

Health Check up Booking Request(22E28942)

Mediwheel <wellness@mediwheel.in>
To: insurancedckc234@gmail.com
Cc: customercare@mediwheel.in

12 April 2024 at 19:01



Mediwheel
...Your wellness partner

011-41195959Dear **Dr. Charu Kohli Cilnic**

We have received a booking request with the following details. Provide your confirmation by clicking on the Yes button.

You confirm this booking? Yes No

Name : MS. HALDAR DIPANWITA
Contact Details : 7890245466
Hospital Package Name : Mediwheel Full Body Health Annual Plus Check
Location : A C-234, Block C, Defence Colony,
Appointment Date : 13-04-2024

Member Information		
Booked Member Name	Age	Gender
MS. HALDAR DIPANWITA	35 year	Female

Tests included in this Package -

- Bmi Check ✓
- Pap Smear ✓
- Ent Consultation ✓
- Dietician Consultation ✓
- Gynae Consultation ✓
- Thyroid Profile ✓
- ESR ✓
- Blood Glucose (Fasting) ✓
- General Physician Consultation ✓
- TMT OR 2D ECHO ✓
- Blood Glucose (Post Prandial) ✓
- Chest X-ray ✓
- ECG ✓
- USG Whole Abdomen ✓
- Eye Check-up consultation ✓
- Urine Sugar Fasting ✓
- Urine Sugar PP ✓
- Dental Consultation ✓
- Gynac Consultation ✓
- Urine analysis ✓
- CBC ✓
- HbA1c ✓
- Lipid Profile ✓
- Kidney Profile ✓
- Liver profile ✓

APP
TMT
24/04

Charu

NAME : DIPANWITA HALDAR

AGE/SEX : 35Y/F

DATE : 13.04.2024

Height	Weight	BP	BMI
155 cm	65 kg	110/70 mmHg	27.1
HABITS	SMOKING : NO ALCOHOL : NO DRUGS ; NO		

Family History: -

- Asthma : NO
- Diabetes : NO
- TB : NO
- Cancer : NO
- Heart Disease : NO
- HTN : NO
- BP : NO
- Thyroid : NO

Personal History:

- Pleurisy : NO
- Rheumatic : NO
- Acquired deformity : NO
- Operated for : NO
- Accidents : NO
- Psychosomatic history : NO
- Diabetes : NO
- Thyroid : NO
- BP : NO

Eye / Vision	DISTANCE VISION		NEAR VISION		COLOUR VISION	GLASSES
	RT Eye	LT Eye	RT Eye	LT Eye		
	6/6	6/6	N/6	N/6		

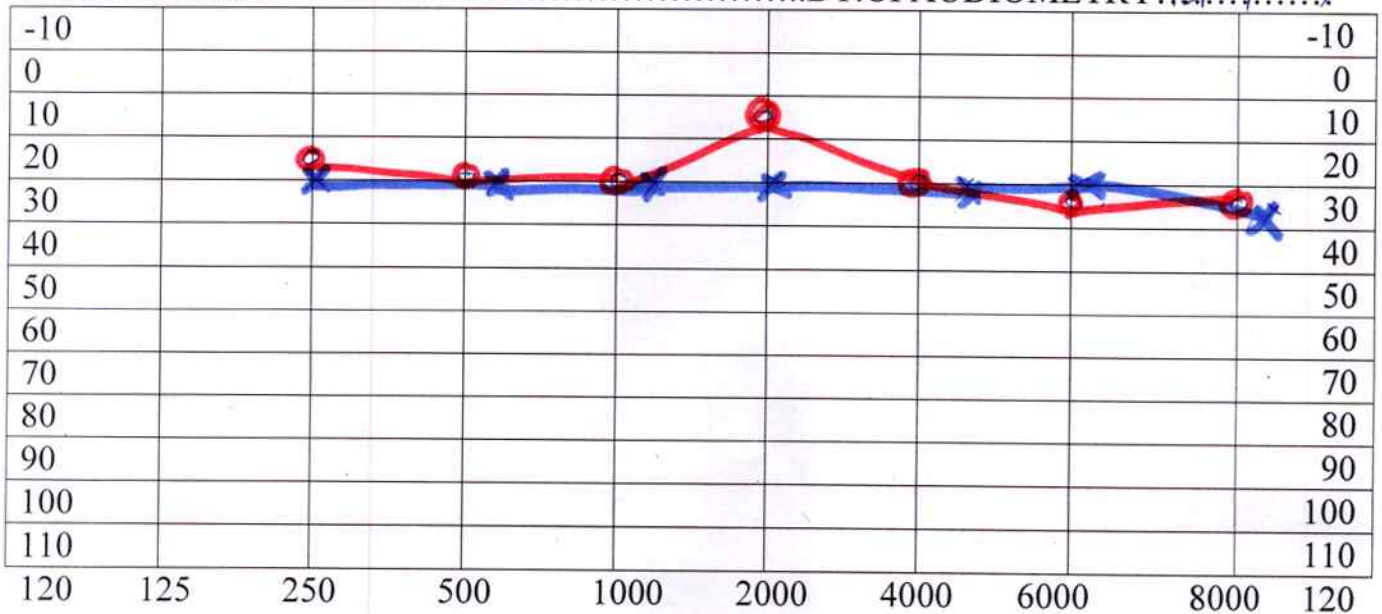
Signature of Medical Examiner: _____



DR. CHARU KOHLI
CONSULTANT MBBS
DMC-8388

AUDIOLOGICAL EVALUATION

1. NAME DIPANKITA AGE 35y SEX F
 2. ADDRESS.....
OCCUPATION.....
 3. DIAGNOSIS..... DT. OF AUDIOMETRY 13/04/2022



TEST FREQUENCY

AIR X =LEFT EAR----Rinne----- Hearing Loss for Speech R L _____
 O =RIGHT EAR -----

BONE < =LEFT EAR ---Weber-----DISCRIMINATION SCORE R L _____

No Response
 Audiologists remarks



- Masking
- 0dB-20dB....normal hearing
 - 20dB-40dB...mild hearing loss
 - 40dB-55dB....moderate hearing loss
 - 55dB-70dB....moderately severe hearing loss
 - 70dB-90dB....sever hearing loss
 - >90dB.....profound hearing loss



Dr. Charu
Kohli's Clinic

Dr. Charu Kohli's Clinic

C-234 Defence Colony, New Delhi-110024

Ph 41550792, 24336960, 24332759

E-mail: drcharukohli@yahoo.com

GYNAE CONSULTATION

NAME: *Jipankhona*

AGE: *35/ female*

MARRIED / UNMARRIED :

DATE: *13/04/2014*

ANY COMPLAINTS:

LMP: *06/04/2014*

NUMBER OF DAY OF CYCLE: *6 days*

CYCLES DAY: *3 days*

REGULAR / IRREGULAR

BREAST PALPATION:

Normal on palpation

Name: DIPANITA
Date: April 13, 2024

WHOLE ABDOMEN SCAN

Liver is normal in size and echotexture is maintained . Normal intrahepatic biliary radicles and normal appearing venous channels. No focal lesion in either lobes. Portal vein is normal. No sub-diaphragmatic collection or pleural effusion.

Gall bladder is normal distended and shows echofree lumen.
CBD: not dilated ; apparently echofree.

Both the kidneys are normal in size, position and echopattern with normal pelvicalyceal systems and corticomedullary differentiation.

