

### Health Check up Booking Request(22E29047)

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

18 April 2024 at 12:42



011-41195959

### Dear 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?

Name

: MR. KUMAR OMENDRA

**Contact Details** 

: 9968255997

Hospital Package Name

: Mediwheel Full Body Annual Plus Above 50 Male

Location

: A C-234, Block C, Defence Colony,

Appointment Date

: 19-04-2024

Men	nber Information	
Booked Member Name	Age	Gender
MR. KUMAR OMENDRA	43 year	Male

### Tests included in this Package -

- Bmi Check
- Ent Consultation
- Dietician Consultation
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomert
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile
- Prostate Specific Antigen (PSA Male)



Dr. Charu Kohli's Clinic C-234 Defence Colony, New Delhi-110024 Ph 41550792 ,24336960, 24332759 E- mail: drcharukohli@yahoo.com

NAME

: KUMAR OMENDRA

AGE/SEX

: 43Y/M

DATE

: 19.04.2024

Height	Weight	BP	BMI
166 cm	66 kg	110/70 mmHg	27.6
HABITS	SMOKING: NO ALCOHOL: NO DRUGS: NO		I

### Family History: -

Asthma : NO
 Diabetes : NO
 TB : NO
 Cancer : NO
 Heart Disease : NO

• HTN : NO

BP : FATHER HAS HTN X 20YRS

Thyroid: NO

Personal History:

POLIO RIGHT LEG X CHILDHOOD

Pleurisy : NO
Rheumatic : NO
Acquired deformity : NO
Operated for : NO
Accidents : NO
Psychosomatic history : NO

Diabetes : DM X 3 YRS

Thyroid : NO
 BP : NO

Dec /	DISTANO	CE VISION	NEAR	VISION			
Eye / Vision	RT Eye LT Eye		RT Eye	- LT Eye	COLOUR VISION	GLASSES	
	6/6	6/6	N/6	N/6	NORMAL	NO	

Signature of Medical Examiner: \_

house

DR. CHARU KOHL CONSULTANT MBBS DMC-8388







C-234, Defence Colony, New Delhi-110024 Phone: 011-41550792, 24332759, 24336960,

49098657, 35670064

E-mail: drcharukohli@yahoo.com

Name: Omendra Kumar Date: April 19, 2024

### WHOLE ABDOMEN SCAN

Liver is enlarged in size and echotexture is raised. Partially obliterated intrahepatic biliary radicles and normal appearing venous channels noted. No focal lesion in either lobes. Portal vein is normal. No subdiaphragmatic collection or pleural effusion.

Gall bladder is showing normal wall thickness and lumen is echofree. .CBD: not dilated; apparently echofree.

Pancreas is normal in size shape and echotexture.

Retroperitoneum does not reveal any obvious abnormality.

Spleen is normal in size with normal echotexture. Splenic vein is normal.

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

RK:

10.49 x 4.5 cm

LK:

9.04 x 5.59 cm

Urinary bladder is adequately distended. No mass or calculus seen.

Prostate is normal in size, echopattern is homogenous.

No free fluid is seen in the peritoneal cavity.

### IMPRESSION:

Grade2 fatty liver , otherwise sonological study is within normal limits

Dr Charu Kohli MBBS DMRD

DMC8388

opinion

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

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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 Medicolegal aspect. Every modern technology has its own limitations, in case of discrepancy/difference in opinion advised-repeat scan/ second



Dr. Charu Kohli's Clinic C-234 Defence Colony, New Delhi-110024 Ph 41550792 ,24336960, 24332759 E- mail: drcharukohli@yahoo.com

55dB-70dB....moderately severe hearing loss

70dB-90dB....sever hearing loss >90dB.....profound hearing loss

### **AUDIOLOGICAL EVALUATION**

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3.DI	AGNO	SIS				·····	DT	.OFAU	JDION	METRY	19104	1204
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50												50
60												60
70												70
80												80
90												90
100												100
110										1		110
120	125		250	500	10	000 2	000	4000	60	000	8000	120
					TEST	FREQU	<u>ENCY</u>					
AIR	X = LI O = R	EFT EA IGHT I	AR EAR	Rinne	F	Hearing Lo	oss for	Speech	RL_			-
BON	E <=L	EFT E	AR	Weber	D	ISCRIMI	NATIC	N SC	ORE	R L		
	espons ologists	e s remar	ks	M	Jaskin, Burney	S LE WAS	0dB-20dB 20dB-40dE 40dB-55dE	3mild he	earing loss	g loss		

Breakfast - Chapati, Tea, Rusk. + Vigolatu and winch - Chapati, vegatable, Rice + Colod + taggetto

Dinner - Chapati, Vegatasse, Rice, Daal.

Please and fruits & vegetales + and.

