



ZENA
Healthcare Services
Professional | Accuracy | Precision

Professional Accuracy Precision

Regd. No. : 1834

ZENA HEALTHCARE SERVICES

(A Unit of Zena Enterprises)

EYE REPORT

NAME : LIPSA NANDA

DATE : 06.04.2023

AGE : 31YRS

SEX : FEMALE

WITH GLASSES

	RT EYE	LT EYE
COLOUR	NORMAL	NORMAL
NEAR	6/6	6/6
FAR	6/6	6/6

Dr. M. K. HOTA
M.B.B.S.
REGD. SIGNATURE

For Home Collection Please Call at Number :

Zena Healthcare Services

Plot No. 119, Opp. Water tank Lane, Near Police Phandi, Saheed Nagar, Bhubaneswar-07
Ph. : 0674-2549902, 9692276908, 8337964922, E-mail : zenahealthcare@gmail.com

Website : www.zenacare.in

Wishing Good Health

MEDICAL CERTIFICATE

Date :- 06.04.2023

NAME

Mrs. LIPSA NANDA

MEDICAL INFORMATION

Height:- 154cm	Age:-31yrs
Weight:- 58kg	Sex:- FEMALE
Blood Pressure:- 111/71mmhg	Pulse:-87/min

Body Mass Index(BMI)

24.5

Physical Fitness certificate

This is to certify that Mrs. LIPSA NANDA, aged 31 yrs, reports is Normal and I have found her FIT.

Signature **Dr.M.K.HOTA**
M.B.S.
REGD No.6993

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ID: 279 CASE:
AGE: 31 Y M D

LIPSA NANDA
FEMALE

06/04/2023 12:43
ZENA HEALTHCARE
PLOT -119, SAHIDNAGAR, BHUBANESWAR

K9

Cms STINUS TACHYCARDIA

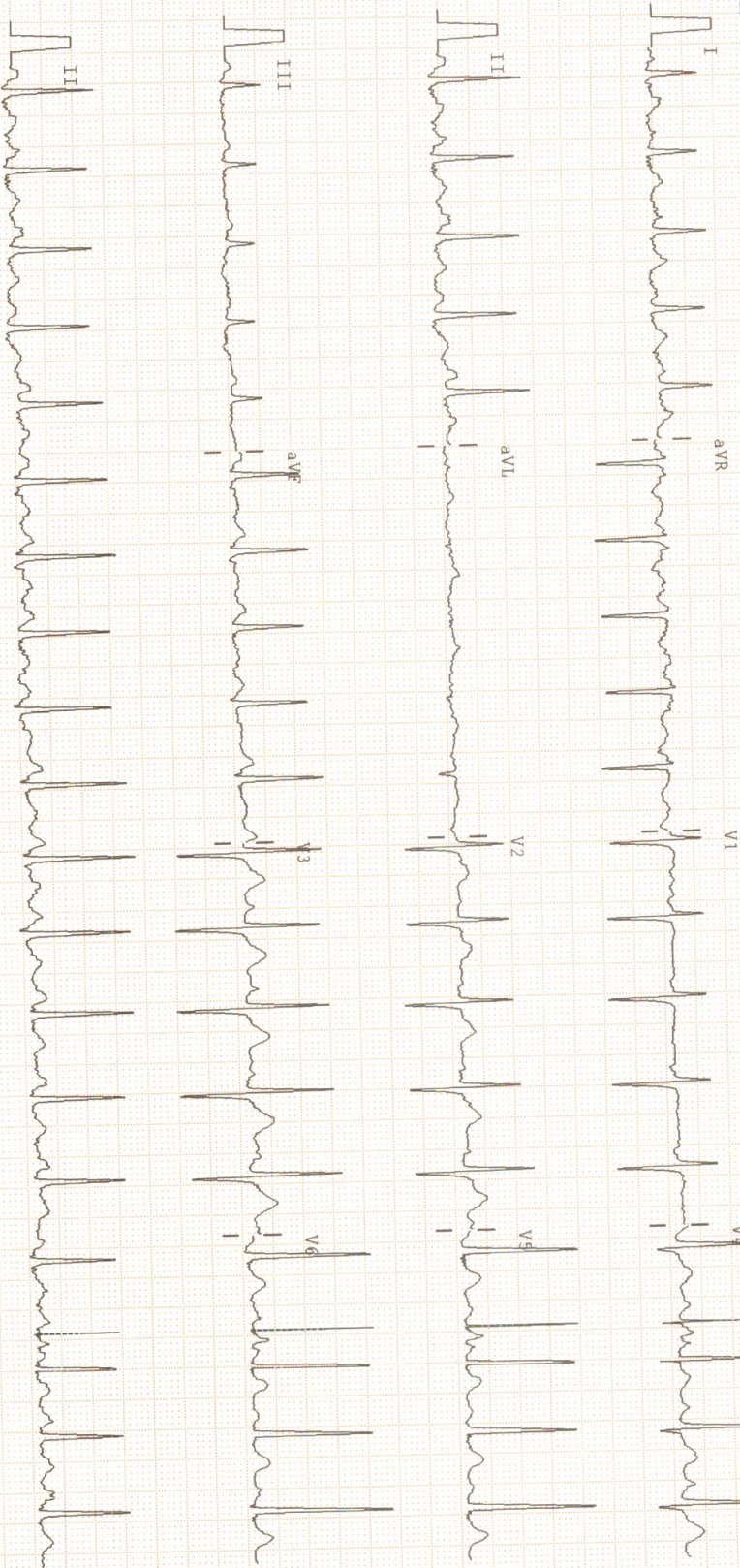
RATE : 120 bpm
R-R : 497 ms
P-R : 124 ms
QRS : 80 ms
QT : 304 ms
QTc : 409 ms