LK: 8.52 x 6.19 cm
RK: 9.07x 3.36 cm

Pancreas is of normal size & echopattern. No focal lesion or peri-pancreatic collection.

Spleen is of normal size and echopattern. No focal lesion or calcification. Splenic vein is not dilated.

Aorta and IVC are normal. No retroperitoneal lymphadenopathy.

Urinary bladder shows normal distension and wall-thickness. No calculus or mass.

Uterus measures 4.27 x 3.17 cm in a.p. and transverse diameters. Endometrial lining is regular and maintained and is 6.7 mm thick. Myometrial echoes are maintained with a regular serosal outline.

Cervix is normal in length and mucosal pattern. Echopattern is homogenous.

Rt. Ovary measures 1.69 x 1.47 cm
Lt. ovary measures 2.13 x 1.85 cm

No free fluid is seen in cul de sac.

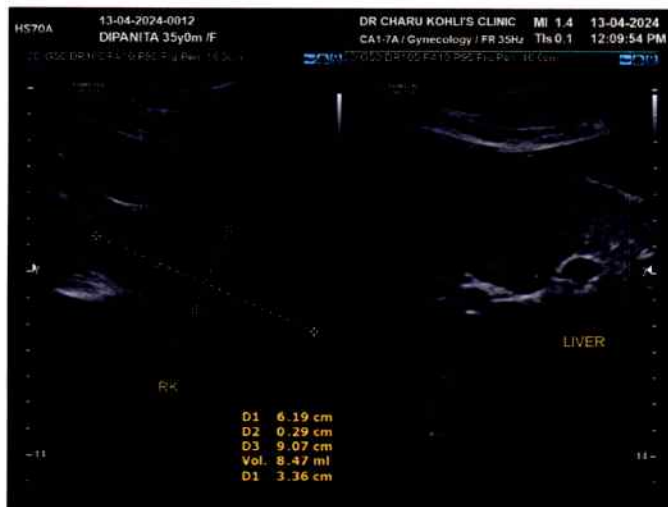
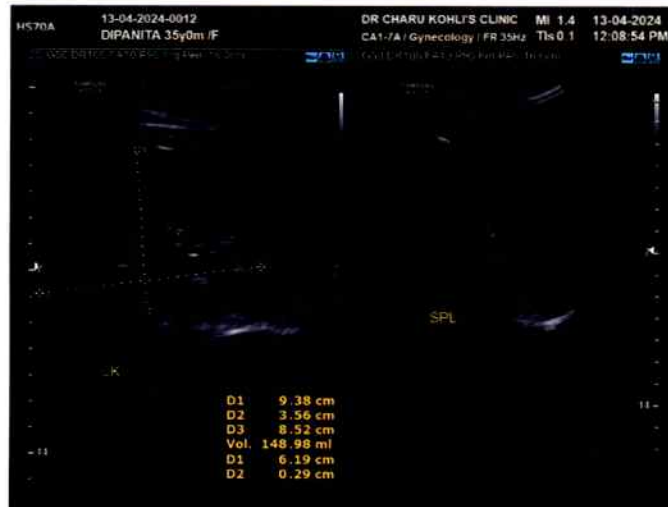
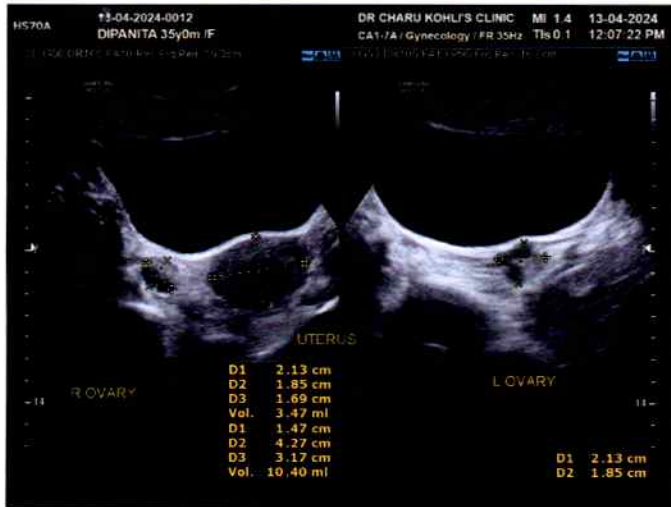
IMPRESSION:

Sonological study is within normal limits .



DR CHARU KOHLI
MBBS ,DMRD
DMC 8388

DR. CHARU KOHLI
CONSULTANT RADIOLOGIST
DMC - 8388
DR. CHARU KOHLI'S CLINIC
C-234, DEFENCE COLONY, NEW DELHI-110024



DR. CHARU KOHLI'S CLINIC

C-234, DEFENCE COLONY, NEW DELHI

Ms. DIPANWITA HALDAR

Age : 35/F

Recorded : 13-4-2024 13:41

Ref. by :

Indication :

ID : 946
HWM : /

TREADMILL TEST SUMMARY REPORT

Protocol: BRUCE

History:

Medication :



PHASE	PHASE TIME	STAGE TIME	SPEED (Km/Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	II	ST LEVEL (mm) V2	V5	METS
SUPINE					78	110/70	85	0.3	1.0	0.1	
HYPERVENT	0:10	0:10			69	110/70	75	0.4	0.9	0.1	
VALSALVA					71	110/70	78	0.2	0.9	0.0	
STANDING					85	110/70	93	0.0	0.9	0.1	
STAGE 1	2:59	2:59	2.70	10.00	103	116/72	119	-0.1	0.6	-0.2	4.80
STAGE 2	5:59	2:59	4.00	12.00	124	124/74	153	0.0	0.9	2.2	7.10
STAGE 3	8:59	2:59	5.40	14.00	135	130/76	175	-0.2	0.5	-0.3	10.00
STAGE 4	10:29	1:29	6.70	16.00	144	140/78	201	-0.8	-0.4	-1.0	11.99
PEAK EXERCISE	10:39	1:39			139	140/78	194	0.1	0.0	-0.8	12.21
RECOVERY	2:59	2:59	0.00	0.00	80	120/72	96	-0.2	0.3	-0.3	
RECOVERY	5:59	5:59	0.00	0.00	76	110/70	83	-0.1	0.4	-0.2	

RESULTS

Exercise Duration : 10:39 Minutes
 Max Heart Rate : 144 bpm 77% of target heart rate 185 bpm
 Max Blood Pressure : 140/78 mmHg
 Max Work Load : 12.21 METS
 Reason of Termination :

IMPRESSIONS

Good exercise tolerance. Negative for any major ECG abnormality.

Cardiologist

By
 DR. D. R. RAJIV
 MBBS, MD
 DMC-46748
 CONSULTANT CARDIOLOGIST

DR. CHARU KOHLI'S CLINIC

SUPINE
PRETEST

ST @ 10mm/mV
80ms PostJ

Ms. DIPANWITA HALDAR

ID : 946

AGE/SEX : 35/F

RECORDED : 13-4-2024 13:41

RATE : 78 BPM

B.P. : 110/70 mmHg

RAW E.C.G.

