



24765 190924

| | | | | | |
|---------|----------------------------|-----------------|-------------------------------|-------------------|-----------------------|
| Name | : MR. ROHAN GURAV | Registration ID | : 24765 | Sample Collection | : 19/09/2024 09:12:03 |
| Age/Sex | : 22 Yrs. / M | Printed | : 21/09/2024 15:59:43 | Sample Received | : 19/09/2024 09:12:03 |
| Ref. By | : J M FINANCE SERVICES LTD | Sent By | : Arcofemi Healthcare Pvt Ltd | Report Released | : 20/09/2024 12:57:49 |

COMPLETE BLOOD COUNT

| Test | Result | Unit | Biological Ref Range |
|---|----------------------------|---------------------|-----------------------------|
| Hemoglobin (SLS) Photometric | : 16.0 | g/dL | 13-18 g/dL |
| Total RBC (Electrical Impedence) | : 5.12 | 10 ⁶ /μL | 3.0-6.0 10 ⁶ /μL |
| Hematocrit (PCV) (Calculated) | : 47.9 | % | 36-54 % |
| Mean Corpuscular Volume (MCV) (calculated) | : 93.6 | fL | 78-101 fL |
| Mean Corpuscular Hemoglobin (MCH) (Calculated) | : 31.3 | pg | 27-32 pg |
| Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated) | : 33.4 | g/dL | 31.5-34.5 g/dL |
| Red Cell Distribution Width (RDW- CV) (Electrical Impedence) | : 14.00 | % | 12-15 % |
| Total Leucocytes Count (Light Scattering) | : 7780 | /cumm | 4000-11000 /cumm |
| Neutrophils (Calculated) | : 58 | % | 40-75 % |
| Eosinophils Percentage (Calculated) | : 03 | % | 1-6 % |
| Lymphocyte Percentage (Calculated) | : 33 | % | 20-45 % |
| Basophils Percentage (Calculated) | : 0 | % | 0-1 % |
| Monocytes Percentage (Calculated) | : 06 | % | 1-10 % |
| RBC Morphology | : Normocytic, Normochromic | | |
| WBC Morphology | : Normal Morphology | | |
| Platelet Count (Electrical Impedence) | : 349000 | /ul | 150000-450000 /ul |
| Platelets on Smear | : Adequate | | Adequate |
| E.S.R | : 13 | mm at 1hr | 0-20 mm at 1hr |

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

*All Samples Processed At Excellas Clinics Mulund Centre .

*ESR NOT IN NABL scope.



Dr. Santosh Khairnar
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-2000/08/2926





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SERVICES LTD

Registration ID : 24765
Printed : 21/09/2024 15:59:43
Sent By : Arcofemi Healthcare Pvt Ltd

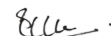
Sample Collection : 19/09/2024 09:12:03
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Report Released : 20/09/2024 12:57:49

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 12:57:49)

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



NABL M(ELT)-00683


Dr. Santosh Khairnar
M.D. (Pathologist)
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| Ref. By | : J M FINANCE SERVICES LTD | Sent By | : Arcofemi Healthcare Pvt Ltd | Report Released | : 20/09/2024 15:50:49 |

HbA1c (Whole Blood)

| Test | Result | Unit | Reference Range |
|--------------------------------|--------|------|---|
| HbA1c-Glycosylated Haemoglobin | : 5.00 | % | Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10 |

EDTA Whole Blood, Method: HPLC

| | | | |
|---------------------------------|---------|-------|------------------------|
| Estimated Average Glucose (eAG) | : 96.80 | mg/dl | 65.1-136.3 mg/dL mg/dl |
|---------------------------------|---------|-------|------------------------|

EDTA Whole Blood, Method: Calculated

Interpretation:

- 1.The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- 2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- 3.To estimate the eAG from the HbA1c value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- 4.Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 15:50:49)

Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

| Test | Result | Unit | Biological Ref. Range |
|---|----------|-------|---|
| GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used) | : 75 | mg/dL | Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: \geq 126 mg/dl |
| Method: GOD-POD | | | |
| Fasting Urine Glucose | : Absent | | Absent |
| GLUCOSE (SUGAR) PP, (Fluoride Plasma Used) | : 85 | mg/dl | Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: \geq 200 mg/dl |
| PP Urine Glucose | : Absent | | Absent |

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 17:36:03)



Signature
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-2000/08/2926





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Name : MR. ROHAN GURAV
Age/Sex : 22 Yrs. / M
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Sample Collection : 19/09/2024 09:12:03
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BLOOD GROUP

