



Lab No.	012411150272	Age/ Gender	34.11 YRS/FEMALE	Coll. ON	15/Nov/2024 08:41AM
NAME	Ms. KIRTI			Reg. ON	15/Nov/2024
Ref. Dr.	MEDIWHEEL	BarcodeNo	01150272	Approved ON	15/Nov/2024 10:19AM
Rpt. Centre	undefined			Printed ON	15/Nov/2024 05:18PM

Test Name	Value	Unit	Biological Reference Interval
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Complete Haemogram, EDTA whole blood

Haemoglobin (Hb) <i>Method : Colorimetry</i>	13.30	gm/dl	12.0 - 15.0
RBC count <i>Method : Electrical impedance</i>	4.52	Millions/cmm	3.8 - 4.8
PCV / Haematocrit <i>Method : Calculated</i>	39.30	%	36.0 - 46.0
MCV <i>Method : Calculated</i>	86.90	fl	83.0 - 101.0
MCH <i>Method : Calculated</i>	29.40	picogram	27.0 - 32.0
MCHC <i>Method : Calculated</i>	33.80	%	31.5 - 34.5
RDW - CV <i>Method : Calculated</i>	13.80	%	11.6 - 14.0
Mentzer Index <i>Method : Calculated</i>	19.23		>= 13.0

The Mentzer index (MCV/ RBC count) is a useful tool for initial screening of patients with a microcytic hypochromic blood picture to rule out a thalassemia trait. If the index is less than 13, thalassemia is said to be more likely. If the result is greater than 13, then iron-deficiency anemia is said to be more likely. All patients with a low normal to low hemoglobin and a Mentzer index below 13 should be screened for thalassemia trait by HPLC.

TLC (Total Leucocyte Count) <i>Method : Flowcytometry</i>	8,810	/cmm	4000 - 10000
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DLC (Flowcytometry)

Neutrophils	66.80	%	35.0 - 75.0
Lymphocytes	25.80	%	25.0 - 45.0
Eosinophils	1.60	%	1.0 - 5.0
Monocytes	5.60	%	1.0 - 6.0
Basophils	0.20	%	0 - 1

Absolute Leucocyte Count (Calculated)

Absolute Neutrophil Count	5,885.08	/cmm	2000 - 7000
Absolute Lymphocyte Count	2,272.98	/cmm	1000 - 3000
Absolute Eosinophil count	140.96	/cmm	20 - 500
Absolute Monocyte count	493.36	/cmm	200 - 1000
Absolute Basophil count	17.62	/cmm	0 - 100

Platelet count <i>Method : Electrical impedance</i>	2.78	Lakh/cmm	1.5 - 4.1
---------------------------------------------------------------	------	----------	-----------

ESR (Erythrocyte Sedimentation Rate) <i>Method : Westergren method</i>	5	mm/1st hr	0 - 29
----------------------------------------------------------------------------------	---	-----------	--------

Peripheral Smear

RBCs are normocytic and normochromic.
Leucocytic series is numerically and morphologically within normal limits.
Platelets are adequate in number and are normal in morphology.
No atypical cells or haemoparasites are seen.
Impression: Normal peripheral smear.

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Test Name	Value	Unit	Biological Reference Interval
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Blood Group (ABO + RH)

Blood Group , EDTA blood <i>Method : Slide agglutination (Forward & Reverse grouping)</i>	O
Rh type , EDTA blood <i>Method : Slide agglutination</i>	Positive



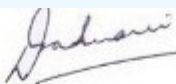
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Rpt. Centre	undefined			Printed ON	15/Nov/2024 05:18PM

Test Name	Value	Unit	Biological Reference Interval
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Glucose Fasting , plasma <i>Method : GOD POD</i>	89.10	mg/dL	60 - 100
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Interpretation (In accordance with the American diabetes association guidelines):

- A fasting plasma glucose level below 100 mg/dl is considered normal.
- A fasting plasma glucose level between 100-126 mg/dl is considered as glucose intolerant or pre diabetic. A fasting and post-prandial blood sugar test (after consumption of 75 gm of glucose) is recommended for all such patients.
- A fasting plasma glucose level of above 126 mg/dl is highly suggestive of a diabetic state. A repeat fasting test is strongly recommended for all such patients. A fasting plasma glucose level in excess of 126 mg/dl on both the occasions is confirmatory of a diabetic state.