*Normal ECG
78 bpm*

Dr. D.R. RAJIV

MBBS MD
CONSULTANT CARDIOLOGIST



Filtered

25mm/sec 10mm/mV

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DR. CHARU KOHLI'S CLINIC

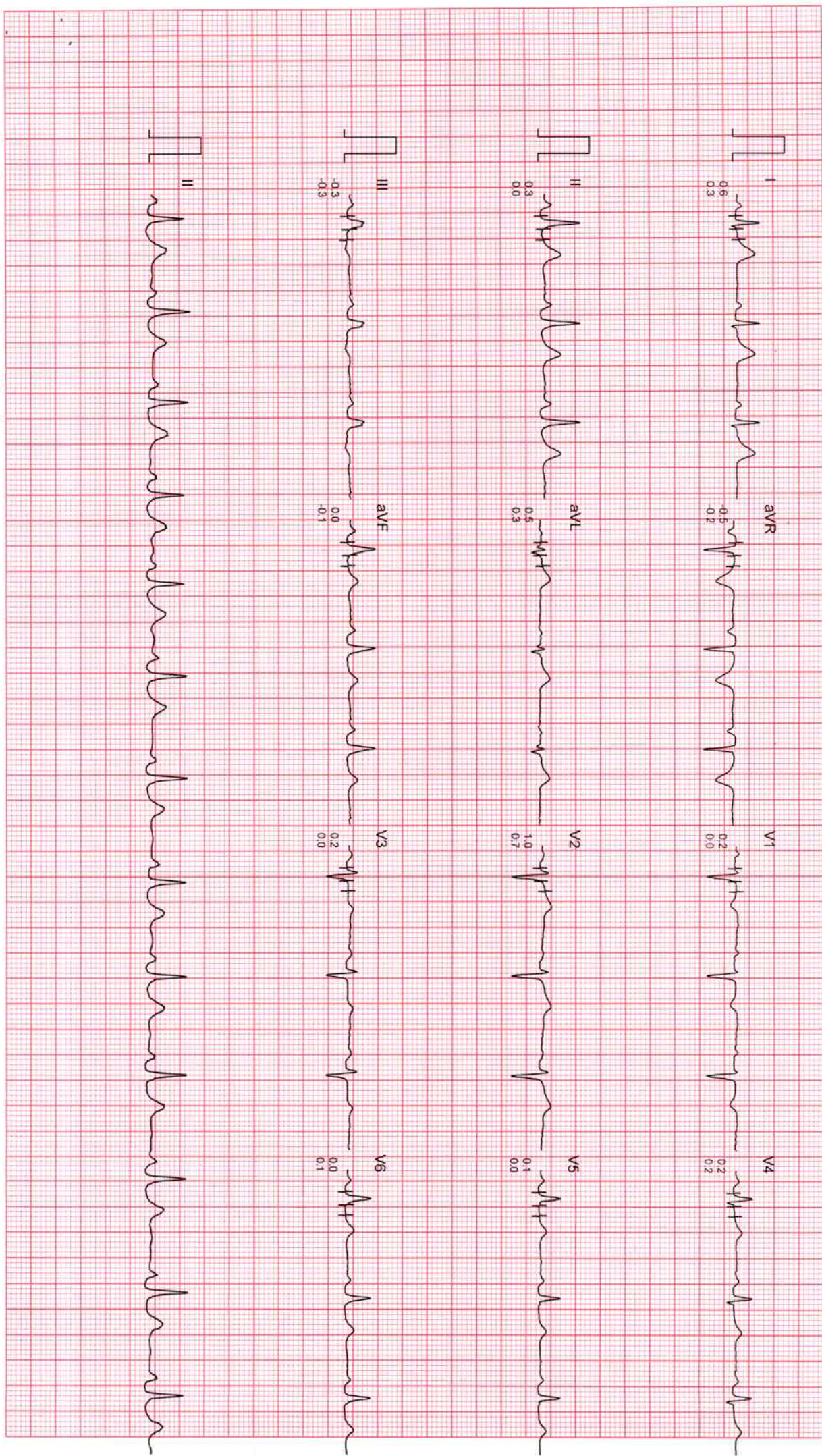
SUPINE
PRETEST

ST @ 10mm/mV
80ms PostJ

Ms. DIPANWITA HALDAR
I.D. : 946
AGE/SEX : 35/F
RECORDED : 13-4-2024 13:41

RATE : 78 BPM
B.P. : 110/70 mmHg

LINKED MEDIUM



DR. CHARU KOHLI'S CLINIC

HYPERVENTILATION
PRETEST

ST @ 10mm/mV
80ms PostJ

Ms. DIPANWITA HALDAR

I.D. : 946

AGE/SEX : 35/F

RECORDED : 13-4-2024 13:41

RATE : 69 BPM

B.P. : 110/70 mmHg

STAGE TIME : 0:10

LINKED MEDIUM



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Computer Corrected Baseline

25mm/Sec 10mm/mV

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DR. CHARU KOHLI'S CLINIC

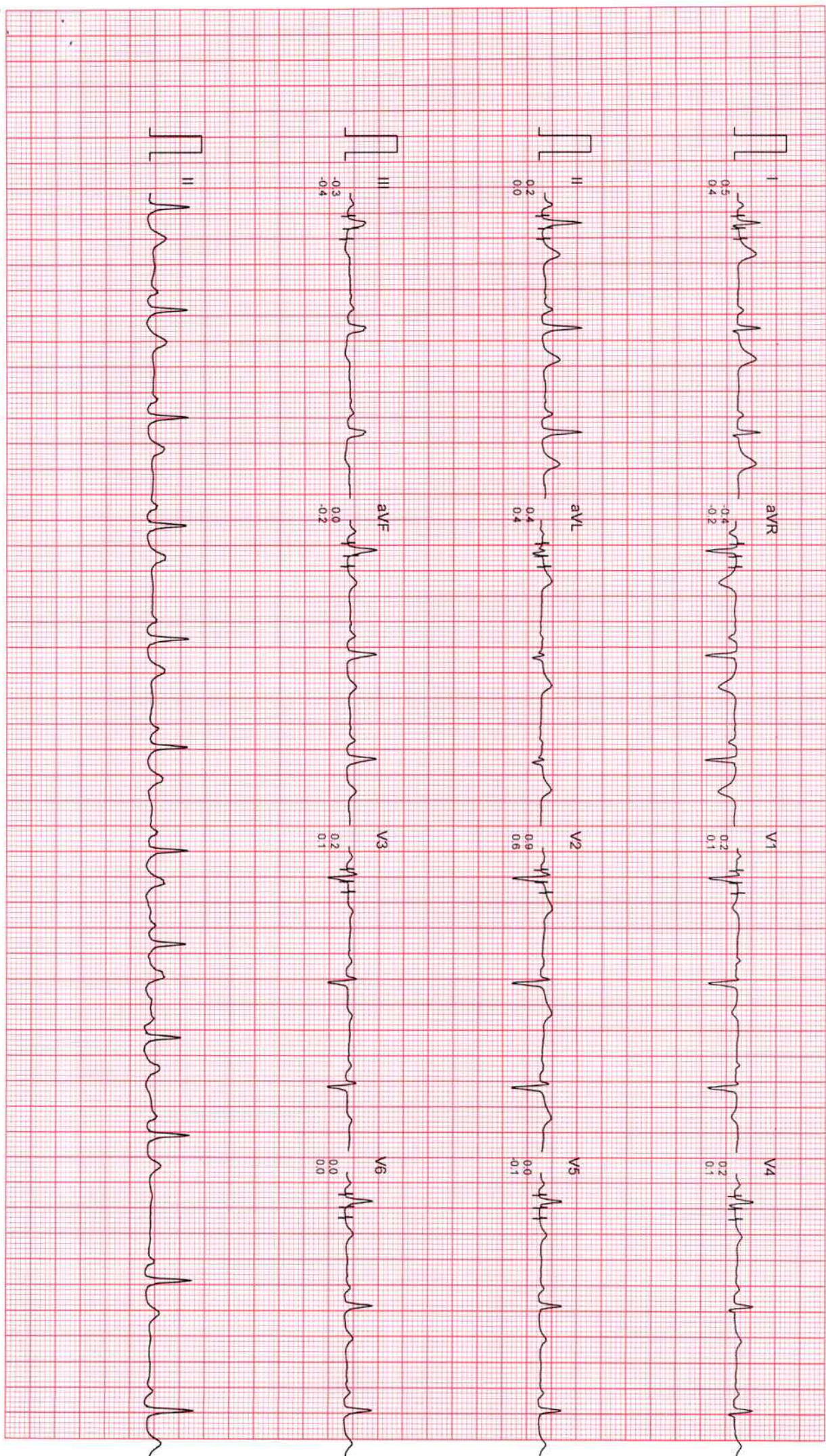
VALSALVA
PRETEST