C-234, Defence Colony, New Delhi

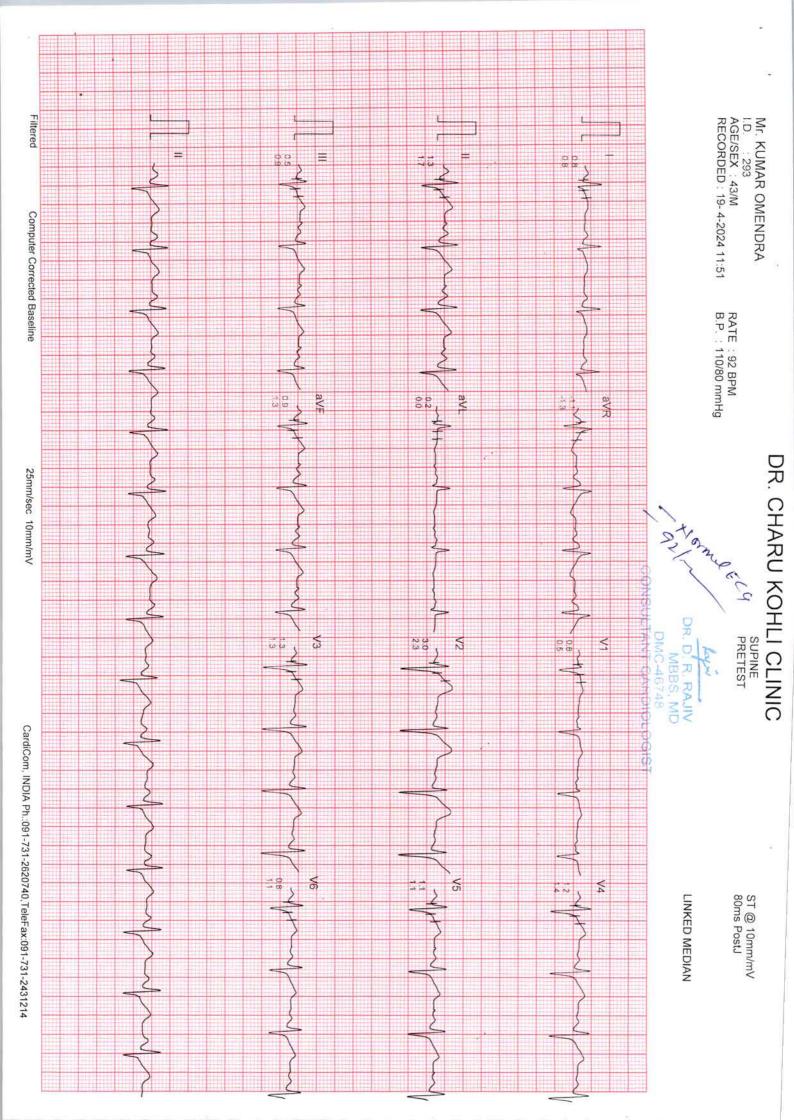
Mr. KUMAR OMENDRA
Age/Sex: 43/M
Recorded: 19- 4-2024 11:51
Ref. by:
Indication:

ID: 293 Ht/Wt:/

TREADMILL TEST SUMMARY REPORT

Protocol: BRUCE History: Medication:,.

•				IMPRESSIONS	Reason of Termination	Max Work Load	Max Heart Rate	Exercise Duration	RESULTS	RECOVERY 5:59	RECOVERY 2:59	PEAK EXERCISE 6.01		STAGE 1		STANDING	HYPERVENT 0:08	SUPPLIE	- 50	PHASE
				: Negative		7 12 METS	: 149 bpm 84 % of	.: 6.01 Minutes		5:59		0:01	c c	2.59			0.08		IVIT	STAGE
				e for kind	•		149 bpm 84 % of target heart rate 177 bpm			0.00				2.70 . 10.00			*		(%)	SPEED GRADE
	COMBULIVATION	0 × 0		pudern						99	3	149	149	127	98	97	94 2		3	
Cardiologist	C REJOUG	RAJIN PS. MD	E.	we pawa						110/80		140/84	140/84		08/01		10/80		(mmHg) ×	
	(3)61			nekis						108		208 2.5	208 2.5				101 103 1.3		X100	₹PP
				Jesem						22 -1		2.3	23	24	2.5	2.9	ω ω Ο Ο		V2	ST LEVEL (mm)
									7	0.3		20	2.0		0.7	<u></u>	A D - A		V5	
												7 12	7.10	200					, i	<u> </u>