Blood Urea Nitrogen (BUN) , serum <i>Method : Calculated</i>	13.02	mg/dl	7.8 - 20.2
Serum Creatinine <i>Method : Jaffe kinetic</i>	0.72	mg/dl	0.5 - 0.9
Serum Uric Acid <i>Method : Uricase-Peroxidase</i>	3.24	mg/dl	2.3 - 6.1



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Ref. Dr.	MEDIWHEEL	BarcodeNo	01150272	Approved ON	15/Nov/2024 09:45AM
Rpt. Centre	undefined			Printed ON	15/Nov/2024 05:18PM

Test Name	Value	Unit	Biological Reference Interval
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HbA1c (Glycosylated haemoglobin) , EDTA whole blood <i>Method : HPLC</i>	5.80	%	< 5.7
Estimated average plasma Glucose <i>Method : Calculated</i>	119.76	mg/dL	65 - 136

The test is approved by NGSP for patient sample testing.

Interpretation:

Metabolically normal patients	%	< 5.7
Pre-diabetic	%	5.7 - 6.4
Diabetic	%	> 6.4

Glycosylated hemoglobin or HbA1C is a reliable indicator of mean plasma glucose levels for a period of 8-12 weeks preceding the date on which the test is performed and is a more reliable indicator of overall blood sugar control in known diabetic patients than blood sugar levels. A value of less than 5.7 % is usually seen in metabolically normal patients, however diabetics with very good control can also yield similar values. The HbA1c test, thus can not be used to differentiate between diabetic patients with very good control over the plasma glucose levels from metabolically normal, non-diabetic subjects as both groups may reveal very similar values in the assay.



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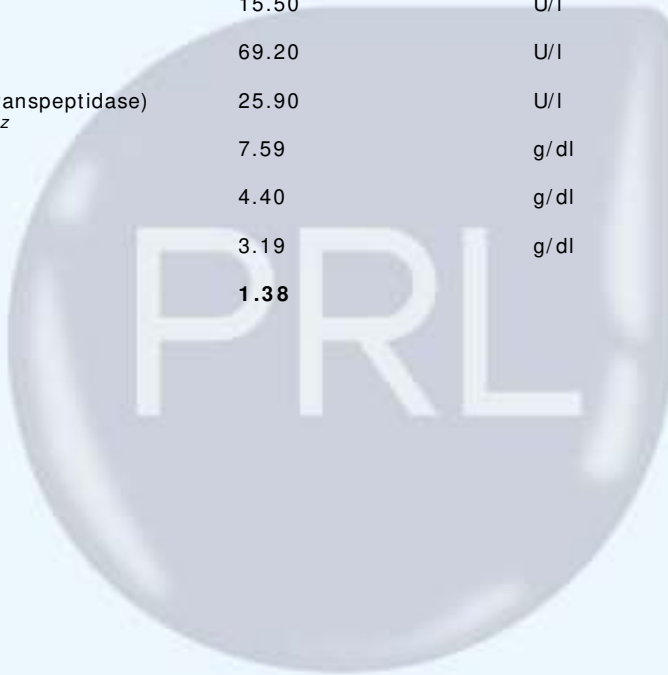


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Test Name	Value	Unit	Biological Reference Interval
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LFT (Liver Function Test)