--AXIS--
P : 70°
QRS : 63°
T : 27°

12 SL: REPORT FORMAT: 3x4+1L SQ

REF:

DR:



25mm/sec 10mm/mV Notch: ON

BLC: ON

0.05-35Hz

ALLENGERS PISCES 1012(VER-1.9) CLINICALLY CORRELATE THE FINDS

Patient Name : MRS. LIPSA NANDA

Age / Gender : 31 years / Female

Patient ID : 15873

Referral : MEDI WHEEL

Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 03:19 PM

Sample ID :



18254

Test Description	Value(s)	Reference Range	Unit
<u>Glucose, Fasting (FBS)</u>			
Glucose fasting Method : Fluoride Plasma-F, Hexokinase	102.38	75 - 115	mg/dL
<u>Glucose, Post Prandial (PP)</u>			
Blood Glucose-Post Prandial Method : Hexokinase	120.77	70 - 140	mg/dL
<u>BUN, Serum</u>			
BUN-Blood Urea Nitroge Method : Serum, Urease	12.56	10 - 50	mg/dL
<u>Creatinine</u>			
Creatinine Method : Serum, Jaffe	0.91	0.60 - 1.30	mg/dL
<u>Uric acid, Serum</u>			
Uric Acid Method : Uricase, Colorimetric	5.31	3.4 - 7.0	mg/dL

END OF REPORT

Lab technician


Dr. Kundan Kumar Sahoo
CONSULTANT PATHOLOGIST /
MICROBIOLOGIST

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Age / Gender : 31 years / Female

Patient ID : 15873

Referral : MEDI WHEEL

Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 02:08 PM

Sample ID :



18254

Test Description	Value(s)	Reference Range	Unit
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ESR, Erythrocyte Sedimentation Rate

ESR - Erythrocyte Sedimentation Rate	13	0 - 20	mm/hr
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Method : EDTA Whole Blood, Manual Westergren

Interpretation:

- It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.
- It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis and polymyalgia rheumatica.
- It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

Blood Group ABO & Rh Typing, Blood

Blood Group (ABO typing) Method : Manual-Hemagglutination	"A"
RhD Factor (Rh Typing) Method : Manual hemagglutination	Negative

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Age / Gender : 31 years / Female

Patient ID : 15873

Referral : MEDI WHEEL

Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 03:18 PM

Sample ID :



18254

Test Description	Value(s)	Reference Range	Unit
Complete Blood Count			
Hemoglobin (Hb)	13.0	12.0 - 15.0	gm/dL
Erythrocyte (RBC) Count	4.84	3.8 - 4.8	mil/cu.mm
Packed Cell Volume (PCV)	42.1	36 - 46	%
Mean Cell Volume (MCV)	86.98	83 - 101	fL
Mean Cell Haemoglobin (MCH)	26.86	27 - 32	pg
Mean Corpuscular Hb Conc. (MCHC)	30.88	31.5 - 34.5	g/dL
Red Cell Distribution Width (RDW)	12.0	11.6 - 14.0	%
Total Leucocytes (WBC) Count	7200	4000-10000	cell/cu.mm
Neutrophils	66	40 - 80	%
Lymphocytes	28	20 - 40	%
Monocytes	05	2 - 10	%
Eosinophils	01	1 - 6	%
Basophils	00	1-2	%
Platelet Count	195	150 - 410	10 ³ /ul
Mean Platelet Volume (MPV)	12.1	7.2 - 11.7	fL
PCT	0.24	0.2 - 0.5	%
PDW	17.6	9.0 - 17.0	%

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Age / Gender : 31 years / Female

Patient ID : 15873

Referral : MEDI WHEEL

Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 03:21 PM

Sample ID :



