7.2 - 11.7	fL
PCT	0.31	0.2 - 0.5	%
PDW	<b>17.1</b>	9.0 - 17.0	%

\*\*END OF REPORT\*\*

Lab technician

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16623

Test Description	Value(s)	Reference Range	Unit
------------------	----------	-----------------	------

**Urine(R/M) Routine Examination of Urine**

**General Examination**

Colour	PALE YELLOW	Pale Yellow	
Transparency (Appearance)	CLEAR	Clear	
Deposit	Absent	Absent	
Reaction (pH)	Acidic 6.0	4.5 - 7.0	
Specific gravity	1.010	1.005 - 1.030	

**Chemical Examination**

Urine Protein (Albumin)	Absent	Absent	
Urine Glucose (Sugar)	Absent	Absent	

**Microscopic Examination**

Red blood cells	Absent	0-4	/hpf
Pus cells (WBCs)	2 - 4 /HPF	0-9	/hpf
Epithelial cells	1 - 2 /HPF	0-4	/hpf
Crystals	Absent	Absent	
Cast	Absent	Absent	
Amorphous deposits	Absent	Absent	
Bacteria	Absent	Absent	
Trichomonas Vaginalis	Absent	Absent	
Yeast cells	Absent	Absent	

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16623

Test Description	Value(s)	Reference Range	Unit
<b><u>LFT, Liver Function Test</u></b>			
Bilirubin - Total Method : Serum, Jendrassik Grof	0.68	0.00 - 1.00	mg/dL
Bilirubin - Direct Method : Serum, Diazotization	0.16	0.00 - 0.20	mg/dL
Bilirubin - Indirect Method : Serum, Calculated	0.52	0.10 - 0.80	mg/dL
SGOT Method : Serum, UV with P5P, IFCC 37 degree	22.1	8 - 33	U/L
SGPT Method : Serum, UV with P5P, IFCC 37 degree	31.2	3 - 35	U/L
GGT-Gamma Glutamyl Transpeptidase Method : Serum, G-glutamyl-carboxy-nitroanilide	8.25	< 55	U/L
Alkaline Phosphatase Method : PNPP-AMP Buffer/Kinetic	102.2	53-128	U/L
Total Protein Method : Serum, Biuret, reagent blank end point	6.74	6.60 - 8.70	g/dL
Albumin Method : Serum, Bromocresol green	3.81	3.50 - 5.30	g/dL
Globulin Method : Serum, EIA	2.93	2.00-3.50	g/dL
A/G Ratio Method : Serum, EIA	1.30	1.2 - 2.2	

\*\*END OF REPORT\*\*

Lab Technician

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Dr. Kundan Kumar Sahoo  
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Bilirubin - Indirect Method : Serum, Calculated	0.52	0.10 - 0.80	mg/dL
SGOT Method : Serum, UV with P5P, IFCC 37 degree	22.1	8 - 33	U/L
SGPT Method : Serum, UV with P5P, IFCC 37 degree	31.2	3 - 35	U/L
GGT-Gamma Glutamyl Transpeptidase Method : Serum, G-glutamyl-carboxy-nitroanilide	8.25	< 55	U/L
Alkaline Phosphatase Method : PNPP-AMP Buffer/Kinetic	102.2	53-128	U/L
Total Protein Method : Serum, Biuret, reagent blank end point	6.74	6.60 - 8.70	g/dL
Albumin Method : Serum, Bromocresol green	3.81	3.50 - 5.30	g/dL
Globulin Method : Serum, EIA	2.93	2.00-3.50	g/dL
A/G Ratio Method : Serum, EIA	1.30	1.2 - 2.2	

\*\*END OF REPORT\*\*

Lab Technician

*K. Sahoo*  
Dr. Kundan Kumar Sahoo  
CONSULTANT PATHOLOGIST /  
MICROBIOLOGIST

For Home Collection Please Call at Number :

**Zena Healthcare Services**

Plot No. 119, Opp. Water tank Lane, Near Police Phandi, Saheed Nagar, Bhubaneswar-07  
Ph. : 0674-2549902, 9692276908, 8337964922, E-mail : zenahealthcare@gmail.com

Website : [www.zenacare.in](http://www.zenacare.in)