Serum Bilirubin Total <i>Method : Diazotized Sulfanilic Acid (DSA)</i>	0.74	mg/dl	0.1 - 1.2
Serum Bilirubin Direct <i>Method : Diazotized Sulfanilic Acid (DSA)</i>	0.23	mg/dl	0.0 - 0.3
Serum Bilirubin Indirect <i>Method : Calculated</i>	0.51	mg/dl	0.1 - 1.1
Serum SGOT/AST <i>Method : IFCC without P5P</i>	19.70	U/l	<= 31.0
Serum SGPT/ALT <i>Method : IFCC without P5P</i>	15.50	U/l	<= 34.0
Serum Alkaline Phosphatase <i>Method : PNP, AMP Buffer</i>	69.20	U/l	30.0 - 120.0
Serum GGT (Gamma Glutamyl Transpeptidase) <i>Method : UV-assay according to Szasz</i>	25.90	U/l	9.0 - 39.0
Serum total Protein <i>Method : Biuret</i>	7.59	g/dl	6.6 - 8.3
Serum Albumin <i>Method : Bromo Cresol Green</i>	4.40	g/dl	3.5 - 5.2
Serum Globulin <i>Method : Calculated</i>	3.19	g/dl	2.0 - 3.5
Albumin / Globulin ratio <i>Method : Calculated</i>	1.38		1.5 - 2.5

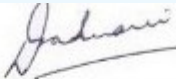


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Lipid Profile basic (direct HDL,calculated LDL)

Total Cholesterol, , serum <i>Method : CHOD-POD</i>	193.40	mg/dl	< 200.0
Triglycerides , serum <i>Method : GPO-POD</i>	61.10	mg/dl	< 150
HDL Cholesterol , serum <i>Method : Direct measure PEG (CHE-CHO)</i>	49.30	mg/dl	> 50
VLDL Cholesterol , serum <i>Method : Calculated</i>	12.22	mg/dl	< 30
L.D.L Cholesterol , serum <i>Method : Calculated</i>	131.88	mg/dl	< 100
Cholesterol, Non HDL , serum <i>Method : Calculated</i>	144.10	mg/dl	< 130
Total Cholesterol / HDL Cholesterol Ratio , serum <i>Method : Calculated</i>	3.92		< 5.0
LDL / HDL Cholesterol ratio , serum <i>Method : Calculated</i>	2.68		< 3.5

Interpretation:

National Lipid Association Recommendation (NLA-2014)	
Total Cholesterol Desirable: <200 mg/dL Borderline high: 200-239 mg/dL High: > or =240 mg/dL	Triglycerides Normal: <150 mg/dL Borderline high: 150-199 mg/dL High: 200-499 mg/dL Very high: > or =500 mg/dL
Non HDL Cholesterol Desirable: <130 mg/dL Borderline high: 130-159 mg/dL High: 160-189 mg/dL Very high: > or =190 mg/dL	LDL Cholesterol Optimal: <100 mg/dL Near Optimal: 100-129 mg/dL Borderline high: 130-159 mg/dL High: 160-189 mg/dL Very high: > or =190 mg/dL
HDL Cholesterol Low (Men) <40 mg/dL Low (Women) <50 mg/dL	

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Test Name	Value	Unit	Biological Reference Interval
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Thyroid Profile Total (T3, T4, TSH)

T3, (Triiodothyronine) , serum <i>Method : ECLIA</i>	1.30	ng/ mL	0.80 - 2.0
T4, (Thyroxine) , serum <i>Method : ECLIA</i>	6.19	ug/ dL	5.1 - 14.1
TSH (Thyroid Stimulating Hormone) , serum <i>Method : ECLIA</i>	1.71	uIU/ ml	0.27 - 4.2

Interpretation:

- Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values alongwith depressed TSH levels
- Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
- High T3 levels coupled with normal T4 and suppressed TSH may be seen in T3 toxicosis.

Note: Total T3 and total T4 are highly bound to plasma proteins and are amenable to fluctuations with plasma protein content as well as due to binding defects in the thyroid hormone binding proteins.