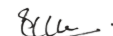
| Test | Result | Unit | Biological Ref. Range |
|-------------|-------------------|------|-----------------------|
| Blood Group | : 'A' Rh NEGATIVE | | |

Slide and Tube Agglutination Test

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 15:51:02)

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




Dr. Santosh Khairnar
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Registration ID : 24765 Sample Collection : 19/09/2024 09:12:03
 Name : MR. ROHAN GURAV Sample Received : 19/09/2024 09:12:03
 Age/Sex : 22 Yrs. / M Printed : 21/09/2024 15:59:43 Report Released : 20/09/2024 15:51:24
 Ref. By : J M FINANCE Sent By : Arcofemi Healthcare Pvt Ltd
 SERVICES LTD

LIPID PROFILE

| Test | Result | Unit | Biological Ref. Range |
|-----------------------------------|----------|-------|--|
| Total Cholesterol | : 157 | mg/dl | Desirable: <200 Borderline high = 200-239 High: > 239 |
| <i>Serum, Method: CHOD-PAP</i> | | | |
| S. Triglyceride | : 69 | mg/dl | Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499 |
| <i>Serum, Method: GPO-Trinder</i> | | | |
| HDL Cholesterol | : 33 | mg/dl | 35.3-79.5 mg/dl |
| <i>serum,Direct method</i> | | | |
| LDL Cholesterol | : 110.12 | mg/dl | Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190 |
| <i>Serum, (Calculated)</i> | | | |
| VLDL Cholesterol | : 13.8 | mg/dl | 5-30 mg/dl |
| <i>Serum, Method: Calculated</i> | | | |
| LDL/HDL Ratio | : 3.3 | | Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5 |
| <i>Serum, Method: Calculated</i> | | | |
| TC/HDL Ratio | : 4.7 | | Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0 |
| <i>Serum, Method: Calculated</i> | | | |

Test Done on - Automated Biochemistry Analyzer (EM 200).

Interpretation


1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

*All Samples Processed At Excellas Clinics Mulund Centre

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| Ref. By : J M FINANCE SERVICES LTD | Sent By : Arcofemi Healthcare Pvt Ltd | Report Released : 20/09/2024 15:52:06 |

LIVER FUNCTION TEST

| Test | Result | Unit | Biological Ref. Range |
|--|--------|-------|-----------------------|
| S. Bilirubin (Total) <i>Serum, Method: Diazo (walter & Gerarde)</i> | : 0.77 | mg/dl | 0-2.0 mg/dl |
| S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter & Gerarde)</i> | : 0.12 | mg/dl | 0-0.4 mg/dl |
| S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i> | : 0.65 | mg/dl | 0.10-1.0 mg/dl |
| Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i> | : 23.0 | IU/L | 0-35 IU/L |
| Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i> | : 13.0 | IU/L | 0-45 IU/L |
| S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i> | : 91.1 | IU/L | 53-128 IU/L |
| Total Proteins <i>Serum, Method: Biuret</i> | : 7.6 | gm/dl | 6.4-8.3 gm/dl |
| S. Albumin <i>Serum, Method: BCG</i> | : 4.2 | gm/dl | 3.5-5.2 gm/dl |
| S. Globulin <i>Serum, Method: Calculated</i> | : 3.4 | gm/dl | 2.3-3.5 gm/dl |
| A/G Ratio <i>Serum, Method: Calculated</i> | : 1.23 | | 0.90-2.00 |

Test Done on - Automated Biochemistry Analyzer (EM 200).

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 15:52:06)

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Age/Sex : 22 Yrs. / M Printed : 21/09/2024 15:59:43 Report Released : 20/09/2024 12:58:05
Ref. By : J M FINANCE Sent By : Arcofemi Healthcare Pvt Ltd
SERVICES LTD

BLOOD UREA NITROGEN (BUN)

| Test | Result | Unit | Biological Ref. Range |
|------|---------|-------|-----------------------|
| Urea | : 11.83 | mg/dl | 19-45 mg/dl |

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 5.53 mg/dl 5-18 mg/dl

*Test Done on - Automated Biochemistry Analyzer (EM 200)***All Samples Processed At Excellas Clinics Mulund Centre**(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 12:58:05)***SERUM CREATININE**

| Test | Result | Unit | Biological Ref. Range |
|---------------|--------|-------|-----------------------|
| S. Creatinine | : 0.83 | mg/dl | 0.7-1.3 mg/dl |