# DR. CHARU KOHLI CLINIC HYPERVENTILATION PRETEST

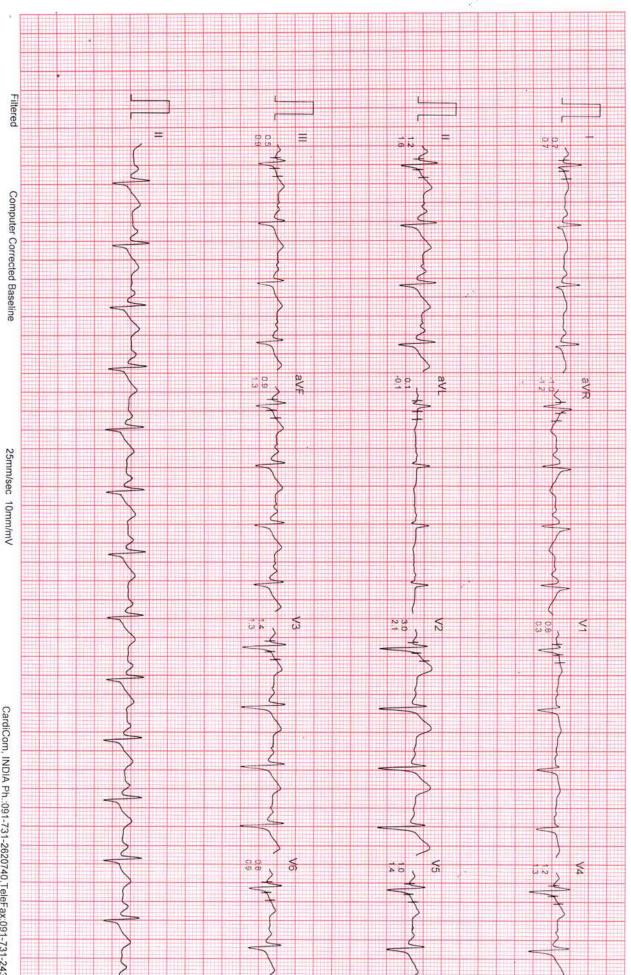
ST @ 10mm/mV 80ms PostJ

LINKED MEDIAN

RATE : 94 BPM B.P. : 110/80 mmHg

Mr. KUMAR OMENDRA I.D : 293 AGE/SEX : 43/M RECORDED : 19- 4-2024 11:51

STAGE TIME: 0:08



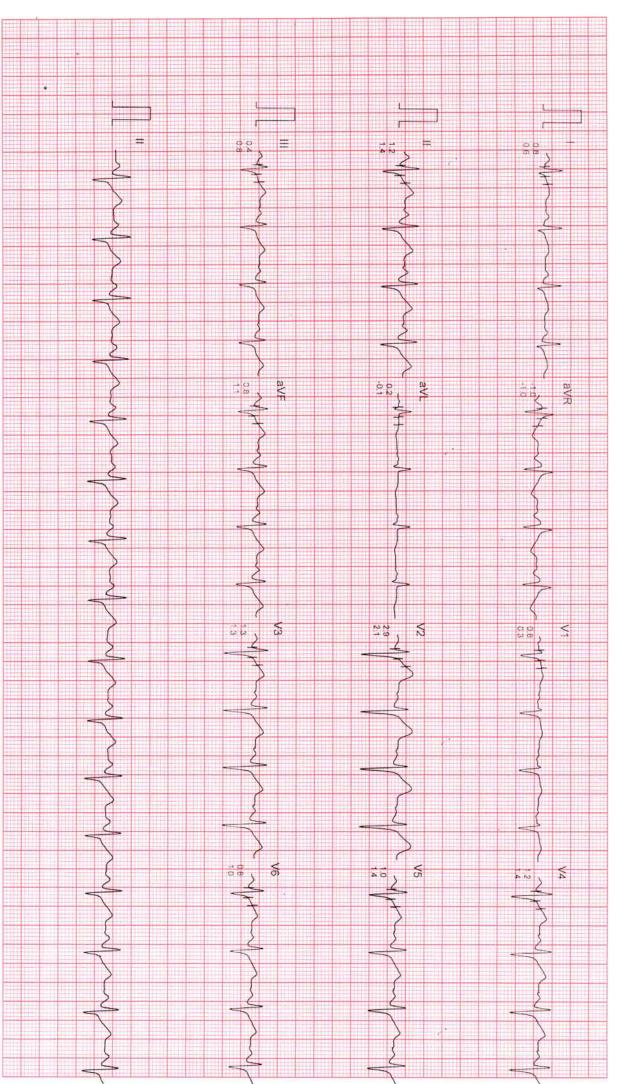
VALSALVA PRETEST

ST @ 10mm/mV 80ms PostJ

LINKED MEDIAN

Mr. KUMAR OMENDRA I.D. :293 AGE/SEX : 43/M RECORDED: 19- 4-2024 11:51

