

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani Ph: 7705023379,-

CIN: U85110DL2003PLC308206



Patient Name : Mr.ASHEEM RANA Registered On : 26/Mar/2023 09:06:00 Age/Gender Collected : 34 Y 11 M 1 D /M : 26/Mar/2023 09:46:11 UHID/MR NO : CHL2.0000129732 Received : 26/Mar/2023 11:18:02 Visit ID : CHL20356802223 Reported : 26/Mar/2023 14:42:49

Ref Doctor : Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report

#### **DEPARTMENT OF HAEMATOLOGY**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	

Blood Group (ABO & Rh typing) \*\*, Blood

Blood Group

Rh ( Anti-D) POSITIVE

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

Haemoglobin

13.70

g/dl

1 Day- 14.5-22.5 g/dl

1 Wk- 13.5-19.5 g/dl

1 Mo- 10.0-18.0 g/dl

3-6 Mo- 9.5-13.5 g/dl

0.5-2 Yr- 10.5-13.5

g/dl

2-6 Yr- 11.5-15.5 g/dl

12-18 Yr 13.0-16.0

g/dl

Male- 13.5-17.5 g/dl

Female- 12.0-15.5 g/dl

TLC (WBC)	5,700.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils )	55.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	38.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE
ESR				
Observed	14.00	Mm for 1st hr.		
Corrected	6.00	Mm for 1st hr.	< 9	
PCV (HCT)	43.00	%	40-54	
Platelet count				
Platelet Count	1.8	LACS/cu mm	1.5-4.0	ELECTRONIC
				IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.50	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	53.50	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.25	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	14.30	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	4.71	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE







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### **DEPARTMENT OF HAEMATOLOGY**

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	90.70	fl	80-100	CALCULATED PARAMETER
MCH	29.10	pg	28-35	CALCULATED PARAMETER
MCHC	32.10	%	30-38	CALCULATED PARAMETER
RDW-CV	12.80	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	42.20	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,135.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	114.00	/cu mm	40-440	









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### **DEPARTMENT OF BIOCHEMISTRY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Uı	nit Bio. Ref. Inte	rval Method	
GLUCOSE FASTING ** , Plasma					
Glucose Fasting	91.40	mg/dl	< 100 Normal 100-125 Pre-diabetes	GOD POD	

≥ 126 Diabetes

#### **Interpretation:**

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.

Glucose PP **		155.90	mg/dl	<140 Normal	GOD POD
Sample:Plasma After Meal				140-199 Pre-diabetes	
				>200 Diabetes	

## Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.

### GLYCOSYLATED HAEMOGLOBIN (HBA1C) \*\*, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.90	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	41.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	123	mg/dl	

#### **Interpretation:**

## NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.







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#### **DEPARTMENT OF BIOCHEMISTRY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	<b>Degree of Glucose Control Unit</b>
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

<sup>\*</sup>High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

N.B.: Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

### **Clinical Implications:**

- \*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.
- \*With optimal control, the HbA 1c moves toward normal levels.
- \*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated \*Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy
- c. Alcohol toxicity d. Lead toxicity
- \*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss
- \*Pregnancy d. chronic renal failure. Interfering Factors:
- \*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) ** Sample:Serum	7.61	mg/dL	7.0-23.0	CALCULATED
Creatinine ** Sample:Serum	1.00	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid ** Sample:Serum	6.53	mg/dl	3.4-7.0	URICASE





<sup>\*\*</sup>Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.



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#### **DEPARTMENT OF BIOCHEMISTRY**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	U	Init Bio. F	Ref. Interval	Method
LFT (WITH GAMMA GT) ** , Serum					
SGOT / Aspartate Aminotransferase (AST)	32.19	U/L	< 35	ĺ	FCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	57.60	U/L	< 40	1	FCC WITHOUT P5P
Gamma GT (GGT)	24.62	IU/L	11-50	(	OPTIMIZED SZAZING
Protein	6.59	gm/dl	6.2-8.0	E	BIRUET
Albumin	3.89	gm/dl	3.8-5.4	E	3.C.G.
Globulin	2.70	gm/dl	1.8-3.6		CALCULATED
A:G Ratio	1.44		1.1-2.0	(	CALCULATED
Alkaline Phosphatase (Total)	91.00	U/L	42.0-165.0	1	FCC METHOD
Bilirubin (Total)	0.38	mg/dl	0.3-1.2	J	ENDRASSIK & GROF
Bilirubin (Direct)	0.16	mg/dl	< 0.30	J	ENDRASSIK & GROF
Bilirubin (Indirect)	0.22	mg/dl	< 0.8	J	ENDRASSIK & GROF
LIPID PROFILE ( MINI ) ** , Serum					
Cholesterol (Total)	226.52	mg/dl	<200 Desirab 200-239 Bord > 240 High	9 9	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	52.40	mg/dl	30-70		DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	142	mg/dl	< 100 Optima 100-129 Nr. Optimal/Abo	ve Optimal	CALCULATED
, ·			130-159 Bord 160-189 High > 190 Very Hi	า	
VLDL	31.90	mg/dl	10-33	(	CALCULATED
Triglycerides	159.50	mg/dl	< 150 Norma 150-199 Bord 200-499 High >500 Very High	derline High	GPO-PAP