**Wishing Good Health**

Page 1 of 1





**Patient Name :** MR. AJIT KUMAR SWAIN

**Age / Gender :** 40 years / Male

**Patient ID :** 14507

**Referral :** MEDI WHEEL

**Collection Time :** 13/12/2022, 12:23 PM

**Reporting Time :** 13/12/2022, 06:31 PM

**Sample ID :**



16623

Test Description	Value(s)	Reference Range	Unit
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**Thyroid Profile ( T3, T4, TSH )**

T3-Total Method : CLIA	0.95	0.87 - 2.73	ng/dL
T4-Total Method : CLIA	6.99	6.09 - 12.23	ug/dL
TSH-Ultrasensitive Method : CLIA	0.45	0.45 - 4.50	uIU/mL

**Interpretation**

TSH	T3	T4	Suggested Interpretation for the Thyroid Function Tests Pattern
Raised	Within range	Within range	Raised Within Range Within Range .Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. Subclinical Autoimmune Hypothyroidism. Intermittent 14 therapy for hypothyroidism .Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis Post thyroidectomy, Post radioiodine Hypothyroid phase of transient thyroiditis"
Raised or within range	Raised	Raised or within range	Interfering antibodies to thyroid hormones (anti-TPO antibodies) Intermittent 14 therapy or T4 overdose •Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics.
Decreased	Raised or within range	Raised or within range	Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & Range Range associated with Non-Thyroidal illness .Subclinical Hyperthyroidism .Thyroxine ingestion'
Decreased	Decreased	Decreased	Central Hypothyroidism .Non-Thyroidal illness .Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease). Multinodular goitre, Toxic nodule •Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased Within Rang	Raised	Within range	T3 toxicosis •Non-Thyroidal illness
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness In elderly the drop in T3 level can be upto 25%.

\*\*END OF REPORT\*\*

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**Collection Time :** 13/12/2022, 12:23 PM  
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**Sample ID :**



Test Description	Value(s)	Reference Range	Unit
<b>Lipid Profile</b>			
Cholesterol-Total Method : Spectrophotometry	185.2	Desirable level   < 200 Borderline High   200-239 High   >or = 240	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	114.3	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
HDL Cholesterol Method : Serum, Direct measure-PEG	42.3	Normal: > 40 Major Risk for Heart: < 40	mg/dL
LDL Cholesterol Method : Enzymatic selective protection	120.04	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190	mg/dL
VLDL Cholesterol Method : Serum, Enzymatic	22.86	6 - 38	mg/dL
CHOL/HDL Ratio Method : Serum, Enzymatic	4.38	3.5 - 5.0	
LDL/HDL Ratio Method : Serum, Enzymatic	2.84	2.5 - 3.5	

**Note:**  
8-10 hours fasting sample is required.

\*\*END OF REPORT\*\*

Lab technician

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**ZENA**  
Healthcare Services  
Professional | Accuracy | Precision

Professional Accuracy Precision

Regd. No. : 1834

# ZENA HEALTHCARE SERVICES

(A Unit of Zena Enterprises)

**NAME: AJIT KUMAR SWAIN**  
**AGE: -40YRS**  
**Patient ID: -3**

**REFERRAL: -MEDI WHEEL**  
**DATE: -13.12.2022**  
**SEX: -MALE**

**CHEST X-RAY PA VIEW SHOWS.**

- Both side lung fields are clear.
- Trachea within normal limit.
- Both costophrenic cardiophrenic angle are clear.
- Cardiac shadow within normal limit.
- Media stinum in position

**IMPRESSION: -NORMAL STUDY.**

*B. Pradhan*

**Dr. Bhagaban Pradhan**  
**M.D. (Radio diagnosis)**  
**Consultant Radiologist**

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**MEDICAL REPORT**

NAME

Date :- 13.12.2022

AJIT KUMAR SWAIN

**MEDICAL INFORMATION**

Height:- 160cm	Age:- 40Yrs
Weight:- 66kg	Sex:- Male
Blood Pressure:- 113/70mmhg	Pulse:-61/min

Body Mass Index(BMI)

25.8

**Physical Fitness certificate**

This is to certify that Mr. AJIT KUMAR SWAIN, aged 40yrs,  
reports is Normal and I have found his FIT.

Signature



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