RATE: 97 BPM B.P.: 110/80 mmHg



Filtered

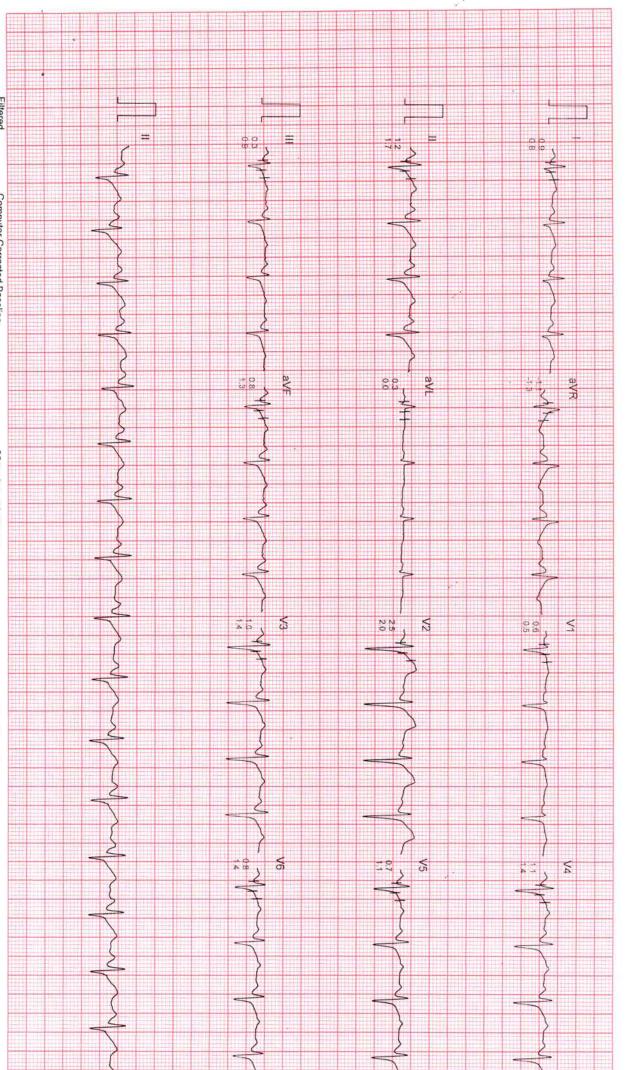
STANDING PRETEST

ST @ 10mm/mV 80ms PostJ

LINKED MEDIAN

Mr. KUMAR OMENDRA I.D.: 293 AGE/SEX: 43/M RECORDED: 19- 4-2024 11:51

RATE : 98 BPM B.P. : 110/80 mmHg



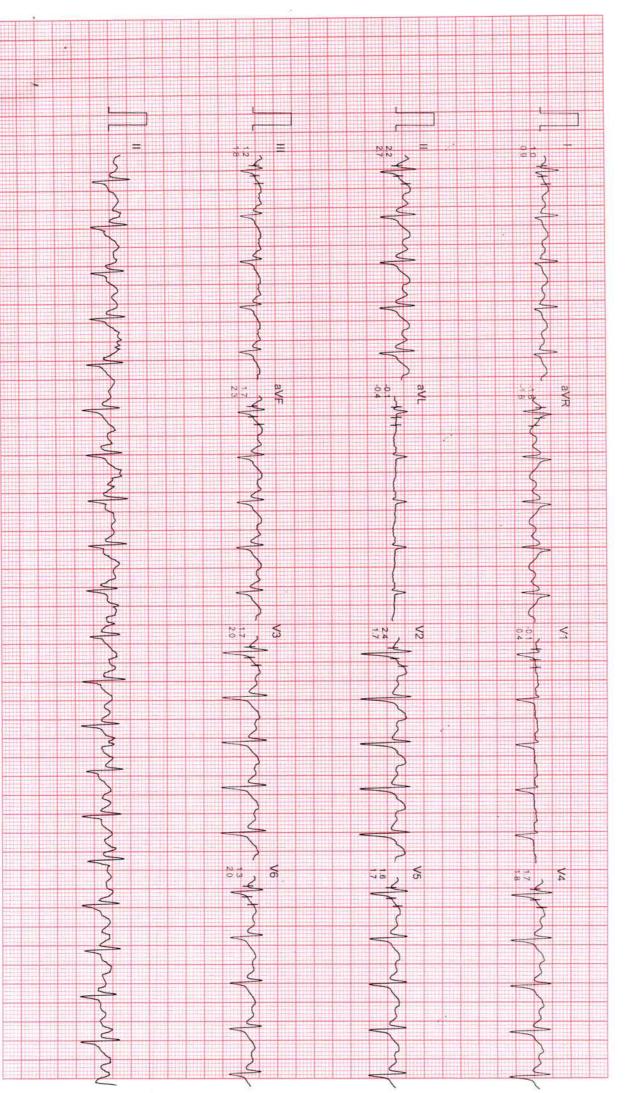
Mr. KUMAR OMENDRA I.D. : 293 AGE/SEX : 43/M RECORDED : 19- 4-2024 11:51