Since 1991

## CHANDAN DIAGNOSTIC CENTRE

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: Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report

Ref Doctor CARE LTD HLD

### **DEPARTMENT OF CLINICAL PATHOLOGY**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

note that the property of

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE *	* , Urine			
Color	PALE YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic ( 5.0 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+)	DIPSTICK
			40-200 (++)	
			200-500 (+++) > 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)  Microscopic Examination:	ABSENT			
Epithelial cells	1-2/h.p.f			MICROSCOPIC
	Total - market			EXAMINATION
Pus cells	0-1/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			

Dr GITIKA HYANKI KUTIYAL M.D (PATHOLOGY)







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#### **DEPARTMENT OF CLINICAL PATHOLOGY**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

## **STOOL, ROUTINE EXAMINATION \*\*, Stool**

Color	BROWNISH
Consistency	SEMI SOLID
Reaction (PH)	Acidic ( 6.0 )
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	ABSENT
RBCs	ABSENT
Ova	ABSENT
Cysts	ABSENT
Others	ABSENT









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Collected Received

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: 26/Mar/2023 09:06:01 : 26/Mar/2023 11:33:06 : 26/Mar/2023 12:01:15

UHID/MR Visit ID

: CHL20356802223

Reported

: 26/Mar/2023 14:09:26

Ref Doctor

: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD

Status

: Final Report

#### **DEPARTMENT OF CLINICAL PATHOLOGY**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

**SUGAR, FASTING STAGE \*\***, Urine

Sugar, Fasting stage

**ABSENT** 

gms%

**Interpretation:** 

(+) < 0.5

(++) 0.5-1.0

(+++) 1-2

(++++) > 2

Dr GITIKA HYANKI KUTIYAL M.D
(PATHOLOGY)









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Patient Name Age/Gender

: Mr.ASHEEM RANA : 34 Y 11 M 1 D /M

Collected

Registered On

: 26/Mar/2023 09:06:02 : 26/Mar/2023 13:00:31

UHID/MR NO Visit ID

: CHL2.0000129732 : CHL20356802223

: 26/Mar/2023 14:20:09 Received Reported

: Dr.MEDIWHEEL ARCOFEMI HEALTH

: 28/Mar/2023 15:13:00

Ref Doctor

CARE LTD HLD

Status : Final Report

#### **DEPARTMENT OF CLINICAL PATHOLOGY**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

**Test Name** Result Unit Bio. Ref. Interval Method

**SUGAR, PP STAGE \*\***, Urine

Sugar, PP Stage

**ABSENT** 

**Interpretation:** 

(+)< 0.5 gms%

0.5-1.0 gms% (++)

(+++) 1-2 gms%

(++++) > 2 gms%

Dr GITIKA HYANKI KUTIYAL M.D (PATHOLOGY)







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CIN: U85110DL2003PLC308206



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#### **DEPARTMENT OF IMMUNOLOGY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	136.62	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	9.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.23	μIU/mL	0.27 - 5.5	CLIA
		ų.		
Interpretation:				
		0.3-4.5 μIU/n	nL First Trimes	ter
		0.5-4.6 μIU/n	nL Second Trim	ester
		0.8-5.2 μIU/n	nL Third Trimes	ster
		0.5-8.9 μIU/n	nL Adults	55-87 Years
		0.7-27 μIU/n	nL Premature	28-36 Week
		2.3-13.2 μIU/n	nL Cord Blood	> 37Week
		0.7-64 μIU/n	nL Child(21 wk	- 20 Yrs.)
		1-39 µIU	/mL Child	0-4 Days
		1.7-9.1 μIU/n		2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- **6**) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

Bring

Dr. Anupam Singh (MBBS MD Pathology)







Age/Gender

UHID/MR NO

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CARE LTD HLD

Registered On

Collected

: 26/Mar/2023 09:06:03

: N/A

Received : N/A

Reported : 26/Mar/2023 15:11:54

Status : Final Report

#### **DEPARTMENT OF X-RAY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA \*

## (500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

## **DIGITAL CHEST P-A VIEW:-**

- Rotated film.
- Diaphragmatic hum noted on right side.
- Bilateral lung fields appear grossly unremarkable.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Bilateral hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

## **IMPRESSION:-**

No significant abnormality is seen.

Adv:-Clinico-pathological correlation.