ST @ 10mm/mV
80ms PostJ

Ms. DIPANWITA HALDAR
I.D. : 946
AGE/SEX : 35/F
RECORDED : 13-4-2024 13:41

RATE : 71 BPM
B.P. : 110/70 mmHg

LINKED MEDIUM



Filtered

Computer Corrected Baseline

25mm/Sec 10mm/mV

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DR. CHARU KOHLI'S CLINIC

STANDING
PRETEST

ST @ 10mm/mV
80ms PostJ

MS. DIPANWITA HALDAR

ID : 946

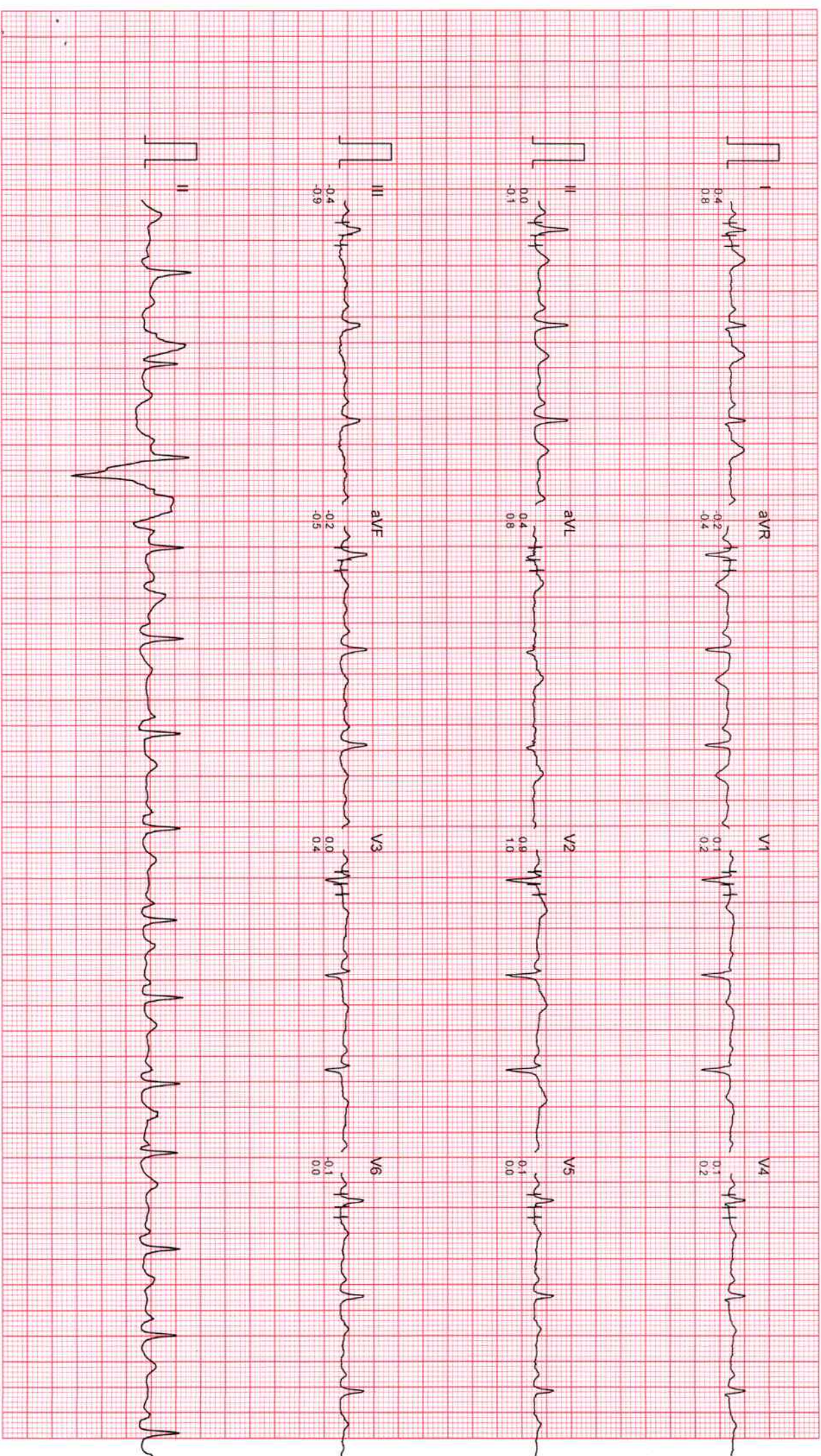
AGE/SEX : 35/F

RECORDED : 13-4-2024 13:41

RATE : 85 BPM

B.P. : 110/70 mmHg

LINKED MEDIUM



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

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DR. CHARU KOHLI'S CLINIC

MS. DIPANWITA HALDAR

ID : 946

AGE/SEX : 35/F

RECORDED : 13-4-2024 13:41

RATE : 103 BPM

B.P. : 116/72 mmHg

BRUCE

EXERCISE 1

PHASE TIME : 2:59

STAGE TIME : 2:59

ST @ 10mm/mV

80ms PostJ

SPEED : 2.7 Km./Hr.

