

NAME:Mrs. CHAITHRA PAGE/SEX:32 Yrs / FemaleREFERRED BY:REF CENTER:MEDIWHEEL			71
TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
MED	IWHEEL HEALTH CHE	CKUP FEMALE	
	HAEMATOLOG	iΥ	
COMPLETE BLOOD COUNT (CBC) WITH	ESR		
	13.5 gm/dL	12 - 16 gm/dL	
HEMATOCRIT (PCV) Calculated	41.2 %	36 - 47 %	
RED BLOOD CELL (RBC) COUNT	4.86 million/cu.mm	4 - 5.2 million/cu.mm	
PLATELET COUNT	2.77 Lakhs/cumm	1.5 - 4.5 Lakhs/cumm	
Electrical Impedance MEAN CELL VOLUME (MCV)	84.8 fl	80 - 100 fl	
Calculated Note : All normal and abnormal platelet counts are	e cross checked on perin	heral smear.	
MEAN CORPUSCULAR HEMOGLOBIN (MCH)	27.8 pg	26 - 34 pg	
MEAN CORPUSCULAR HEMOGLOBIN	32.8 %	31 - 35 %	
TOTAL WBC COUNT (TC) Electrical Impedance	5630 cells/cumm	4000 - 11000 cells/cumm	
NEUTROPHILS VCS Technology/Microscopic	59 %	40 - 75 %	
LYMPHOCYTES VCS Technology/Microscopic	34 %	25 - 40 %	
DIFFERENTIAL COUNT			
EOSINOPHILS VCS Technology/Microscopic	03 %	0 - 7 %	
VCS Technology/Microscopic MONOCYTES VCS Technology/Microscopic	04 %	1 - 8 %	
BASOPHILS Electrical Impedance	00 %		
ESR Westergren Method	18 mm/hr	0 - 20 mm/hr	



BLOOD GROUP & Rh TYPING Tube Agglutination (Forward and Reverse)

The laboratory values And Normal values need to be interpreted based on patients clinical characteristics. The values in reference range is for an average normal individual which may vary depending upon age, sex and other characteristics.

"B" Positive

Diagnostics & Speciality Centre

NAME : Mrs. CHAITHRA P		MR NO.	23100450
AGE/SEX : 32 Yrs / Female		VISIT NO.	181671
REFERRED BY :		DATE OF COLLECTION :	14-10-2023 at 09:20 AM
		DATE OF REPORT :	14-10-2023 at 03:40 PM
REF CENTER : MEDIWHEEL		II	
TEST PARAMETER	RESULT	REFERENCE RANG	E SPECIMEN
GLYCATED HAEMOGLOBIN (HbA1C)	5.7 %	American Diabetic Association (ADA) recommendations	
		Non diabetic adults	: <5.7 %
		At risk (Pre diabetic 6.4%): 5.7 –
		Diabetic : >/= 6.5%	
		Therapeutic goal f glycemic control :	or
		Goal for therapy: <	7.0%
		Action suggested: >	8.0%

ESTIMATED AVERAGE GLUCOSE (eAG)

116.89 mg/dL

Comments:

This assay is useful for diagnosing Diabetes and evaluating long term control of blood glucose concentrations in diabetic patients. It reflects the mean glucose concentration over the previous period of 8 to 12 weeks and is a better indicator of long term glycemic control as compared with blood and urine glucose measurements. This provides a additional criterion for assessing glucose control because glycated hemoglobin values are free of day-to-day glucose fluctuation and are unaffected by exercise or food ingestion.

After a sudden alteration in blood glucose concentration, the rate of change of HbA1c is rapid during initial 2 months, followed by more gradual change approaching steady state 3 months later.



Dr. VAMSEEDHAR.A D.C.P, M.D CONSULTANT PATHOLOGIST, KMC No : 50937 s in reference range is for an average normal individual wh