Dr Sushil Pandey(MD Radiodignosis)



Home Sample Collection 1800-419-0002





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Ref Doctor : Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report

#### **DEPARTMENT OF ULTRASOUND**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

## **ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) \***

## WHOLE ABDOMEN ULTRASONOGRAPHY REPORT

## LIVER

• The liver is mildly enlarged in size (~15.4 cms in longitudinal span) and its echogenecity is homogeneously increased causing partial obscuration of periportal outline. No focal lesion is seen. (Note: - Small isoechoic focal lesion cannot be ruled out).

## PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is not dilated.
- Porta hepatis is normal.

### **BILIARY SYSTEM**

- The intra-hepatic biliary radicles are normal.
- Common bile duct is not dilated.
- The gall bladder is normal in size and has regular walls. Lumen of the gall bladder is anechoic.

## **PANCREAS**

• The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

## KIDNEYS

- Right kidney:-
  - Right kidney is normal in size, measuring ~9.9x4.5 cms.
  - Cortical echogenicity is normal.
  - Pelvicalyceal system is not dilated.
  - Cortico-medullary demarcation is maintained.
  - Parenchymal thickness appear normal.

## • Left kidney:-

- Left kidney is normal in size, measuring ~10.2x5.3 cms.
- Cortical echogenicity is normal.
- Pelvicalyceal system is not dilated.







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#### DEPARTMENT OF ULTRASOUND

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

- Cortico-medullary demarcation is maintained.
- Parenchymal thickness appear normal.

### **SPLEEN**

• The spleen is normal in size ( $\sim$ 6.86 cms) and has a normal homogenous echo-texture.

## ILIAC FOSSAE & PERITONEUM

- Scan over the iliac fossae does not reveal any fluid collection or large mass.
- No free fluid is noted in peritoneal cavity.

### URETERS

- The upper parts of both the ureters are normal.
- Bilateral vesicoureteric junctions are normal.

## URINARY BLADDER

• The urinary bladder is normal. Bladder wall is normal in thickness and is regular.

#### PROSTATE

• The prostate gland is normal in size (~2.4x3.6x2.7 cms & vol ~12 cc) and normal in echotexture with smooth outline. No median lobe indentation is seen.

### FINAL IMPRESSION:-

# Mild hepatomegaly with grade II fatty liver.

Adv: Clinico-pathological-correlation / further evaluation & Follow up

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

(\*\*) Test Performed at Chandan Speciality Lab.

Result/s to Follow: ECG/EKG





This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \*

\*Facilities Available at Select Location\*







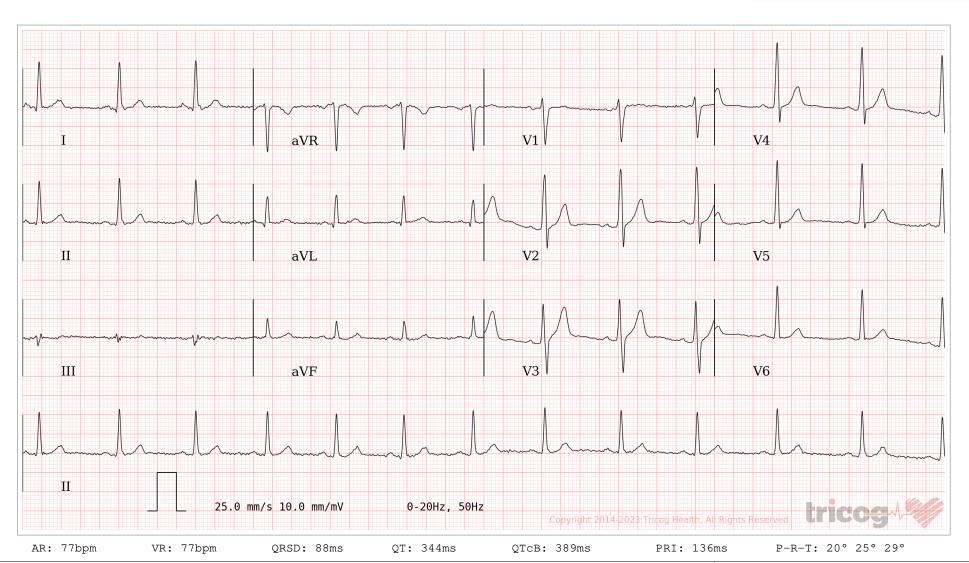
## **Chandan Diagnostic**



Age / Gender: 34/Male Date and Time: 26th Mar 23 10:04 AM

Patient ID: CHL20356802223

Patient Name: Mr.ASHEEM RANA



ECG Within Normal Limits: Sinus Rhythm, Sinus Arrhythmia Seen. Voltage criteria for LVH noted. Baseline artefacts. Please correlate clinically.

MD, DM: Cardiology

Dr. Navneet Mahajan

REPORTED BY

Dr. Charit

AUTHORIZED BY

63382

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.