GRADE : 10.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

Cardicom, INDIA Ph: 091-731-2620740, TeleFax: 091-731-2431214

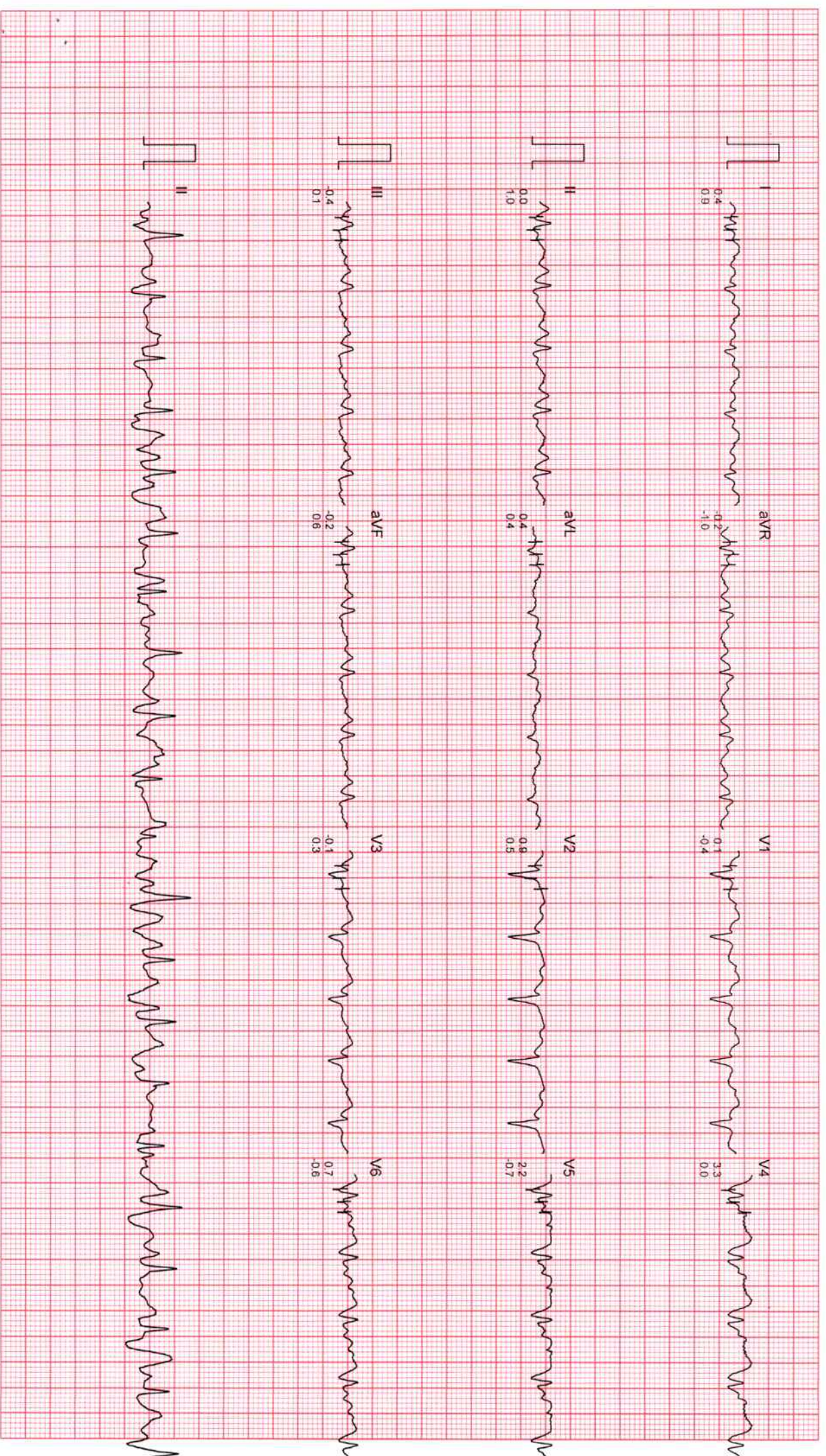
DR. CHARU KOHLI'S CLINIC

Ms. DIPANWITA HALDAR
ID. : 946
AGE/SEX : 35/F
RECORDED : 13-4-2024 13:41

BRUCE
EXERCISE 2
PHASE TIME : 5:59
STAGE TIME : 2:59

ST @ 10mm/mV
80ms PostJ
SPEED : 4.0 Km./Hr.
GRADE : 12.0 %

LINKED MEDIAN



Filtered Computer Corrected Baseline

25mm/Sec 10mm/mV

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DR. CHARU KOHLI'S CLINIC

Ms. DIPANWITA HALDAR
I.D. : 946
AGE/SEX : 35/F
RECORDED : 13-4-2024 13:41

RATE : 135 BPM
B.P. : 130/76 mmHg

BRUCE
EXERCISE 3
PHASE TIME : 8:59
STAGE TIME : 2:59

ST @ 10mm/mV
80ms PostJ
SPEED : 5.4 Km./Hr.
GRADE : 14.0 %

LINKED MEDIAN



DR. CHARU KOHLI'S CLINIC

MS. DIPANWITA HALDAR

ID. : 946

AGE/SEX : 35/F

RECORDED : 13-4-2024 13:41

RATE : 144 BPM

B.P. : 140/78 mmHg

BRUCE

EXERCISE 4

PHASE TIME : 10:29

STAGE TIME : 1:29

ST @ 10mm/mV

80ms PostJ

SPEED : 6.7 Km /Hr.

GRADE : 16.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

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DR. CHARU KOHLI'S CLINIC

Ms. DIPANWITA HALDAR

ID. : 946

AGE/SEX : 35/F

RECORDED : 13-4-2024 13:41

RATE : 139 BPM

B.P. : 140/78 mmHg

BRUCE

PEAK EXERCISE

PHASE TIME : 10:39

STAGE TIME : 1:39

ST @ 10mm/mV

80ms PostJ

SPEED : 6.7 Km./Hr.

GRADE : 16.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

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DR. CHARU KOHLI'S CLINIC

MS. DIPANWITA HALDAR
ID : 946
AGE/SEX : 35/F
RECORDED : 13-4-2024 13:41

BRUCE
RECOVERY
PHASE TIME : 0:59

ST @ 10mm/mV
80ms PostU
SPEED : 0.0 Km./Hr.
GRADE : 0.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

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DR. CHARU KOHLI'S CLINIC

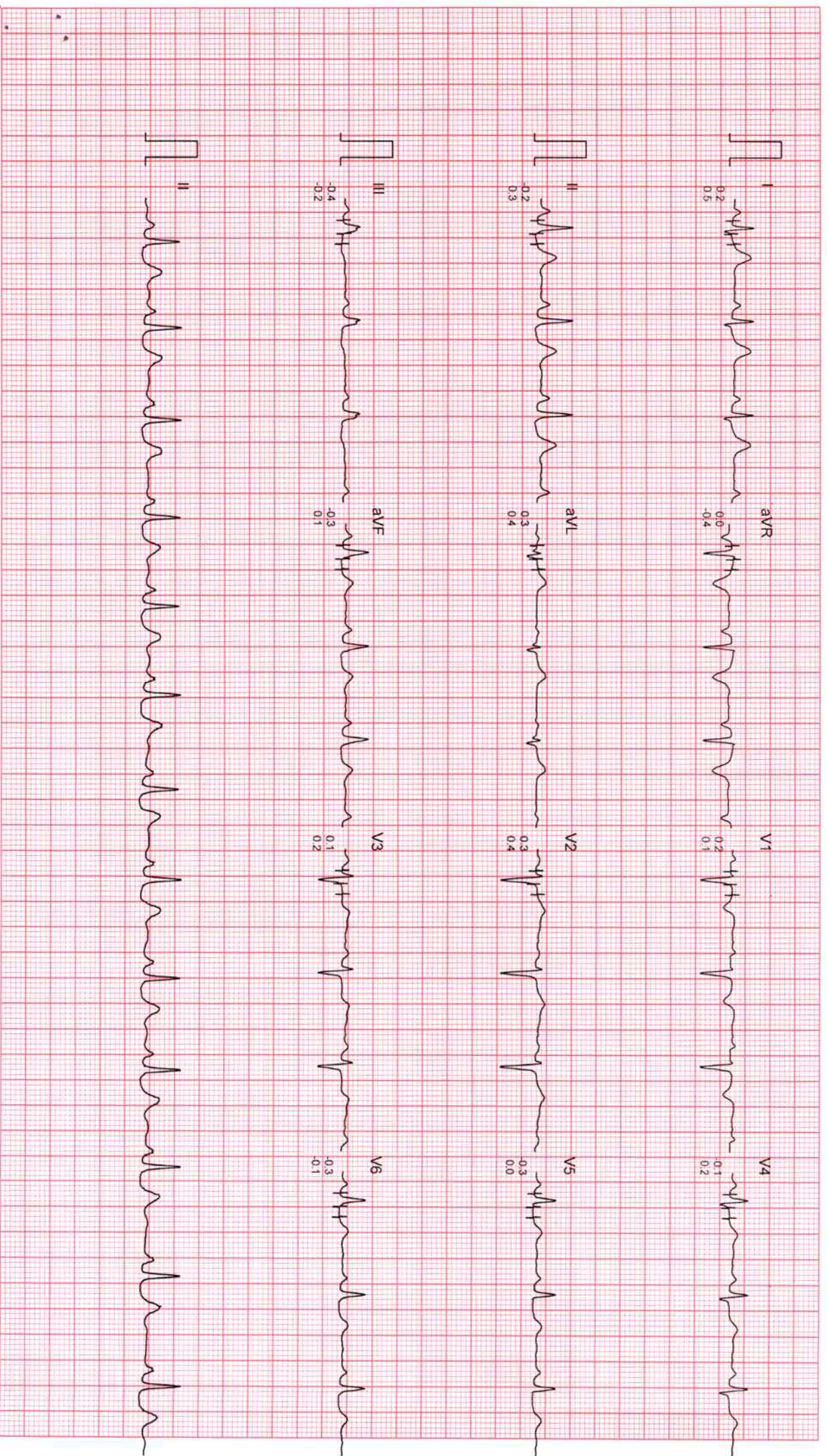
Ms. DIPANWITA HALDAR
ID : 946
AGE/SEX : 35/F
RECORDED : 13-4-2024 13:41