RATE: 127 BPM B.P.: 120/82 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

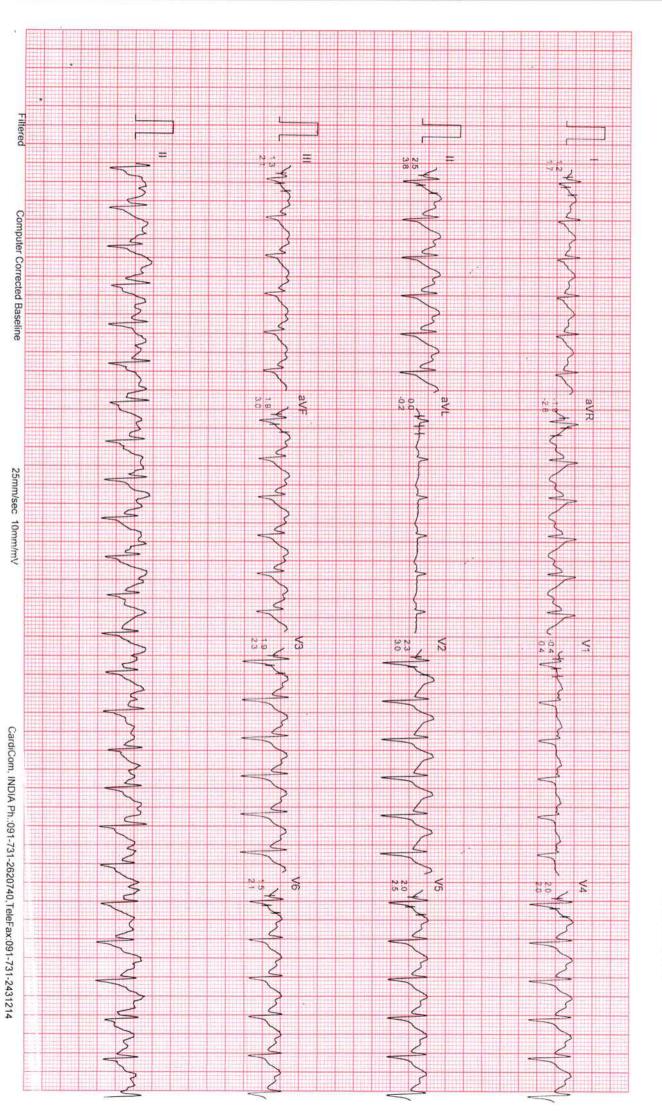


Mr. KUMAR OMENDRA I.D. : 293 AGE/SEX : 43/M RECORDED : 19- 4-2024 11:51 RATE: 149 BPM B.P.:: 140/84 mmHg

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



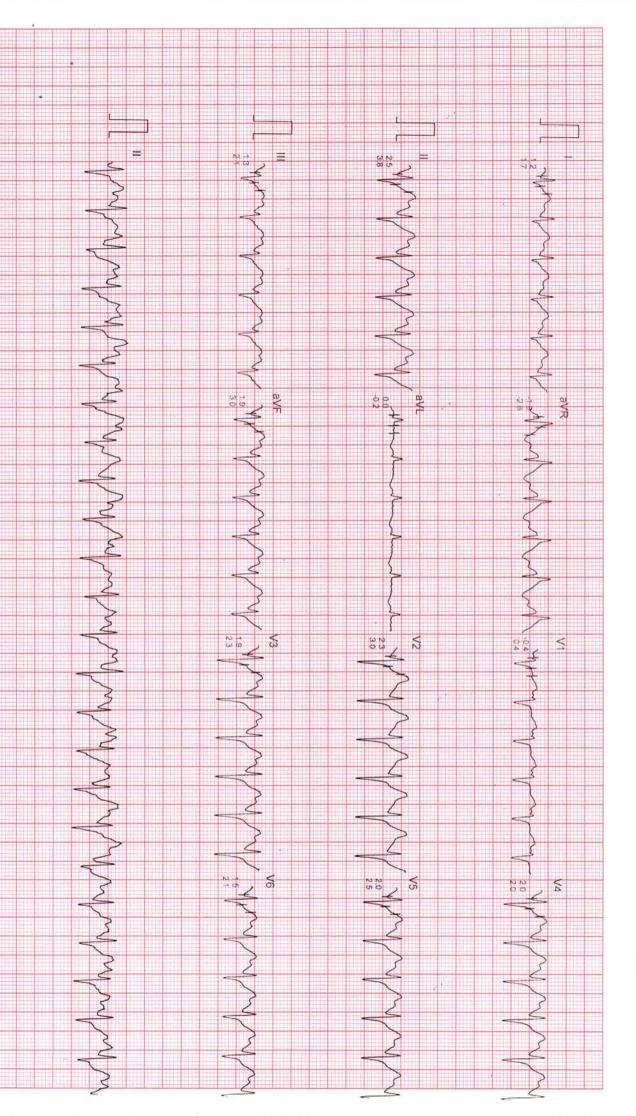
Mr. KUMAR OMENDRA I.D.: 293 AGE/SEX: 43/M RECORDED: 19- 4-2024 11:51