*Serum, Method: Enzymatic**Test Done on - Automated Biochemistry Analyzer (EM 200).***All Samples Processed At Excellas Clinics Mulund Centre**(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 15:52:17)***SERUM URIC ACID**

| Test | Result | Unit | Biological Ref. Range |
|--------------|--------|-------|-----------------------|
| S. Uric Acid | : 3.82 | mg/dl | 3.5-7.2 mg/dl |

*Serum, Method: Uricase - POD**Test Done on - Automated Biochemistry Analyzer (EM 200).**(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 15:52:30)*

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Ref. By : J M FINANCE Sent By : Arcofemi Healthcare Pvt Ltd
SERVICES LTD

BUN CREAT RATIO (BCR)

| Test | Result | Unit | Biological Ref. Range |
|----------------------|--------|------|-----------------------|
| BUN/Creatinine ratio | : 6.66 | | 5-20 |

Serum, Method: Calculated

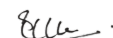
NOTE:

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 15:53:45)

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




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THYROID FUNCTION TEST

| Test | Result | Unit | Biological Ref. Range |
|---|--------|--------|-----------------------|
| Total T3 <i>Serum, Method: CLIA</i> | : 1.0 | ng/dl | 0.70-2.04 ng/dl |
| Total T4 <i>Serum, Method: CLIA</i> | : 8.96 | µg/dl | 5.1-14.1 µg/dl |
| TSH (Thyroid Stimulating Hormone) <i>Serum, Method: CLIA</i> | : 2.12 | µIU/ml | 0.27-5.3 µIU/ml |

Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis ,estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age ,marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 15:54:09)

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[Signature]
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| Ref. By : J M FINANCE SERVICES LTD | Sent By : Arcofemi Healthcare Pvt Ltd | Report Released : 20/09/2024 14:43:31 |

EXAMINATION OF URINE

| Test | Result | Unit | Biological Ref. Range |
|---------------------------------------|-------------|-------|-----------------------|
| <u>PHYSICAL EXAMINATION</u> | | | |
| Quantity : | 20 | ml | |
| Colour : | Pale yellow | | |
| Appearance : | Clear | | |
| Reaction (pH) : | 6.0 | | 4.5 - 8.0 |
| Specific Gravity : | 1.020 | | 1.010 - 1.030 |
| <u>CHEMICAL EXAMINATION</u> | | | |
| Protein : | Absent | | Absent |
| Glucose : | Absent | | Absent |
| Ketones Bodies : | Absent | | Absent |
| Occult Blood : | Absent | | Absent |
| Bilirubin : | Absent | | Absent |
| Urobilinogen : | Absent | | Normal |
| <u>MICROSCOPIC EXAMINATION</u> | | | |
| Epithelial Cells : | 1 - 2 | / hpf | |
| Pus cells : | 1 - 2 | / hpf | |
| Red Blood Cells : | Absent | / hpf | |
| Casts : | Absent | / lpf | Absent / lpf |
| Crystals : | Absent | | Absent |
| <u>OTHER FINDINGS</u> | | | |
| Yeast Cells : | Absent | | Absent |
| Bacteria : | Absent | | Absent |
| Mucus Threads : | Absent | | |
| Spermatozoa : | Absent | | |
| Deposit : | Absent | | Absent |
| Amorphous Deposits : | Absent | | Absent |


sample type:Urine

Method:Visual and Microscopic

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 20/09/2024 14:43:31)

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Sample Received : 19/09/2024 09:12:03
Report Released : 19/09/2024 10:14:45


OPHTHALMIC EVALUATION

| Examination | Right Eye | Left Eye |
|--------------------|------------------|-----------------|
| Distance Vision | 6/6 | 6/6 |
| Near Vision | N/6 | N/6 |
| Color Vision | Normal | |
| Remarks | Normal | |

(Collected At: 19/09/2024 09:12:03, Received At: 19/09/2024 09:12:03, Reported At: 19/09/2024 10:14:45)