RATE : 80 BPM
B.P. : 120/72 mmHg

BRUCE
RECOVERY
PHASE TIME : 2:59

ST @ 10mm/mV
80ms PostJ
SPEED : 0.0 Km./Hr.
GRADE : 0.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

DR. CHARU KOHLI'S CLINIC

Ms. DIPANWITA HALDAR

ID : 946

AGE/SEX : 35/F

RECORDED : 13-4-2024 13:41

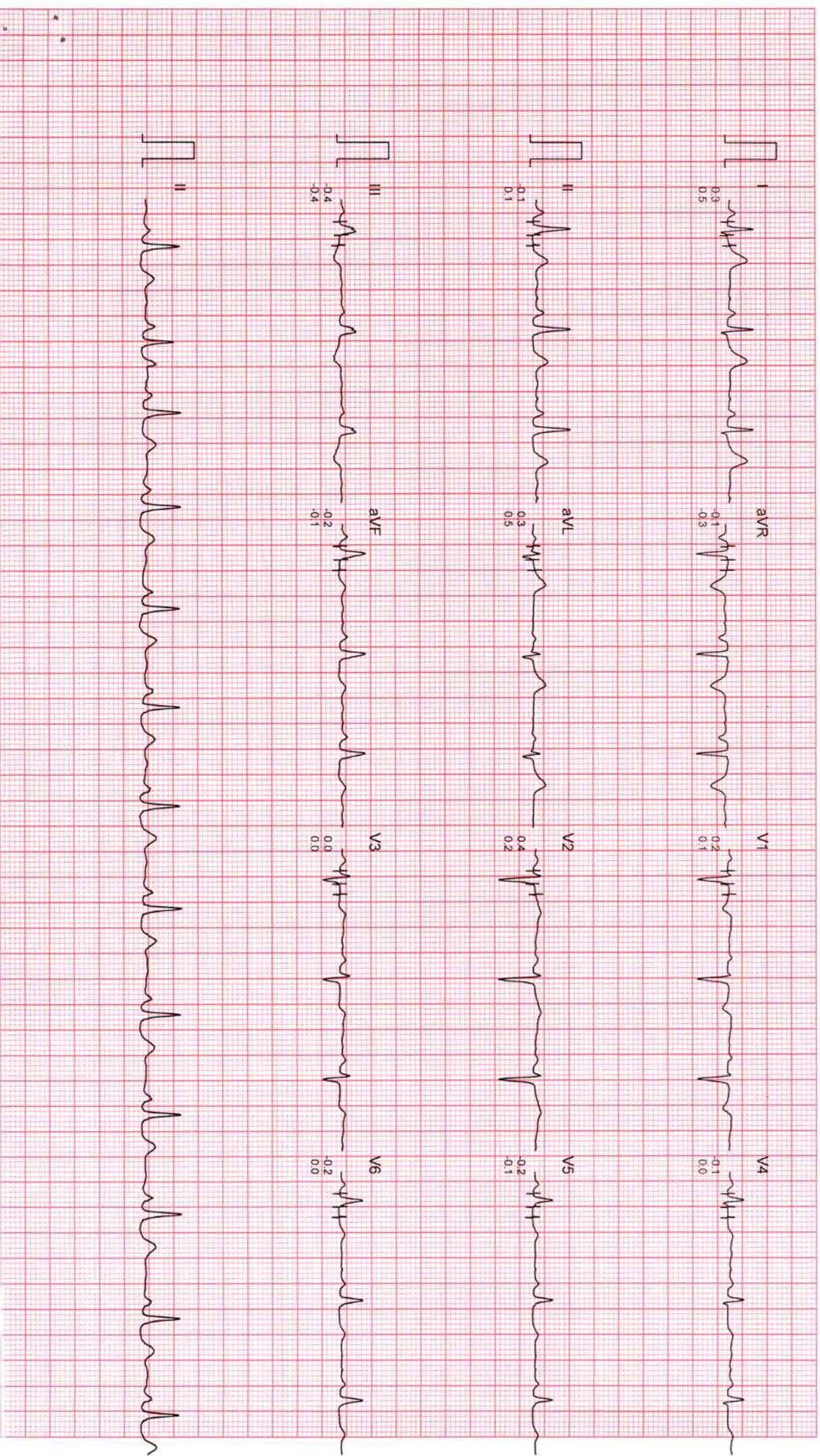
RATE : 76 BPM

B.P. : 110/70 mmHg

BRUCE
RECOVERY
PHASE TIME : 5:59

ST @ 10mm/mV
80ms PostJ
SPEED : 0.0 Km./Hr.
GRADE : 0.0 %

LINKED MEDIUM



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214



Dr. Charu Kohli s Clinic
C-234 Defence Colony, New Delhi-1 10024
Ph 41550792 ,24336960, 24332759
E- mail: drcharukohli@yahoo.com

NAME : DIPANWITA HALDAR

AGE/SEX : 35Y/F

DATE : 13.04.2024

X - RAY CHEST PA VIEW :

Cardiac shadow is normal.
Aorta is normal.
Bilateral lung fields are clear.
Both costophrenic angles are clear.
Bilateral domes of diaphragm are normal.
No bony injury noted.

IMPRESSION: Normal chest skiagram

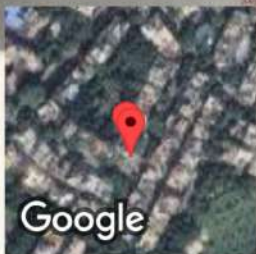
Charu Kohli

DR. CHARU KOHLI
MBBS, DMRD
Consultant Radiologist

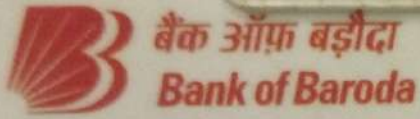
IMPORTANT: Owing to technical limitations in case of any error in the study, the Doctor cannot be held responsible for claim of damages of any nature and this report is not valid for any Medico-legal aspect.



 **GPS Map Camera**



New Delhi, Delhi, India
C-234, Chakrabarti Vithi Rd, Block C, Defence Colony, New Delhi, Delhi
110049, India
Lat 28.570708°
Long 77.229916°
13/04/24 10:19 AM GMT +05:30



बैंक ऑफ़ बड़ौदा
Bank of Baroda



नाम: **DIPANWITA**
Name:

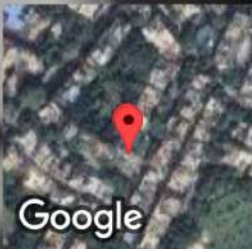
कर्मचारी कूट क्र. **161214**
E. C. No.



जारीकर्ता प्राधिकारी, मु. प्र. (सु.) अ.का., न.दि.
Issuing Authority CM (S), ZO, ND

धारक के हस्ताक्षर
Signature of Holder

GPS Map Camera



New Delhi, Delhi, India
C-234, Chakrabarti Vithi Rd, Block C, Defence Colony, New Delhi, Delhi
110049, India
Lat 28.57074°
Long 77.229888°
13/04/24 10:19 AM GMT +05:30



DIPANWITA HALDAR 35Y/F



Registration No.	1024766	Mobile No.	7890245466
Patient Name	Ms. DIPANWITA HALDAR	Registration Date/Time	13/04/2024 10:20:42
Age / Sex	35 Yrs Female	Sample Collected Date/Time	13/04/2024 11:48:27
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	13/04/2024 17:13:54
Collected At	DCKC	Printed Date/Time	13/04/2024 18:18:02

Test Name	Value	Unit	Biological Ref Interval
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HAEMATOLOGY

Complete Blood Count (CBC)

Haemoglobin (Hb) ,EDTA <i>Method : Colorimetric</i>	9.7	g/dL	12.0 - 15.0
Total Leucocyte Count (TLC) ,EDTA <i>Method : Electric impedance</i>	05.5	10 ⁹ /L	04.0 - 11.0
Red Blood Cell (RBC) ,EDTA <i>Method : Electric impedance</i>	3.42	10 ⁶ /uL	3.80 - 4.80
Hematocrit (HCT /PCV) ,EDTA <i>Method : Pulse height detection</i>	30.4	%	36.0 - 46.0
Mean Corp Volume (MCV) ,EDTA <i>Method : Calculated</i>	88.8	fL	83.0 - 101.0
Mean Corp Hb (MCH) ,EDTA <i>Method : Calculated</i>	28.3	pg	27.0 - 32.0
Mean Corp Hb Conc (MCHC) ,EDTA <i>Method : Calculated</i>	31.9	g/dL	31.5 - 34.5
Platelet Count(PLT) ,EDTA <i>Method : Electric impedance/Microscopy</i>	153.00	10 ³ /uL	150.00 - 410.00
RDW- CV% ,EDTA	13.8	%	11.6 - 14.0
Differential Leucocyte Count <i>Method : Microscopy</i>			
Neutrophil ,EDTA	62.0	%	40.0 - 80.0
Lymphocyte ,EDTA	29.0	%	20.0 - 45.0
Eosinophil ,EDTA	3.0	%	1.0 - 6.0
Monocyte ,EDTA	6.0	%	2.0 - 10.0
Basophil ,EDTA	0.0	%	0.0 - 2.0
ESR ,EDTA <i>Method : Westergreen</i>	25	mm/Ist hr.	00 - 20

Page No: 1 of 9

Checked By :- POOJA



DR. NEELU CHHABRA
MD. PATHOLOGIST

At Your Home: Collection of Blood Samples, ECG, Digital X-Ray

Occupational Health Service ■ Diagnostic & Preventive ■ Health Assessment ■ Periodic Preventive Health Camps ■ Corporate Health Checks

Ultrasound | Digital X Ray | DEXA | Mammography | Path Lab | ECHO | TMT | Healthchecks | PFT | Holter | Audiometry



Registration No.	1024766	Mobile No.	7890245466
Patient Name	Ms. DIPANWITA HALDAR	Registration Date/Time	13/04/2024 10:20:42
Age / Sex	35 Yrs Female	Sample Collected Date/Time	13/04/2024 11:48:27
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	13/04/2024 18:14:14
Collected At	DCKC	Printed Date/Time	13/04/2024 18:18:02

Test Name	Value	Unit	Biological Ref Interval
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HbA1c ,EDTA 5.3 %
Method : Photometric method

INTERPRETATIONS:-

NORMAL RANGE 4.00 - 5.60 %

Pre Diabetic/ Higher chance of getting diabetes	5.70 - 6.20	%
Good Diabetic Control	6.20 - 6.80	%
Fair Diabetic Control	6.80 - 7.60	%
Uncontrolled Diabetes -action suggested	>7.6	%

Note:-

Glycosylated Haemoglobin is a specific component of HBA1C and is the blood glucose bound to it. This test is an index of carbohydrate in balance during the preceeding two months. The estimation is of greater importance for specific group of patient. This result are not affected by time, meal intake exercise, diabetic drugs, emotional Stress etc. HbA1c should be routinely monitored ideally at least every 3 months.





Registration No.	1024766	Mobile No.	7890245466
Patient Name	Ms. DIPANWITA HALDAR	Registration Date/Time	13/04/2024 10:20:42
Age / Sex	35 Yrs Female	Sample Collected Date/Time	13/04/2024 11:48:27
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	13/04/2024 17:13:54
Collected At	DCKC	Printed Date/Time	13/04/2024 18:18:02

Test Name	Value	Unit	Biological Ref Interval
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BIOCHEMISTRY

LIPID PROFILE

Total Lipids ,Serum Plain	501	mg/dl	400 - 700
Serum Cholesterol ,Serum Plain <i>Method : CHOD-POD</i>	192	mg/dl	0 - 200
Serum Triglycerides ,Serum Plain <i>Method : GPO-POD</i>	117	mg/dl	40 - 140
Serum HDL Cholesterol ,Serum Plain <i>Method : Direct Method</i>	47	mg/dl	40 - 70
Serum LDL Cholesterol ,Serum Plain <i>Method : Calculated</i>	121.6	mg/dl	30.0 - 100.0
Serum VLDL Cholesterol ,Serum Plain <i>Method : Calculated</i>	23.4	mg/dl	24.0 - 45.0
Total CHO/HDL Cholesterol Ratio ,Serum Plain <i>Method : Calculated</i>	4.09		
LDL/HDL Cholesterol Ratio ,Serum Plain <i>Method : Calculated</i>	2.59		

Guidelines for Total Blood Cholesterol Levels on 11 to 12 hour fasting samples.

