

: Mr.PRADYUT GANESH

Age/Gender UHID/MR No : 25 Y 4 M 2 D/M

Visit ID

: SCHE.0000085404

Ref Doctor

: SCHEOPV100995

Emp/Auth/TPA ID

: Dr.SELF : 436523

Collected

: 27/Apr/2024 09:09AM

Received

: 27/Apr/2024 12:14PM

Reported

: 27/Apr/2024 01:35PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--------------------------------------|--------|-------------------------|-----------------|--------------------------------|
| HEMOGRAM , WHOLE BLOOD EDTA | | | | ' |
| HAEMOGLOBIN | 14.6 | g/dL | 13-17 | Spectrophotometer |
| PCV | 42.50 | % | 40-50 | Electronic pulse & Calculation |
| RBC COUNT | 4.99 | Million/cu.mm | 4.5-5.5 | Electrical Impedence |
| MCV | 85 | fL | 83-101 | Calculated |
| MCH | 29.3 | pg | 27-32 | Calculated |
| MCHC | 34.5 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 13.9 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,000 | cells/cu.mm | 4000-10000 | Electrical Impedance |
| DIFFERENTIAL LEUCOCYTIC COUNT (I | DLC) | | | |
| NEUTROPHILS | 62 | % | 40-80 | Electrical Impedance |
| LYMPHOCYTES | 31 | % | 20-40 | Electrical Impedance |
| EOSINOPHILS | 02 | % | 1-6 | Electrical Impedance |
| MONOCYTES | 05 | % | 2-10 | Electrical Impedance |
| BASOPHILS | 00 | % | <1-2 | Electrical Impedance |
| ABSOLUTE LEUCOCYTE COUNT | | | | |
| NEUTROPHILS | 3100 | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 1550 | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 100 | Cells/cu.mm | 20-500 | Calculated |
| MONOCYTES | 250 | Cells/cu.mm | 200-1000 | Calculated |
| Neutrophil lymphocyte ratio (NLR) | 2 | | 0.78- 3.53 | Calculated |
| PLATELET COUNT | 267000 | cells/cu.mm | 150000-410000 | Electrical impedence |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 05 | mm at the end of 1 hour | 0-15 | Modified Westergren |
| PERIPHERAL SMEAR | | | | |

RBC NORMOCYTIC NORMOCHROMIC

WBC WITHIN NORMAL LIMITS

PLATELETS ARE ADEQUATE ON SMEAR

NO HEMOPARASITES SEEN

DR. APARNA NAIK

MBBS DPB CONSULTANT PATHOLOGIST

SIN No:BED240112996

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Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:

Ujagar Compound, Opp. Deonar Bus Depot Main Gate, Deonar, Chembur, Mumbai, Maharashtra Ph: 022 4334 4600



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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|------------------------------|--------|-------|-----------------|---|
| GLUCOSE, FASTING, NAF PLASMA | 88 | mg/dL | 60-100 | Oxidase & Peroxidase- reflectance spectrophotometry |

Comment:

| As per American Diabetes Guidennes, 2023 | |
|--|----------------|
| Fasting Glucose Values in mg/dL | Interpretation |
| 70-100 mg/dL | Normal |
| 100-125 mg/dL | Prediabetes |
| ≥126 mg/dL | Diabetes |
| <70 mg/dL | Hypoglycemia |

Note:

1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.

 $2. \ Very \ high \ glucose \ levels \ (>\!\!450 \ mg/dL \ in \ adults) \ may \ result \ in \ Diabetic \ Ketoacidosis \ \& \ is \ considered \ critical.$

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|--------|------|-----------------|---|
| ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM | 22 | U/L | 4-44 | Peroxidase oxidation of Diarylimidazole Leuco Dye |

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--------------------------|--------|-------|-----------------|--|
| BILIRUBIN, TOTAL , SERUM | 0.80 | mg/dL | 0.1-1.2 | Diazo Dye Formation - reflectance spectrophotometr |

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SIN No:SE04707468



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| DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324 | | | | | |
|--|------|-------|---------|--|--|
| | | | | | |
| CREATININE, SERUM | 1.02 | mg/dL | 0.6-1.1 | Ammonia Concentration Measurement - color change o | |

*** End Of Report ***

Result/s to Follow:

BLOOD GROUP ABO AND RH FACTOR, COMPLETE URINE EXAMINATION (CUE), GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)

Page 4 of 4



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APOLLO SPECTRA HOSPITALS

Sunder Baug, Ujagar Compound, Opp. Deonar Bus Depot Main Gate, Off. Sion Trombay Road, Deonar, Chembur, Mumbai-400 088. Ph. No.: 022 4334 4600-9

www.apollospectra.com

Patient Name : Mr. Pradyut Ganesh Age/Gender : 25 Y/M

UHID/MR No. : SCHE.0000085404 **OP Visit No** : SCHEOPV100995 Sample Collected on Reported on : 27-04-2024 11:23

: RAD2311645 Specimen

Ref Doctor : SELF Emp/Auth/TPA ID : 436523

LRN#

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen

Dr. JAVED SIKANDAR TADVI MBBS, DMRD, Radiologist

Musi

Radiology