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



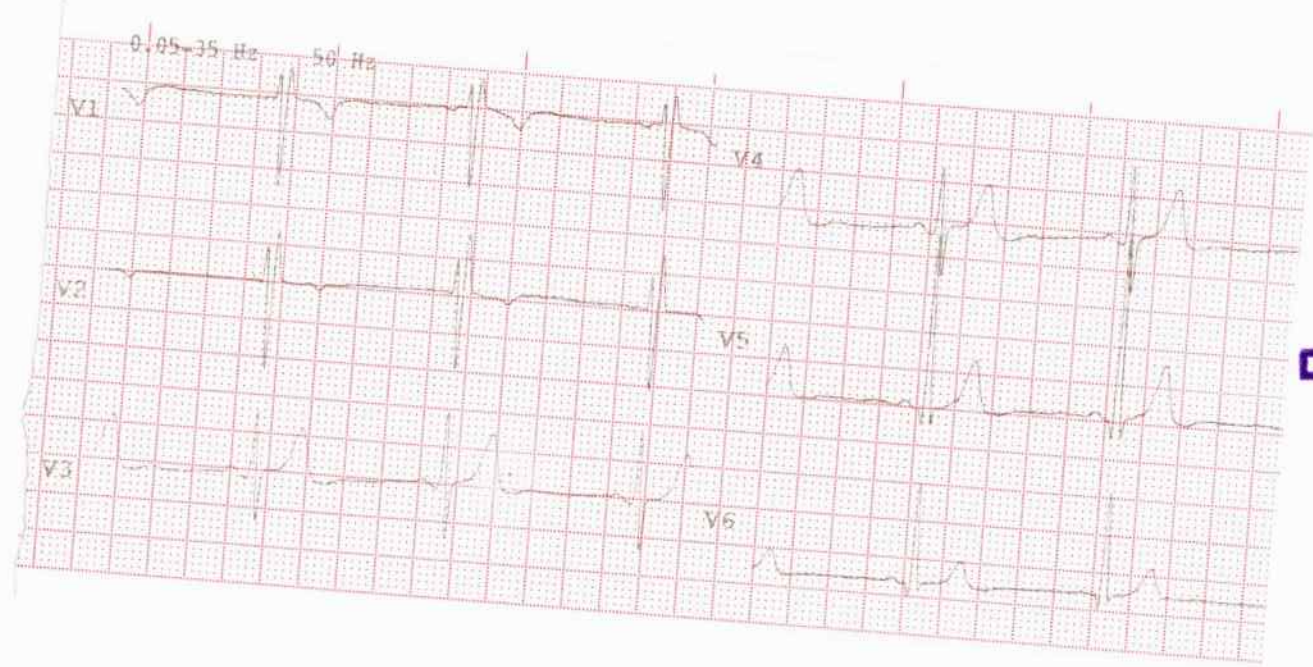
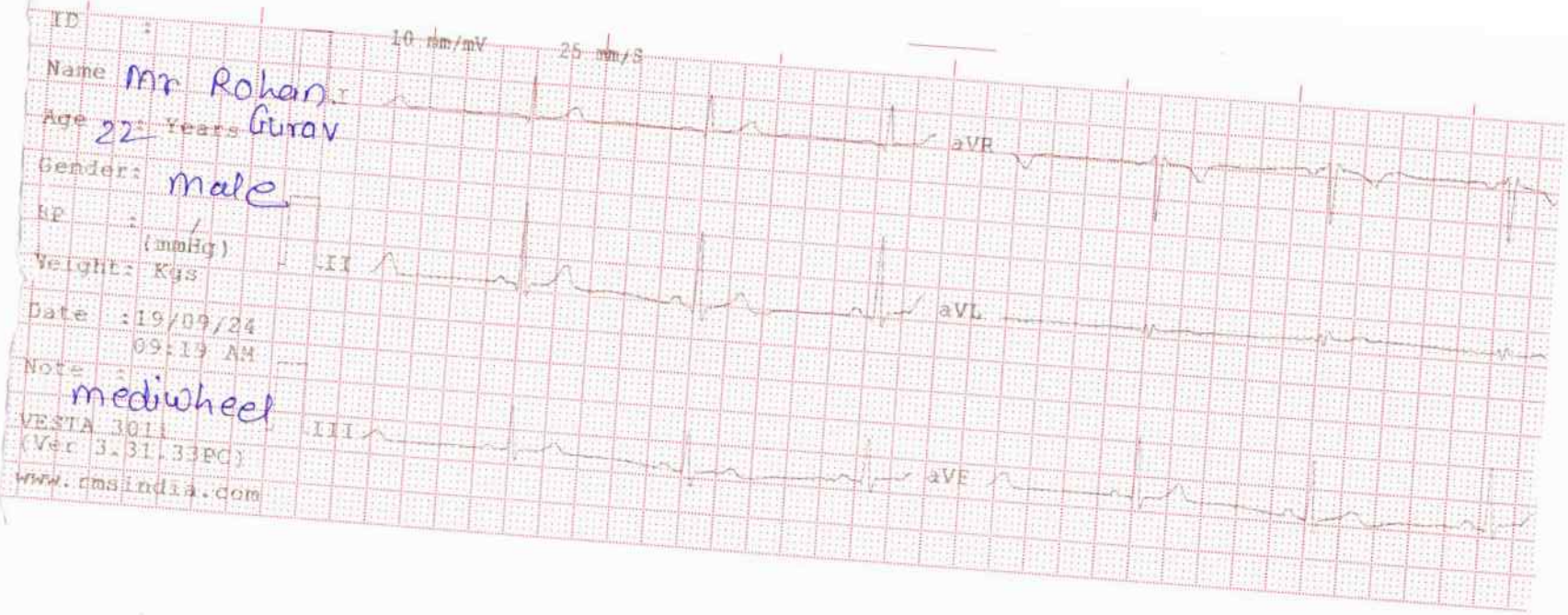