Desirable : Less than 200 mg/dl

Borderline High Risk : 200 to 239 mg/dl

High Risk : 240 mg/dl and over, on repeated values

Optimal Level for Cardiac Patients : Less than 200 mg/dl

HDL-C : High HDL has generally been found to be protective, decreasing the risk of coronary Artery disease (CAD) in most people. However, some recent studies have shown that in some people with high HDL, the HDL is not protective and may, in fact result in higher risk for CAD than in people with normal HDL levels. In one study it was shown that people with CAD and high HDL had underlying genetic anomalies in enzymes important in lipid turnover. Another study showed that high levels of abnormally large HDL particles were associated with increased risk of CAD. Factors that elevate HDL concentrations include chronic alcoholism, treatment with oral estrogen replacement therapy, extensive aerobic exercise, and treatment with niacin, statins, or fibrates. Smoking reduces levels of HDL cholesterol, while quitting smoking leads to a rise in the plasma HDL level.

Triglycerides Female 40 - 140
Male 60 - 165

Adult levels:

Optimal <100 mg/dL

Near Optimal/ above optimal 100 -129 mg/dL

Borderline high 130 - 159 mg/dL

High 160 - 189 mg/dL

Very High ≥ 190 mg/dL

KIDNEY FUNCTION TEST (KFT)

Blood Urea ,Serum Plain <i>Method : Urease -UV</i>	17.7	mg/dl	15.0 - 45.0
Serum Creatinine ,Serum Plain <i>Method : Modified Jaffe's</i>	0.72	mg/dl	0.50 - 1.50

Checked By :- POOJA



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Registration No.	1024766	Mobile No.	7890245466
Patient Name	Ms. DIPANWITA HALDAR	Registration Date/Time	13/04/2024 10:20:42
Age / Sex	35 Yrs Female	Sample Collected Date/Time	13/04/2024 11:48:27
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	13/04/2024 17:33:50
Collected At	DCKC	Printed Date/Time	13/04/2024 18:18:02

Test Name	Value	Unit	Biological Ref Interval
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Serum Uric Acid ,Serum Plain <i>Method : Uricase- POD</i>	5.40	mg/dl	2.40 - 5.70
Serum Sodium ,Serum Plain <i>Method : ISE Direct</i>	138.0	mmol/L	135.0 - 148.0
Serum Potassium ,Serum Plain <i>Method : ISE Direct</i>	3.95	mmol/L	3.50 - 5.00
Serum Chloride ,Serum Plain <i>Method : ISE DIRECT</i>	99.00	mmol/L	97.00 - 107.00
Serum Calcium ,Serum Plain <i>Method : Arsenazo III</i>	9.00	mg/dl	New Born : 7.8 - 11.2 mg/dl Adult : 8.2 - 10.6 mg/dl



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Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	13/04/2024 17:13:54
Collected At	DCKC	Printed Date/Time	13/04/2024 18:18:02

Test Name	Value	Unit	Biological Ref Interval
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LIVER PROFILE / LFT

Serum Bilirubin (Total) ,Serum Plain <i>Method : DSA Method</i>	0.37	mg/dl	0.00 - 1.20
Serum Bilirubin (Direct) ,Serum Plain <i>Method : DSA Method</i>	0.13	mg/dl	0.00 - 0.30
Serum Bilirubin (Indirect) ,Serum Plain <i>Method : Calculated Parameter</i>	0.24	mg/dl	0.00 - 0.60
SGOT ,Serum Plain <i>Method : IFCC/KINETIC</i>	19.1	IU/l	Males : Upto 46 IU/l Females : Upto 40 IU/l
SGPT ,Serum Plain <i>Method : IFCC/KINETIC</i>	19.7	IU/l	Upto 49 IU/l
Serum Alkaline Phosphatase ,Serum Plain <i>Method : DEA Method</i>	92.0	IU/l	30.0 - 120.0
Serum Total Protein ,Serum Plain <i>Method : Biuret Method</i>	6.92	gm/dl	6.00 - 8.50
Serum Albumin ,Serum Plain <i>Method : BCG Method</i>	4.09	gm/dl	3.20 - 5.50
Globulin ,Serum Plain <i>Method : Calculated</i>	2.83	gm/dl	2.00 - 4.10
A/G Ratio ,Serum Plain <i>Method : Calculated</i>	1.45		1.00 - 2.10
Serum GGTP ,Serum Plain <i>Method : G-Glutamyl Transferase</i>	14.0	U/L	0.0 - 50.0



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Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	13/04/2024 17:13:54
Collected At	DCKC	Printed Date/Time	13/04/2024 18:18:02

Test Name	Value	Unit	Biological Ref Interval
Blood Sugar (Fasting) ,Plasma F <i>Method : GOD POD</i>	88.9	mg/dl	70.0 - 110.0
Blood Sugar (PP) ,Plasma PP <i>Method : GOD POD</i>	102.9	mg/dl	70.0 - 140.0



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Age / Sex	35 Yrs Female	Sample Collected Date/Time	13/04/2024 11:48:27
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	13/04/2024 16:17:11
Collected At	DCKC	Printed Date/Time	13/04/2024 18:18:02

Test Name	Value	Unit	Biological Ref Interval
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IMMUNOASSAY

TOTAL THYROID PROFILE

Total T3 ,Serum Plain	1.16	ng/mL	0.69 - 2.15
Total T4 ,Serum Plain	9.54	ug/dl	5.20 - 12.70
TSH	3.98	uIU/ml	0.30 - 4.50

Comment :

Age Group	Biological Reference Range
1-2 Days	3.2-3.43 uIU/ml
3-4 Days	0.7-15.4 uIU/ml
15 Days - 5 Months	1.7-9.1 uIU/ml
5 Months - 2 Years	0.7-6.4 uIU/ml
2 Years - 12 Years	0.64-6.27 uIU/ml
12 Years - 18 Years	0.51-4.94 uIU/ml
> 18 Years	0.35-5.50 uIU/ml

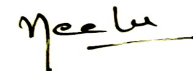
Adults

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates + 50 %, hence time of the day has influence on the measured serum TSH concentration. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

Newborn

In a very low birth weight baby (particularly premature neonates) immaturity of the hypothalamic-pituitary - thyroid axis may mask primary congenital hypothyroidism. It is recommended that the test be repeated two weeks after birth in babies 1000-1500 gm and at four weeks in those <1000 gm. Specimen collection prior to 24 hours of age, after blood transfusion and prematurity can affect this screening.

Nearly 90% of CH cases are detected by newborn screening. A small number of children may test normal on the newborn screen but later develop hypothyroidism.





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CLINICAL PATHOLOGY

URINE ROUTINE EXAMINATION

URE PHYSICAL EXAMINATION

Colour ,URINE	Pale Yellow	Pale Yellow
Volume ,URINE	25 mL	
Appearance ,URINE	Clear	Clear

URE CHEMICAL EXAMINATION


Reaction ,URINE	Acidic	Acidic
Ph (Strip Method) ,URINE	5.5	5.0
Specific Gravity ,URINE	1.025	1.000
Protein (Strip Method) ,URINE	Nil	Nil
Glucose (Strip Method) ,URINE	Nil	Nil

URE MICROSCOPY EXAMINATION

Pus Cells ,URINE	1 - 2 /HPF	0 - 1
Epithelial Cells ,URINE	0 - 2 /HPF	0 - 1
RBC's ,URINE	Nil /HPF	Nil
Casts ,URINE	Nil	
Crystals ,URINE	Nil	
Bacteria ,URINE	Absent	Absent
Mucus Thread ,URINE	Nil	Nil
Other ,URINE	Nil	

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URE SUGAR (FASTING) ,URINE NIL

URE SUGAR PP ,URINE NIL

*** End of Report ***