

FINAL REPORT

Bill No.	: APHHC230000811	Bill Date	: 17-07-2023 08:12
Patient Name	: MR. ANISH KUMAR	UHID	: APH000015911
Age / Gender	: 33 Yrs 5 Mth / MALE	Patient Type	: OPD <input checked="" type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: mediwheel	Ward / Bed	: /
Sample ID	: APH23018825	Current Ward / Bed	: /
		Receiving Date & Time	: 17-07-2023 09:41
		Reporting Date & Time	: 17-07-2023 12:06

HAEMATOLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		5.9	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.8	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		14.2	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		42.6	%	40 - 50
MEAN CORPUSCULAR VOLUME		89.3	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.7	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.3	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		158	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Periode Size Distribution)	H	46.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.6	%	11.6 - 14

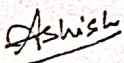
DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		70	%	40 - 80
LYMPHOCYTES		25	%	20 - 40
MONOCYTES		4	%	2 - 10
EOSINOPHILS		1	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	38	mm 1st hr	0 - 10

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low



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 MBBS,MD
 CONSULTANT

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Sample ID	: APH23018829	Current Ward / Bed	: /
		Receiving Date & Time	: 17-07-2023 09:41
		Reporting Date & Time	: 17-07-2023 13:12

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

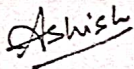
THYROID PROFILE (FT3+FT4+TSH)

Test	Result	UOM	Reference Interval
FREE-TRI IODO THYRONINE (FT3) (ECLIA)	3.04	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.27	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	3.25	mIU/L	0.27-4.20

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Sample ID	: APH23018879	Current Ward / Bed	: /
		Receiving Date & Time	: 17-07-2023 15:13
		Reporting Date & Time	: 17-07-2023 16:57

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Stool, Urine

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW
CONSISTENCY	SEMI SOLID
BLOOD	ABSENT
MUCOUS	ABSENT

MICROSCOPIC EXAMINATION

PUS CELLS	1-2
RBC's	NIL
TROPHOZOITES	NOT DETECTED
CYSTS	NOT DETECTED
OVA	NOT DETECTED

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY	30 mL	
COLOUR	Pale yellow	Pale Yellow
TURBIDITY	Clear	

CHEMICAL EXAMINATION

PH (Double pH indicator method)	6.0	5.0 - 8.5
PROTEINS (Protein-error-of-Indicators)	Negative	Negative
SUGAR (GOD POD Method)	Negative	Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.010	1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES	1-2	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	0-1		
CASTS	Nil		
CRYSTALS	Nil		
URINE-SUGAR	Negative		

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		Reporting Date & Time	: 17-07-2023 17:32

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD UREA <small>Urease-GLDH,Kinetic</small>		28	mg/dL	15 - 45
BUN (CALCULATED)		13.1	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>		0.9	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		89.0	mg/dL	70 - 100

Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.
(As per American Diabetes Association recommendation)

GLUCOSE-PLASMA (POST PRANDIAL) <small>(UV Hexokinase)</small>		100.0	mg/dL	70 - 140
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Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL.
(As per American Diabetes Association recommendation)

LIPID PROFILE

CHOLESTROL-TOTAL <small>(CHO-POD)</small>		126	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>	L	35	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>		72	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		151	mg/dL	0 - 160
NON-HDL CHOLESTROL		91.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.6		½Average Risk <3.3 Average Risk 3.3-4.4 2 Times Average Risk 4.5-7.1 3 Times Average Risk 7.2-11.0
LDL CHOLESTROL / HDL CHOLESTROL		2.1		½Average Risk <1.0 Average Risk 1.0-3.6 2 Times Average Risk 3.7-6.3 3 Times Average Risk 6.4-8.0
CHOLESTROL-VLDL		30	mg/dL	10 - 35

Comments:

- Disorders of Lipid metabolism play a major role in atherosclerosis and coronary heart disease.
- There is an established relationship between increased total cholesterol & LDL cholesterol and myocardial infarction.
- HDL cholesterol level is inversely related to the incidence of coronary artery disease.
- Major risk factors which adversely affect the lipid levels are:
 - Cigarette smoking.
 - Hypertension.
 - Family history of premature coronary heart disease.
 - Pre-existing coronary heart disease.

LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL <small>(DPD)</small>	H	1.94	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>	H	0.39	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	1.55	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.8	g/dL	6 - 8.1



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BIOCHEMISTRY REPORTING

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BILIRUBIN-DIRECT <small>(DPD)</small>	H	0.39	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	1.55	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.8	g/dL	6 - 8.1



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Age / Gender	: 33 Yrs 5 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: mediwheel	Ward / Bed	: /
Sample ID	: APH23018826	Current Ward / Bed	: /
		Receiving Date & Time	: 17-07-2023 09:41
		Reporting Date & Time	: 17-07-2023 10:59

BLOOD BANK REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Ashish

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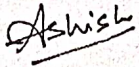
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ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.3	g/dL	
S.GLOBULIN	L	2.5	g/dL	2.8-3.8
A/G RATIO		1.72		1.5 - 2.5
ALKALINE PHOSPHATASE IFCC AMP BUFFER		93.4	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		28.6	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	H	46.9	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		24.0	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)		240.0	IU/L	0 - 248
S.PROTEIN-TOTAL (Biuret)		6.8	g/dL	6 - 8.1
URIC ACID Uricase - Trinder		5.4	mg/dL	2.6 - 7.2

** End of Report **

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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

HBA1C (Turbidimetric Immuno-inhibition)	4.9	%	4.0 - 6.2
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HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- Note:
1. A three monthly monitoring is recommended in diabetics.
 2. Since HbA1c concentration represents the integrated values for blood glucose over the preceding 6 - 10 weeks and is not affected by daily glucose fluctuation, exercise and recent food intake, it is a more useful tool for monitoring diabetics.

**** End of Report ****

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