Dr. Santosh Khairnar
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Reg. No.-2000/08/2926



MEDICAL EXAMINATION REPORT

| | | |
|---|---|--|
| Name <input checked="" type="checkbox"/> Mr./Mrs./ Miss | Rohan garav | |
| Sex | <input checked="" type="checkbox"/> Male/ Female | |
| Age (yrs.) | 22 | UHID : |
| Date | 20 / 9 / 2024 | Bill No. : |
| Marital Status | Married/ No. of Children / Unmarried/ Widow : <input checked="" type="checkbox"/> | |
| Present Complaints | - | |
| Past Medical : History Surgical : | - | |
| Personal History | Diet : Veg <input type="checkbox"/> / Mixed <input checked="" type="checkbox"/> Addiction : Smoking <input checked="" type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> Any Other | |
| Family History | Father = Mother = Siblings = | HT / <input checked="" type="checkbox"/> DM / IHD / Stroke / Any Other Mother = HT / DM / IHD / Stroke / Any Other Siblings = HT / DM / IHD / Stroke / Any Other |
| History of Allergies | Drug Allergy - Any Other | |
| History of Medication | For HT / DM / IHD / Hypothyroidism Any Other - | |
| On Examination (O/E) | G. E. : fair R. S. : AEBE C. V. S. : S2+ C.N.S. : no cone arcual- P/A : soft nontender Any Other Positive Findings : | |

| | | | | | |
|--|---|----------------------------|--------|-----------------|--|
| Height | 164 cms | Weight | 48.6 , | Kgs | |
| BMI | 18.1 | | | | |
| Pulse (per min.) | 76/m | Blood Pressure (mm of Hg) | | 110/70 mm of Hg | |
| Gynaecology | | | | | |
| Examined by | Dr. | | | | |
| Complaint & Duration | | | | | |
| Other symptoms (Mict, bowels etc) | | | | | |
| Menstrual History | Menarche _____ Cycle _____ Loss _____ | | | | |
| | Pain _____ I.M.B. _____ P.C.B. _____ | | | | |
| | L.M.P. _____ Vaginal Discharge _____ | | | | |
| | Cx. Smear _____ Contraception _____ | | | | |
| Obstetric History | | | | | |
| Examination : | | | | | |
| Breast | | | | | |
| Abdomen | | | | | |
| P.S. | | | | | |
| P.V. | | | | | |
| Gynaecology Impression & Recommendation | | | | | |
| Recommendation | | | | | |
| Physician Impression | | | | | |
| Examined by : | <ul style="list-style-type: none"> - Overweight = To Reduce Weight - Underweight = To Increase Weight | | | | |



NHR 
Dr. VINAY HIRAY
 DNB MED
 Reg. No. 2012/00/2681



24765 190924

Name : MR. ROHAN GURAV

Age/Sex : 22 Yrs. / M

Ref. By : J M FINANCE
SERVICES LTD

Registration ID : 24765

Printed : 20/09/2024 10:29:34

Sent By : Arcofemi Healthcare Pvt Ltd

Sample Collection : 19/09/2024 09:12:03

Sample Received : 19/09/2024 09:12:03

Report Released : 20/09/2024 10:29:13

X RAY CHEST PA VIEW

CLINICAL PROFILE: NO COMPLAINTS

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

IMPRESSION:

No significant abnormality detected.



DR. RAJ SHAH
DMRE, M.B.B.S