18254

Test Description	Value(s)	Reference Range	Unit
<u>LFT, Liver Function Test</u>			
Bilirubin - Total Method : Serum, Jendrassik Grof	0.56	0.00 - 1.00	mg/dL
Bilirubin - Direct Method : Serum, Diazotization	0.11	0.00 - 0.20	mg/dL
Bilirubin - Indirect Method : Serum, Calculated	0.45	0.10 - 0.80	mg/dL
SGOT Method : Serum, UV with P5P, IFCC 37 degree	12.41	8 - 33	U/L
SGPT Method : Serum, UV with P5P, IFCC 37 degree	19.62	3 - 35	U/L
GGT-Gamma Glutamyl Transpeptidase Method : Serum, G-glutamyl-carboxy-nitroanilide	7.21	< 38	U/L
Alkaline Phosphatase Method : PNPP-AMP Buffer/Kinetic	68.10	42-141	U/L
Total Protein Method : Serum, Biuret, reagent blank end point	7.02	6.60 - 8.70	g/dL
Albumin Method : Serum, Bromocresol green	4.11	3.50 - 5.30	g/dL
Globulin Method : Serum, EIA	2.91	2.00-3.50	g/dL
A/G Ratio Method : Serum, EIA	1.41	1.2 - 2.2	

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Age / Gender : 31 years / Female

Patient ID : 15873

Referral : MEDI WHEEL

Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 03:32 PM

Sample ID :



18254

Test Description	Value(s)	Reference Range	Unit
<u>Lipid Profile</u>			
Cholesterol-Total Method : Spectrophotometry	180.44	Desirable level < 200 Borderline High 200-239 High >or = 240	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	100.23	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
HDL Cholesterol Method : Serum, Direct measure-PEG	45.11	Normal: > 40 Major Risk for Heart: < 40	mg/dL
LDL Cholesterol Method : Enzymatic selective protection	115.28	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190	mg/dL
VLDL Cholesterol Method : Serum, Enzymatic	20.05	6 - 38	mg/dL
CHOL/HDL Ratio Method : Serum, Enzymatic	4.0	3.5 - 5.0	
LDL/HDL Ratio Method : Serum, Enzymatic	2.56	2.5 - 3.5	

Note:

8-10 hours fasting sample is required.

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Patient ID : 15873

Referral : MEDI WHEEL

Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 02:08 PM

Sample ID :



18254

Test Description	Value(s)	Reference Range	Unit
<u>Urine(R/M) Routine Examination of Urine</u>			
<u>General Examination</u>			
Colour	PALE YELLOW	Pale Yellow	
Transparency (Appearance)	CLEAR	Clear	
Deposit	Absent	Absent	
Reaction (pH)	Acidic 5.0	4.5 - 7.0	
Specific gravity	1.020	1.005 - 1.030	
<u>Chemical Examination</u>			
Urine Protein (Albumin)	Absent	Absent	
Urine Glucose (Sugar)	Absent	Absent	
<u>Microscopic Examination</u>			
Red blood cells	Absent	0-4	/hpf
Pus cells (WBCs)	2 - 4 /HPF	0-9	/hpf
Epithelial cells	1 - 2 /HPF	0-4	/hpf
Crystals	Absent	Absent	
Cast	Absent	Absent	
Bacteria	Absent	Absent	

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Patient ID : 15873

Referral : MEDI WHEEL

Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 02:07 PM

Sample ID :



Test Description	Value(s)	Reference Range	Unit
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HbA1c, Glycosylated Hemoglobin

HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD	5.54		%
Method : (HPLC, NGSP certified)			
Estimated Average Glucose :	112.30	-	mg/dL

Interpretation

As per American Diabetes Association (ADA)	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	<5.7
At risk (Prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemc control	Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemc control as compared to blood and urinary glucose determinations.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

HbA1c(%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183
9	212

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Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 02:07 PM

Sample ID :



Test Description	Value(s)	Reference Range	Unit
10	240		
11	269		
12	298		

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Referral : MEDI WHEEL

Collection Time : 06/04/2023, 10:10 AM

Reporting Time : 06/04/2023, 03:24 PM

Sample ID :



Test Description	Value(s)	Reference Range	Unit
Thyroid Profile (T3, T4, TSH)			
T3-Total Method : CLIA	1.40	0.87 - 2.73	ng/dL
T4-Total Method : CLIA	7.85	6.09 - 12.23	ug/dL
TSH-Ultrasensitive Method : CLIA	2.78	0.45 - 4.5 First Trimester : 0.1-2.5 Second Trimester : 0.2-3.0 Third trimester : 0.3-3.0	uIU/mL

Interpretation

TSH	T3	T4	Suggested Interpretation for the Thyroid Function Tests Pattern
Raised	Within range	Within range	Raised Within Range Within Range .Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. Subclinical Autoimmune Hypothyroidism. Intermittent 14 therapy for hypothyroidism .Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis Post thyroidectomy, Post radioiodine Hypothyroid phase of transient thyroiditis"
Raised or within range	Raised	Raised or within range	Interfering antibodies to thyroid hormones (anti-TPO antibodies) Intermittent 14 therapy or T4 overdose •Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics.
Decreased	Raised or within range	Raised or within range	Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & Range Range associated with Non-Thyroidal illness .Subclinical Hyperthyroidism .Thyroxine ingestion'
Decreased	Decreased	Decreased	Central Hypothyroidism .Non-Thyroidal illness .Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease). Multinodular goitre, Toxic nodule •Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased Within Rang	Raised	Within range	T3 toxicosis •Non-Thyroidal illness
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness In elderly the drop in T3 level can be upto 25%.

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Lab technician


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