The following ranges are recommended for pregnant females:

Gestation period	TSH (uIU/ml)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

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Rpt. Centre	undefined	Printed ON		Printed ON	15/Nov/2024 05:18PM

Test Name	Value	Unit	Biological Reference Interval
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Urine Routine & Microscopic Examination

Physical examination

Volume	50	mL	
Colour	Pale Yellow		Pale yellow
Transparency	Clear		Clear
Specific gravity	1.010		1.003 - 1.035
<i>Method : pKa change</i>			

Chemical examination

Protein	Nil		Nil
<i>Method : error-of-indicator</i>			
Glucose	Nil		Nil
<i>Method : GOD-POD</i>			
pH	7.0		
<i>Method : Double indicator</i>			
Bilirubin	Negative		Negative
<i>Method : Azo-coupling reaction</i>			
Urobilinogen	Normal		Normal
<i>Method : Azo- coupling reaction</i>			
Ketone	Negative		Negative
<i>Method : Legals test</i>			
Erythrocytes	Absent		Absent
<i>Method : Peroxidase</i>			
Nitrite	Negative		Negative
<i>Method : Griess reaction</i>			
Leukocytes	Absent	Leu/uL	Negative
<i>Method : Esterase activity of granulocytes</i>			

Microscopic examination

WBC	0 - 1	/ HPF	0 - 5
RBC	Nil	/ HPF	0 - 2
Casts	Nil	/ HPF	Nil
Crystals	Nil	/ HPF	Nil
Epithelial cells	0 - 1	/ HPF	0 - 15
Bacteria	Absent		Absent
Others	Nil		
<i>Method : Light microscopy</i>			

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ECG Electro-cardiography

Normal ECG.

Eye Vision		
	Right Eye	Left Eye
NEAR VISION	N/6	N/6
DISTANCE VISION	6/6 (With Glass)	6/6 (With Glass)
COLOR VISION	Normal	Normal

MER

General Condition	Fair, no pallor, no icterus, no anemia observed
Height (cm)	167
Weight (kg)	69
Pulse (bpm)	70
BP (mm/hg)	136/82

Please note: Kindly review with clinician in view of abnormal reports (if any).

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X-Ray Chest PA view

Trachea and mediastinum are central.

Bilateral lung fields are clear.

Bilateral hilar shadows are normal.

Bilateral costophrenic angles are clear.

Cardiac shadow is normal.

Soft tissue shadows and bony rib cage is normal.

Impression: No significant abnormality seen .

Please correlate clinically

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NAME	Ms. KIRTI			Reg. ON	15/Nov/2024
Ref. Dr.	MEDIWHEEL	BarcodeNo	01150272	Approved ON	15/Nov/2024 10:58AM
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SONOGRAPHY OF ABDOMEN AND PELVIS

The liver is normal in size (12.3 cm) and shape. It shows a normal parenchymal echotexture. There is no evidence of any focal hepatic lesion. The hepatic and portal veins are normal. There is no intrahepatic biliary dilatation.

The gall bladder is adequately distended. There is no evidence of any calculi. There is no evidence of any wall thickening seen. The CBD is not dilated.

The pancreas is well visualized and shows a normal parenchymal echotexture. There is no evidence of any focal mass, calcification or ductal dilatation seen. There is no peripancreatic fluid collection seen.

The spleen is normal in size (8.6 cm) and shows a normal parenchymal echotexture. There is no focal lesion seen.

The right kidney measures 8.7 x 4.4 cm and the left kidney measures 10.6 x 4.4 cm. Both kidneys are normal in size and shape. The kidneys show normal echotexture with a well-maintained cortical thickness. There is no evidence of hydronephrosis, cortical scarring or calculus disease in either kidney.

There is no evidence of any mesenteric or retroperitoneal lymph adenopathy. There is no ascites or bowel wall thickening.

The urinary bladder shows normal contours.

The uterus is retroflexed, mildly bulky and measures 103 x 53 x 25 mm. The myometrial echoes appear normal. There is no evidence of any fibroid.

LSCS scar noted in lower uterine segment.

The endometrial echoes appear normal. The endometrial thickness is 7.7 mm. No evidence of intraluminal focal lesion seen.

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Right ovary is bulky. Right ovary shows multiple small subcentimeteric follicles arranged in the periphery and increased stromal echogenicity without any dominant follicle.

The right ovary measures 41 x 34 x 21 mm (volume 16.2 cc).

The left ovary measures 43 x 30 mm and shows a dominant follicle of size 25 x 21 mm.

There is no adnexal mass or free fluid in the pouch of Douglas.

IMPRESSION

- **Bulky right ovary with polycystic ovarian pattern in right ovary. Findings raised possibility of PCOS. ADVISED :- Correlation with hormonal assay.**

Kindly correlate clinically.

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PAP Smear (Conventional)

Cytology no. C-5167 /24

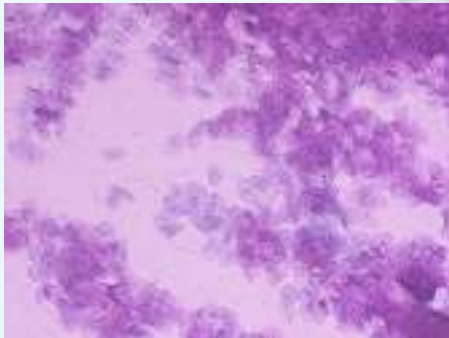
Specimen: Cervico vaginal smear

Method: PAP staining and light microscopy (2014 Bethesda system)

Statement of adequacy: Smear is satisfactory for evaluation

Microscopy: Superficial and intermediate squamous epithelial cells are present along with endocervical cells over a clean background. No evidence of an intraepithelial lesion or invasive malignancy is noted.

Impression: Negative for intraepithelial lesion or malignancy.



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*** Partial Report ***



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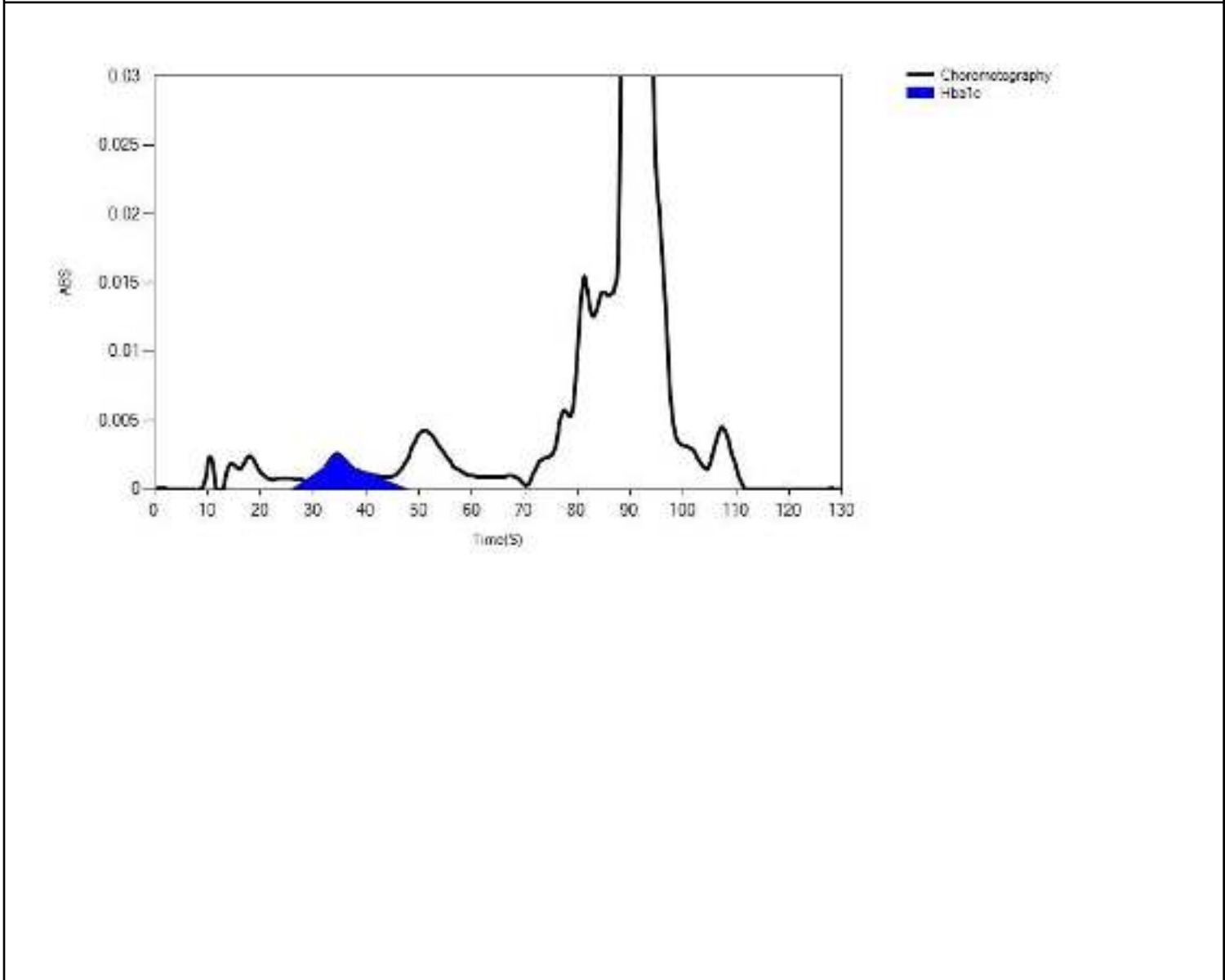
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LIFOTRONIC Graph Report