RATE: 149 BPM B.P.: 140/84 mmHg

BRUCE
PEAK EXERCISE
PHASE TIME: 6:01
STAGE TIME: 0:01

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

LINKED MEDIAN



DR. CHARU KOHLI CLINIC

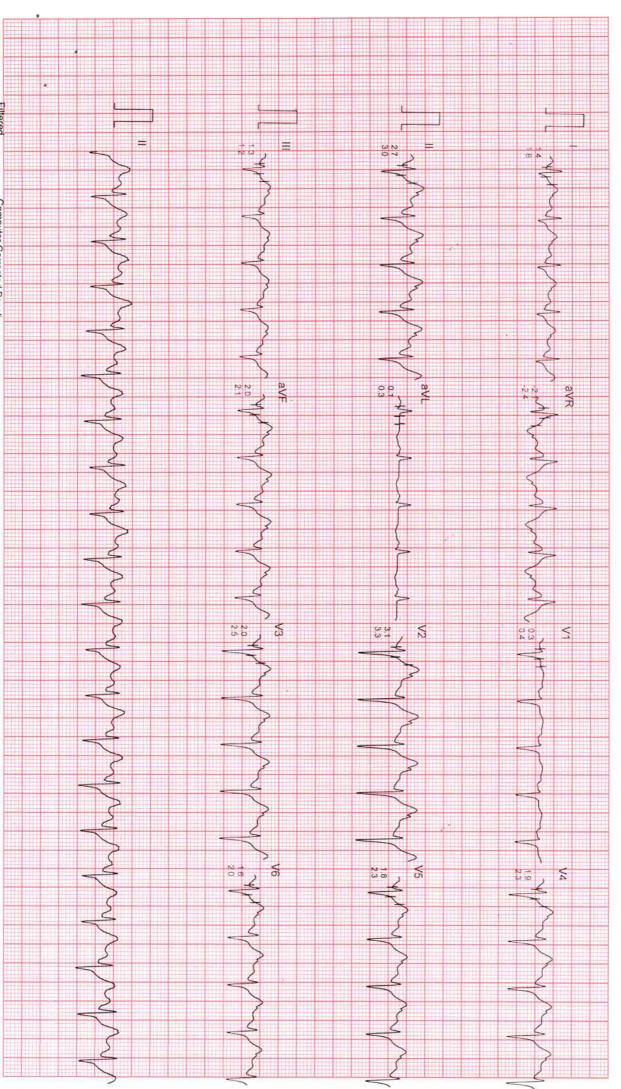
BRUCE
RECOVERY
PHASE TIME: 0:59

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

LINKED MEDIAN

Mr. KUMAR OMENDRA I.D.: 293 AGE/SEX: 43/M RECORDED: 19-4-2024 11:51

RATE: 124 BPM B.P.: 140/84 mmHg



25mm/sec 10mm/mV

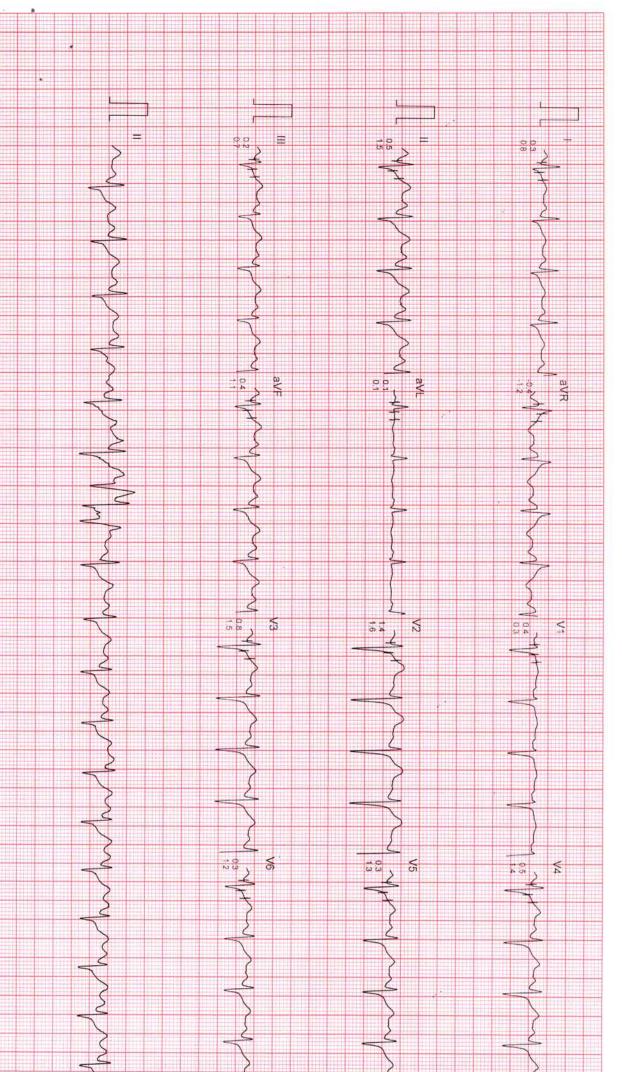
DR. CHARU KOHLI CLINIC
BRUCE
RECOVERY
PHASE TIME: 2:59

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

LINKED MEDIAN

Mr. KUMAR OMENDRA I.D. : 293 AGE/SEX : 43/M RECORDED: 19- 4-2024 11:51

RATE: 112 BPM B.P.: 130/80 mmHg



Filtered

DR. CHARU KOHLI CLINIC

BRUCE
RECOVERY
PHASE TIME: 5:59

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

LINKED MEDIAN

RATE: 99 BPM B.P.: 110/80 mmHg

Mr. KUMAR OMENDRA I.D. : 293 AGE/SEX : 43/M RECORDED : 19- 4-2024 11:51

Computer Corrected Baseline 25mm/sec 10mm/mV CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214 V4



### Dr.Charu Kohli s Clinic

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

NAME : OMENDRA KUMAR

AGE/SEX: 43Y/M

DATE : 19.04.2024

### 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

DR. CHARU KOHLI MBBS, DMRD

Cham Kohli

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.







C-234, Chakrabarti Vithi Rd, Block C, Defence Colony, New Delhi, Delhi 110049, India Lat 28.570734° Long 77.229923°

19/04/24 08:53 AM GMT +05:30





C-234, Defence Colony, New Delhi - 110024 Phone: 011-41550792, 24332759, 24336960

E-mail: drcharukohli@yahoo.com

Facebook.com/Dr.Charukohli

Registration No.	10241078	Mobile No.	9968255997
Patient Name	Mr. OMENDRA KUMAR	Registration Date/Time	19/04/2024 08:58:24
Age / Sex	42 Yrs Male	Sample Collected Date/Time	19/04/2024 11:25:07
Ref By / Hospital	MEDIWHEEL	Report Date/Time	19/04/2024 14:50:14
Collected At	DCKC	Printed Date/Time	19/04/2024 16:39:24

### **HAEMATOLOGY**

Complete Blood Count (CBC)			
Haemoglobin (Hb) ,EDTA Method : Colorimetric	13.1	g/dL	13.0 - 17.0
Total Leucocyte Count (TLC) ,EDTA Method : Electric impedence	08.8	10^9 /L	04.0 - 11.0
Red Blood Cell (RBC) ,EDTA  Method: Electric impedence	4.56	10^6 /uL	4.50 - 5.50
Hematocrit (HCT /PCV) ,EDTA  Method: Pulse height detection	39.9	%	40.0 - 50.0
Mean Corp Volume (MCV) ,EDTA Method : Calculated	87.6	fL	83.0 - 101.0
Mean Corp Hb (MCH) ,EDTA  Method: Calculated	28.7	pg	27.0 - 32.0
Mean Corp Hb Conc (MCHC) ,EDTA Method: Calculated	32.8	g/dL	31.5 - 34.5
Platelet Count(PLT) ,EDTA  Method: Electric impedence/Microscopy	245.00	10^3 /uL	150.00 - 410.00
RDW- CV% ,EDTA	13.5	%	11.6 - 14.0
Differential Leucocyte Count  Method: Microscopy			
Neutrophil ,EDTA	56.0	%	40.0 - 80.0
Lymphocyte ,EDTA	37.0	%	20.0 - 45.0
Eosinophil ,EDTA	2.0	%	1.0 - 6.0
Monocyte ,EDTA	5.0	%	2.0 - 10.0
Basophil ,EDTA	0.0	%	0.0 - 2.0
ESR ,EDTA	15	mm/Ist hr.	00 - 15

Page No: 1 of 10

Method: Westergreen

Checked By:- POOJA





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E-mail: drcharukohli@yahoo.com

Facebook.com/Dr.Charukohli

Registration No.	10241078	Mobile No.	9968255997
Potiont Nome	M. OMENIDDA KIIMAD	Pagistration Data/Time	10/04/2024 08:5

19/04/2024 08:58:24 Patient Name Registration Date/Time Mr. UMENDKA KUMAK 42 Yrs Male Sample Collected Date/Time 19/04/2024 11:25:07 Age / Sex Ref By / Hospital **MEDIWHEEL** Report Date/Time 19/04/2024 16:18:20 Collected At **DCKC** Printed Date/Time 19/04/2024 16:39:24

Test Name Value Unit Biological Ref Interval

Blood Group ABO ,EDTA "A"

Method: Forward Grouping

Rh Typing ,EDTA POSITIVE Method : Forward Grouping

**HbA1c** ,EDTA 6.6 %

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 preceding 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.