NAME

AGE/SEX

TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIN
	CLINICAL BIOCHEMISTR	Y	
BLOOD UREA UREASE-GLUTAMATE DEHYDROGENASE (GLDH)	23.3 mg/dL	15 - 50 mg/dL	
	0.70 mg/dL	0.4 - 1.4 mg/dL	
URIC ACID Uricase-Peroxidase	5.2 mg/dL	2.5 - 6 mg/dL	
SERUM ELECTROLYTES			
SODIUM Ion Selective Electrode (ISE)	141.2 mmol/L	136 - 145 mmol/L	
POTASSIUM Ion Selective Electrode (ISE)	4.25 mmol/L	3.5 - 5.2 mmol/L	
CHLORIDE Ion Selective Electrode (ISE)	100 mmol/L	97 - 111 mmol/L	
LIVER FUNCTION TEST (LFT) Spectrometry			
TOTAL BILIRUBIN Colorimetric Diazo Method	0.52 mg/dL	0.2 - 1.2 mg/dL	
DIRECT BILIRUBIN Colorimetric Diazo Method	0.24 mg/dL	0 - 0.4 mg/dL	
	0.28 mg/dl	0.2 - 0.8 mg/dl	
S G O T (AST) IFCC Without Pyridoxal Phosphates	18.7 U/L	up to 31 U/L	
S G P T (ALT) IFCC Without Pyridoxal Phosphates	20.1 U/L	up to 46 U/L	
ALKALINE PHOSPHATASE	90 U/L	36 - 113 U/L	
SERUM GAMMA GLUTAMYLTRANSFERASE (GGT)23.5 U/L	5 - 55 U/L	
TOTAL PROTEIN Biuret Colorimetric	6.23 g/dl	6.2 - 8 g/dl	
S.ALBUMIN Bromocresol Green (BCG)	3.65 g/dl	3.5 - 5.2 g/dl	
S.GLOBULIN Calculation	2.6 g/dl	2.5 - 3.8 g/dl	
A/G RATIO Calculation	1.4	1 - 1.5	
POST PRANDIAL BLOOD SUGAR Hexokinase	113.3 mg/dl	80 - 150 mg/dl	
FASTING BLOOD SUGAR Hexokinase	91.3 mg/dl	70 - 110 mg/dl	





Dr. VAMSEEDHAR.A D.C.P, M.D

CONSULTANT PATHOLOGIST, KMC No: 50937

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REF CENTER : MEDIWHEEL			
TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
LIPID PROFILE TEST Spectrometry			
TOTAL CHOLESTEROL	144 mg/dL	up to 200 mg/dL	
Cholesterol Oxidase-Peroxidase (CHOD-POD)		Border Line: 200 – 240 mg/dL High: > 240 mg/dL	
TRIGLYCERIDES	79.7 mg/dL	up to 150 mg/dL	
Glycerol Peroxidase-Peroxidase (GPO-POD)	Ū.	Desirable: <150 mg/dL	
		Border Line: 150 – 200 mg/dL High: >200 – 500 mg/dL	
		Very High: > 500 mg/dL	
HDL CHOLESTEROL - DIRECT	35.6 mg/dl	40 - 60 mg/dl	
PEG-Cholesterol Esterase		>/= 60mg/dL - Excellent (protects again heart disease)	st
		40-59 mg/dL - Higher the better	
		<40 mg/dL - Lower than desired (major risk for heart disease)	
LDL CHOLESTEROL - DIRECT Cholesterol Esterase-Cholesterol Oxidase	92.5 mg/dL	up to 100 mg/dL	
Cholesterol Esterase-Cholesterol Oxidase		100-129 mg/dL- Near optimal/above optimal	
		130-159 mg/dL- Borderline High	
		160-189 mg/dL- High 190->190 mg/dL - Very High	
VLDL CHOLESTEROL	15.9 mg/dL	2 - 30 mg/dL	
TOTAL CHOLESTROL/HDL RATIO	4.0	up to 3	
Calculation		3.0-4.4 - Moderate >4.4 - High	
LDL/HDL RATIO	2.6	up to 2.5	
Calculation		2.5-3.3 - Moderate	
		>3.3 - High	



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TEST PARAMETER		REFERENCE RANGE SPI	
			ECIMEN
	CLINICAL PATHO	DLOGY	
PHYSICAL EXAMINATION Colour	Pale Yellow	Pale yellow- yellow	
Visual Method Appearance	Slightly Turbid	Clear/Transparent	
Visual Method Specific Gravity	1.030	1.005-1.035	
pH	6.0	4.6-8.5	
CHEMICAL EXAMINATION (DIPSTICK)	0.0	4.0 0.0	
Protein	Nil	Nil -Trace	
Strips Method Glucose	Nil	Nil	
Strips Method Blood Strips Method	Negative	Negative	
Ketone Bodies Strips Method	Absent	Negative	
Urobilinogen Strips Method	Normal	Normal	
Bile Salt Strips Method	Negative	Negative	
Bilirubin Strips Method	Negative	Negative	
Bile Pigments	Negative	NIL	
MICROSCOPY			
Pus Cells (WBC)	3 - 4 /hpf	0-5/hpf	
Light Microscopic	6 - 8 /hpf	0-4/hpf	
RBC Light Microscopic	Not Seen /hpf	0-2/hpf	
Cast Light Microscopic	NIL	NIL	
Crystal Light Microscopic	NIL	Nil	

