


FINAL REPORT

Bill No.	: APHHC230000910	Bill Date	: 12-08-2023 08:45
Patient Name	: MR. GOPI CHANDRA	UHID	: APH000016365
Age / Gender	: 59 Yrs 1 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: APH23021237	Current Ward / Bed	: /
		Receiving Date & Time	: 12-08-2023 10:02
		Reporting Date & Time	: 12-08-2023 15:27

BLOOD BANK REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(ABOVE 40)@2550

BLOOD GROUP (ABO)

"O"

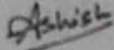
RH TYPE

POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low



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Age / Gender	: 59 Yrs 1 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: APH23021298	Current Ward / Bed	: /
		Receiving Date & Time	: 12-08-2023 15:04
		Reporting Date & Time	: 12-08-2023 15:26

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

BLOOD UREA <small>Urease-GLDH,Kinetic</small>		17	mg/dL	15 - 45
BUN (CALCULATED)		7.9	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	L	0.7	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		104.0	mg/dL	70 - 100

 Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.
 (As per American Diabetes Association recommendation)

GLUCOSE-PLASMA (POST PRANDIAL) <small>(UV Hexokinase)</small>		85.0	mg/dL	70 - 140
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 Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL.
 (As per American Diabetes Association recommendation)

LIPID PROFILE

CHOLESTROL-TOTAL <small>(CHO-POD)</small>	H	179	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immuno-inhibition</small>		56	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	107	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		64	mg/dL	0 - 160
NON-HDL CHOLESTROL		123.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.2		½Average Risk <3.3 Average Risk 3.3-4.4 2 Times Average Risk 4.5-7.1 3 Times Average Risk 7.2-11.0
LDL CHOLESTROL / HDL CHOLESTROL		1.9		½Average Risk <1.0 Average Risk 1.0-3.6 2 Times Average Risk 3.7-6.3 3 Times Average Risk 6.4-8.0
CHOLESTROL-VLDL		13	mg/dL	10 - 35

Comments:

- Disorders of Lipid metabolism play a major role in atherosclerosis and coronary heart disease.
- There is an established relationship between increased total cholesterol & LDL cholesterol and myocardial infarction.
- HDL cholesterol level is inversely related to the incidence of coronary artery disease.
- Major risk factors which adversely affect the lipid levels are:
 - Cigarette smoking.
 - Hypertension.
 - Family history of premature coronary heart disease.
 - Pre-existing coronary heart disease.

LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL <small>(DPO)</small>	H	1.06	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.20	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	0.86	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Blund)</small>		6.4	g/dL	6 - 8.1

FINAL REPORT

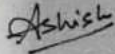
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Patient Name	: MR. GOPI CHANDRA	UHID	: APH000016365
Age / Gender	: 59 Yrs 1 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
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ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.3	g/dL	
S.GLOBULIN	L	2.1	g/dL	2.8-3.8
A/G RATIO		2.05		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		88.9	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		32.5	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)		20.3	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		14.6	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)		199.6	IU/L	0 - 248
S.PROTEIN-TOTAL (Biuret)		6.4	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		4.9	mg/dL	2.6 - 7.2

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Age / Gender	: 59 Yrs 1 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: APH23021298	Current Ward / Bed	: /
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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

HbA1C (Turbidimetric Immuno-inhibition)	5.1	%	4.0 - 6.2
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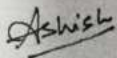
INTERPRETATION:

HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- Note:
1. A three monthly monitoring is recommended in diabetics.
 2. Since HbA1c concentration represents the integrated values for blood glucose over the preceding 6 - 10 weeks and is not affected by daily glucose fluctuation, exercise and recent food intake, it is a more useful tool for monitoring diabetics.

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Patient Name :	MR. GOPI CHANDRA	UHID :	APH000016365
Age / Gender :	59 Yrs 1 Mth / MALE	Patient Type :	OPD <input type="checkbox"/> PHC <input type="checkbox"/>
Ref. Consultant :	SELF	Ward / Bed :	/
Sample ID :	APH23021236	Current Ward / Bed :	/
		Receiving Date & Time :	12-08-2023 10:02
		Reporting Date & Time :	12-08-2023 13:32

HAEMATOLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

CBC -1 (COMPLETE BLOOD COUNT)

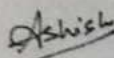
TOTAL LEUCOCYTE COUNT (Flow Cytometry)	L	3.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focusing)	L	4.2	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)	L	12.4	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	37.9	%	40 - 50
MEAN CORPUSCULAR VOLUME		89.1	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.3	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.8	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focusing)		160	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		45.0	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		14.0	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		71	%	40 - 80
LYMPHOCYTES		23	%	20 - 40
MONOCYTES		4	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	26	mm 1st hr	0 - 10

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Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: APH23021297	Current Ward / Bed	: /
		Receiving Date & Time	: 12-08-2023 15:04
		Reporting Date & Time	: 12-08-2023 16:21

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Urine

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(ABOVE 40)@2550

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY		25 mL		
COLOUR		Straw		Pale Yellow
TURBIDITY		Clear		

CHEMICAL EXAMINATION

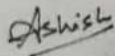
PH (Double pH indicator method)		6.5		5.0 - 8.5
PROTEINS (Protein-error-of-indicators)		Negative		Negative
SUGAR (GOD-POD Method)		Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)		1.015		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		2-4	/HPF	0 - 5
RBC'S		Nil		
EPITHELIAL CELLS		4-5/hpf		
CASTS		Nil		
CRYSTALS		Nil		
URINE-SUGAR		NEGATIVE		

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Sample ID	: APH23021240	Current Ward / Bed	: /
		Receiving Date & Time	: 12-08-2023 10:02
		Reporting Date & Time	: 12-08-2023 14:02

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

PROSTATIC SPECIFIC ANTIGEN(TOTAL) (ELFA)		0.98	ng/mL	0 - 4
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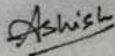
Note:

TPSA as a Tumor marker is used as an additional test for prognosis and monitoring of therapy for patients with diagnosed malignant tumors. It may offer a diagnostic value for screening patients with suspected malignancies, as high values may be experienced in situations like benign prostatic hyperplasia, prostatitis, bladder catheterisation, urinary retention, endoscopic examination. Value in between 4-10ng/ml may be an indication of Benign Prostate Hyperplasia or prostate Carcinoma, values greater than 10ng/ml may indicate high risk of Carcinoma.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.

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Sample ID	: APH23021240	Current Ward / Bed	: /
		Receiving Date & Time	: 12-08-2023 10:02
		Reporting Date & Time	: 12-08-2023 14:02

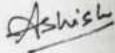
Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.84	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.45	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	1.74	mIU/L	0.27-4.20

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