Page No: 2 of 10

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C-234, Defence Colony, New Delhi - 110024 Phone: 011-41550792, 24332759, 24336960

E-mail: drcharukohli@yahoo.com Facebook.com/Dr.Charukohli

Registration No. 10241078		Mobile No.	9968255997
Patient Name	Mr. OMENDRA KUMAR	Registration Date/Time	19/04/2024 08:58:24
Age / Sex	42 Yrs Male	Sample Collected Date/Time	19/04/2024 11:25:07
Ref By / Hospital	MEDIWHEEL	Report Date/Time	19/04/2024 15:31:10
Collected At	DCKC	Printed Date/Time	19/04/2024 16:39:24

**Test Name** Unit Value **Biological Ref Interval** 

### **BIOCHEMISTRY**

### LIPID PROFILE

Total Lipids ,Serum Plain	299	mg/dl	400 - 700
Serum Cholesterol ,Serum Plain Method : CHOD-POD	115	mg/dl	0 - 200
Serum Triglycerides ,Serum Plain Method : GPO-POD	69	mg/dl	60 - 165
Serum HDL Cholesterol ,Serum Plain Method : Direct Method	41	mg/dl	40 - 70
Serum LDL Cholesterol ,Serum Plain Method : Calculated	60.2	mg/dl	30.0 - 100.0
Serum VLDL Cholesterol ,Serum Plain Method : Calculated	13.8	mg/dl	24.0 - 45.0
Total CHO/HDLCholesterol Ratio ,Serum Plain Method : Calculated	2.80		
LDL/HDL Cholesterol Ratio ,Serum Plain	1.47		

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

Desirable : Less than 200 mg/dl

Method : Calculated

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.

10.0

Triglycerides

Female 40 - 140 Male 60 - 165

Adult levels: Optimal

<100 mg/dL

100 -129 mg/dL

Near Optimal/ above optimal Borderline high

130 - 159 mg/dL

160 - 189 mg/dL High

### KIDNEY FUNCTION TEST (KFT)

**POOJA** 

Method: Urease -UV	19.0	mg/ai	15.0 - 45.0
Serum Creatinine ,Serum Plain	0.67	mg/dl	0.40 - 1.50

Checked By :-

DR.NEELU CHHABRA

MD. PATHOLOGIST





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E-mail: drcharukohli@yahoo.com

[] Facebook.com/Dr.Charukohli

Registration No. 10241078		Mobile No.	9968255997
Patient Name	Mr. OMENDRA KUMAR	Registration Date/Time	19/04/2024 08:58:24
Age / Sex	42 Yrs Male	Sample Collected Date/Time	19/04/2024 11:25:07
Ref By / Hospital	MEDIWHEEL	Report Date/Time	19/04/2024 15:32:42
Collected At	DCKC	Printed Date/Time	19/04/2024 16:39:24

Test Name	Value	Unit	Biological Ref Interval
Serum Uric Acid ,Serum Plain Method : Uricase- POD	3.86	mg/dl	3.40 - 7.00
Serum Sodium ,Serum Plain Method : ISE Direct	139.0	mmol/L	135.0 - 148.0
Serum Potassium ,Serum Plain Method : ISE Direct	4.78	mmol/L	3.50 - 5.00
Serum Chloride ,Serum Plain Method : ISE DIRECT	101.00	mmol/L	97.00 - 107.00
Serum Calcium ,Serum Plain Method : Arsenazo III	8.90	mg/dl	New Born : 7.8 - 11.2 mg/dl Adult : 8.2 - 10.6 mg/dl

Page No: 4 of 10

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E-mail: drcharukohli@yahoo.com

[] Facebook.com/Dr.Charukohli

Registration No.	Registration No. 10241078 Mobile No.		9968255997
Patient Name	Mr. OMENDRA KUMAR	Registration Date/Time	19/04/2024 08:58:24
Age / Sex	42 Yrs Male	Sample Collected Date/Time	19/04/2024 11:25:07
Ref By / Hospital	MEDIWHEEL	Report Date/Time	19/04/2024 14:39:14
Collected At	DCKC	Printed Date/Time	19/04/2024 16:39:24

Test Name	Value	Unit	Biological Ref Interval
LIVER PROFILE / LFT			
Serum Bilirubin (Total) ,Serum Plain Method : DSA Method	0.61	mg/dl	0.00 - 1.20
Serum Bilirubin (Direct) ,Serum Plain Method : DSA Method	0.28	mg/dl	0.00 - 0.30
Serum Bilirubin (Indirect) ,Serum Plain Method : Calculated Parameter	0.33	mg/dl	0.00 - 0.60
SGOT ,Serum Plain Method : IFCC/KINETIC	37.7	IU/l	Males: Upto 46 IU/l Females: Upto 40 IU/l
SGPT ,Serum Plain  Method : IFCC/KINETIC	50.1	IU/l	Upto 49 IU/l
Serum Alkaline Phosphatase ,Serum Plain Method : DEA Method	76.0	IU/l	30.0 - 120.0
SerumTotal Protein ,Serum Plain Method : Biuret Method	7.10	gm/dl	6.00 - 8.50
Serum Albumin ,Serum Plain Method : BCG Method	4.40	gm/dl	3.20 - 5.50
Globulin ,Serum Plain  Method : Calculated	2.70	gm/dl	2.00 - 4.10
A/G Ratio ,Serum Plain  Method : Calculated	1.63		1.00 - 2.10
Serum GGTP ,Serum Plain Method : G-Glutamyl Transferase	43.0	U/L	0.0 - 50.0

Page No: 5 of 10

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E-mail: drcharukohli@yahoo.com