FASTING URINE SUGAR (FUS)

NIL

NIL





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NAME : Mrs. CHAITHRA P		MR NO. : 231	00450		
AGE/SEX : 32 Yrs / Female		VISIT NO. : 181	671		
REFERRED BY :		DATE OF COLLECTION : 14-	10-2023 at 09:20 AM		
		DATE OF REPORT : 14-	10-2023 at 03:40 PM		
REF CENTER : MEDIWHEEL					
TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN		
POSTPRANDIAL URINE SUGAR	NIL	NIL			
IMMUNOASSAY					
THYROID PROFILE					
TOTAL TRIIODOTHYRONINE (T3)	1.38 ng/mL	0.87 - 1.78 ng/mL			
TOTAL THYROXINE (T4)	10.7 μg/dL	6.09 - 12.23 μg/dL			
THYROID STIMULATING HORMONE (TSH)	4.05 μlU/mL	0.38 - 5.33 μlU/mL			
CMIA		1st Trimester: 0.05 - 3.70			
		2nd Trimester: 0.31 – 4.35	5		
		3rd Trimester: 0.41 – 5.18			

Note:

• TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.

• Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

• Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use:

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

Dispatched by: Pooja Harikant

**** End of Report ****

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Mrs. CHAITHRA P NAME • 32 Yrs / Female AGE/SEX : REFERRED BY : REF CENTER : MEDIWHEEL

MR/VISIT NO : 23100450 / 181671 : 14-10-2023 at 09:15 AM BILLED TIME **BILL NO** : 213658 DATE OF REPORT : 14-10-2023 at 05:05 PM

MEDIWHEEL HEALTH CHECKUP FEMALE

RADIOLOGY

X-RAY CHEST PA VIEW

OBSERVATIONS:

The lung fields are clear bilaterally.

CP angles are clear.

Both the hila appear normal.

Cardiac diameter is within normal limits.

Tracheal is mid line.

Visible bony thoracic cage is normal.

Adjacent soft tissues appear normal.

IMPRESSION:

• No significant abnormality in the visualized lung fields.

Dispatched by: Soundarya

**** End of Report ****

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Dr. GIRISH.B DMRD, DNB (RD) FELLOWSHIP IN MSK RADIOLOGY (USA) CONSULTANT RADIOLOGIST





Diagnostics & Speciality Centre

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 23100450 / 181671

 BILLED TIME
 :
 14-10-2023 at 09:15 AM

 BILL NO
 :
 213658

 DATE OF REPORT
 :
 14-10-2023 at 05:24 PM

MEDIWHEEL HEALTH CHECKUP FEMALE

RADIOLOGY

SONO MAMMOGRAPHY OF BILATERAL BREASTS

OBSERVATION:

RIGHT BREAST:

Breast shows normal fibro glandular pattern.

No evidence of any cystic changes in the breast parenchyma.

Subareolaer region is normal. Retroareolar ducts appear normal. No evidence of significant ductal dilation.

No obvious solid focal lesion seen.

Nipple is normal.

Adjacent skin, subcutaneous planes and retro mammary space are normal.

Few (2-3) lymph nodes in right axilla, largest measuring \sim 11 x 5 mm.

LEFT BREAST:

Breast shows normal fibro glandular pattern.

No evidence of any cystic changes in the breast parenchyma.

Subareolaer region is normal. Retroareolar ducts appear normal. No evidence of significant ductal dilation.

No obvious solid focal lesion seen.

Nipple is normal.

Adjacent skin, subcutaneous planes and retro mammary space are normal.

Few (2-3) lymph nodes in left axilla, largest measuring \sim 10 x 6 mm.

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IMPRESSION:

• No significant abnormality in bilateral sonomammography (BIRADS I).

• Few small bilateral axillary lymph nodes.

NOTE: BI – RADS SCORING KEY

- O Needs additional evaluation;
- I Negative
- II Benign findings
- III Probably benign
- IV Suspicious abnormality Biopsy to be considered
- V Highly suggestive of malignancy,
- VI Known biopsy proven malignancy

Dispatched by: Soundarya

**** End of Report ****

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