Name :	Case :	Patient Type :	Test Date : 15/11/2024 09:39:54
Age :	Department :	Sample Type : Whole Blood EDTA	Sample Id : 01150272
Gender :			Total Area : 9007

Peak Name	Retention Time(s)	Absorbance	Area	Result (Area %)
HbA0	66	2827	8057	87.1
HbA1c	37	43	540	5.8
La1c	25	26	228	2.5
HbF	18	8	9	0.1
Hba1b	13	25	100	1.1
Hba1a	10	19	73	0.8



PROGNOSIS LABORATORIES

A SUBSIDIARY OF MEDGENOME

515-516 DWARKA SEC19 NEW DELHI 110075

Ms. KIRTI

ID. : 296

AGE/SEX : 34 Yr /F

HT/WT : /

DATE : 15-11-2024 10:00:23 AM

REF.BY : Dr.MEDIWHEEL

MACHINE INTERPRETATION : Normal ECG.

RATE : 64 bpm

BP : N/A

P Axis : 57 deg.

QRS Axis : 49 deg.

T Axis : 10 deg.

P Duration : 82 ms

PR Duration : 129 ms

QRS Duration : 73 ms

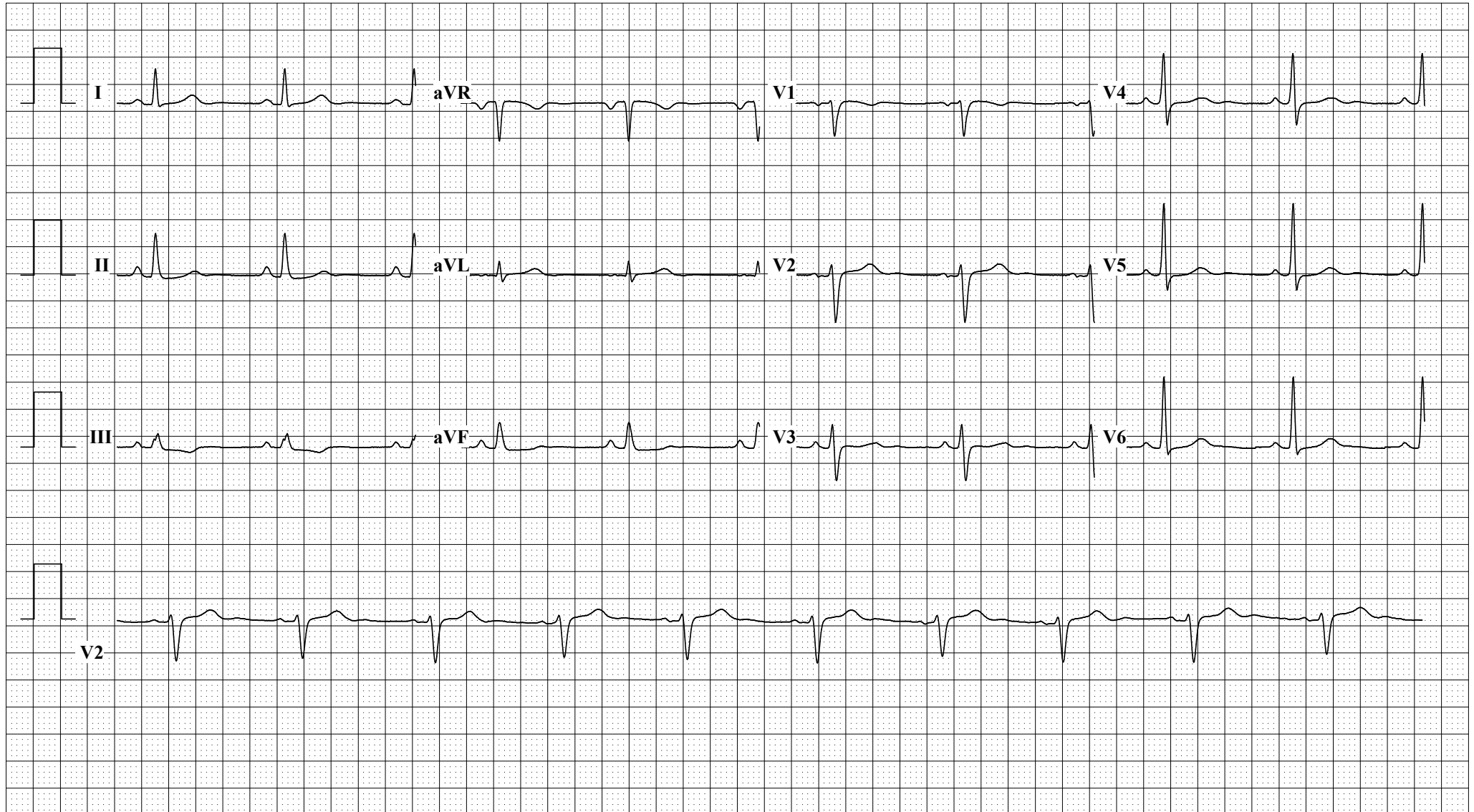
QT Interval : 389 ms

QTc Interval : 398 ms

Linked Median

Speed : 25 mm/s

Sensitivity : 10 mm/mV





भारतीय विशिष्ट पहचान प्राधिकरण
भारत सरकार
 Unique Identification Authority of India
 Government of India

संयोजन क्रम : Enrolment No 1093711062/00373

01/12/2011
 श्री यदव
 Shri Yadav
 C/O Rajender Singh Yadav
 H No 268
 Mahapur
 Delhi
 Rohini Sector 7 North West Delhi
 Delhi 110085

Ref: 321 / 385 / 202379 / 100874 / 17



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आपका आधार क्रमांक / Your Aadhaar No. :

6344 4948 3796

आधार — आम आदमी का अधिकार



भारत सरकार
 GOVERNMENT OF INDIA



श्री यदव
 Shri Yadav
 जन्म वर्ष : Year of Birth : 1985
 लिंग : Gender



6344 4948 3796

आधार — आम आदमी का अधिकार