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Registration No.	10241078	Mobile No.	9968255997
Patient Name	Mr. OMENDRA KUMAR	Registration Date/Time	19/04/2024 08:58:24
Age / Sex	42 Yrs Male	Sample Collected Date/Time	19/04/2024 11:25:07
Ref By / Hospital	MEDIWHEEL	Report Date/Time	19/04/2024 14:27:41
Collected At	DCKC	Printed Date/Time	19/04/2024 16:39:24

Test Name	Value	Unit	Biological Ref Interval
Blood Sugar (Fasting) ,Plasma F Method : GOD POD	120.4	mg/dl	70.0 - 110.0
Blood Sugar (PP) ,Plasma PP  Method: GOD POD  Comment:-	152.1	mg/dl	70.0 - 140.0

Excluding alimentary hypoglycemia, renal glycosuria, hereditary fructose intolerance and galactosemia. possible cause of PP reactive hypoglycemia (PRH) (low post prandial glucose level) include high senstivity, exaggerated response to insulin like peptide -1, defect in counter regulation very lean ar anxious individuals, after massive weight reduction and women with lower body over weight etc..

Page No: 6 of 10

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Registration No.	10241078	Mobile No.	9968255997
Patient Name	Mr. OMENDRA KUMAR	Registration Date/Time	19/04/2024 08:58:24
Age / Sex	42 Yrs Male	Sample Collected Date/Time	19/04/2024 11:25:07
Ref By / Hospital	MEDIWHEEL	Report Date/Time	19/04/2024 14:35:50
Collected At	DCKC	Printed Date/Time	19/04/2024 16:39:24

### **IMMUNOASSAY**

### TOTAL THYROID PROFILE

Total T3 ,Serum Plain	1.43	ng/mL	0.69 - 2.15
Total T4 ,Serum Plain	8.58	ug/dl	5.20 - 12.70
TSH	3.99	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 hoursbefore 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 dayhas 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.

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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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





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Registration No.	egistration No. 10241078 Mobile No.		9968255997
Patient Name	Mr. OMENDRA KUMAR	AR Registration Date/Time	
Age / Sex	42 Yrs Male	Sample Collected Date/Time	19/04/2024 11:25:07
Ref By / Hospital	MEDIWHEEL	Report Date/Time	19/04/2024 14:35:50
Collected At	DCKC	Printed Date/Time	19/04/2024 16:39:24

Total PSA ,Serum Plain

0.64

ng/ml

0.00 - 4.00

Increased Value is seen in Benign Prostatic Hypertrophy(BPH), Prostatitis, or Prostate Cancer.

When total PSA concentration is <2.0 ng/ml, the probability of prostate cancer in asymptomatic men is low.

When total PSA concentration is >10.0 ng/mL, the probability of cancer is high and prostate biopsy is generally recommended.

The Total PSA range of 4.0 to 10.0 ng/ml has been described as a diagnostic "gray zone," in which the Free:Total PSA ratio helps to determine the relative risk of prostate cancer.

Therefore, some urologists recommend using the Free:Total ratio to help select which men should undergo biopsy.

However even a negative result of prostate biopsy does not rule-out prostate cancer. Up to 20% of men with negative biopsy results have subsequently been found to have cancer.

Higher total PSA levels and lower percentages of free PSA are associated with higher risks of prostate cancer. Based on free:total PSA ratio: the percent probability of finding prostate cancer on a needle biopsy by age in years:

Free PSA as a percent of Total PSA	Probabilty of carcinoma prostate		
	when		
	Total PSA is 4.1 - 10.0 ng / ml		
>=	26 8 %		
20 - 25	16 %		
15 - 20	20 %		
10 - 15	28 %		
0 - 10	56 %		

### Comments:-

False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy.PSA total and free levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies and nonspecific protein binding.Results obtained with different assay kits cannot be used interchangeably.All results should be corelated with clinical findings and results of other investigations

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Registration No.	10241078	Mobile No.	9968255997
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**Patient Name** Mr. OMENDRA KUMAR Registration Date/Time 19/04/2024 08:58:24 Sample Collected Date/Time 19/04/2024 11:25:07 Age / Sex 42 Yrs Male Ref By / Hospital **MEDIWHEEL** Report Date/Time 19/04/2024 15:36:31 Collected At **DCKC** Printed Date/Time 19/04/2024 16:39:24

Test Name Value Unit Biological Ref Interval

### **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	6.0		5.0
Specific Gravity ,URINE	1.020		1.000
Protein (Strip Method) ,URINE	Nil		Nil
Glucose (Strip Method) ,URINE	Nil		Nil
URE MICROSCOPY EXAMINATION			
Pus Cells ,URINE	0 - 2	/HPF	0 - 1
Epithelial Cells ,URINE	1 - 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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**NIL** 

### DR. CHARU KOHLI'S CLINIC

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**Registration No.** 10241078 Mobile No. 9968255997

**Patient Name** Mr. OMENDRA KUMAR Registration Date/Time 19/04/2024 08:58:24 Sample Collected Date/Time 19/04/2024 11:25:07 Age / Sex 42 Yrs Male Ref By / Hospital **MEDIWHEEL** Report Date/Time 19/04/2024 15:36:31 Collected At **DCKC** Printed Date/Time 19/04/2024 16:39:24

Test Name Value Unit Biological Ref Interval

URE SUGAR (FASTING) ,URINE

URE SUGAR PP ,URINE NIL

\*\*\* End of Report \*\*\*

Page No: 10 of 10

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### DR. CHARU KOHLI CLINIC C - 234 DEFENCE COLONY NEW DELHI - 110024

### KUMAR OMENDRA

Birthdate: 03-08-1980 Referred by:



