

## MER-MEDICAL EXAMINATION REPORT

|                                           |                |
|-------------------------------------------|----------------|
| DATE OF EXAMINATION                       | 23/12/23       |
| NAME                                      | ASHISH AGARWAL |
| AGE                                       | 33Y/M          |
| HEIGHT                                    | 5.11FT         |
| WEIGHT                                    | 81KG           |
| BP                                        | 121/79         |
| ECG                                       | NORMAL         |
| X-RAY                                     | NORMAL         |
| PRESENT AILMENTS                          | NO             |
| DETAILS OF PAST AUMENTS (IF AY)           | NO             |
| COMMENTS/ADVICE :SHE/HE IS PHYSICALLY FIT | YES            |

A circular purple stamp with a handwritten signature in black ink over it. The stamp contains text around the perimeter, including 'M. B. B. S.' and 'M. D.'.

Signature With Stamp Of Medical Examiner



आशीष अग्रवाल  
 Ashish Agarwal  
 जन्म-तिथि / DOB : 26/04/1989  
 पुरुष / Male



7684 0475 0441

मेरा आधार, मेरी पहचान



राजस्थान राज्य सरकार  
 Government of Rajasthan

पता: S/O Ramniwas Agrawal,  
 sec-5 shastri nagar, gaushala  
 road, Dholpur, Dholpur,  
 Rajasthan, 328001

Address: S/O Ramniwas Agrawal, sec-5  
 shastri nagar, gaushala road, Dholpur,  
 Dholpur, Rajasthan, 328001

7684 0475 0441



1647



help@uidai.gov.in

www

www.uidai.gov.in

|           |                  |      |                     |
|-----------|------------------|------|---------------------|
| Name      | : Ashish agarwal | Age  | : 33yrs. / <b>M</b> |
| Thanks To | : Mediwheel      | Date | : 23/12/2023        |

## X-RAY CHEST (PA VIEW)

Both lung fields appear normal.

No e/o Koch's lesion or consolidation seen.

Both CP angles appear clear.

Both domes of diaphragm appear normal.

Heart size and aorta are within normal limits.

Bony thorax under vision appears normal.

Both hila appear normal.

*Consultant Radiologist*

(This report is not valid for any Medico-legal purpose)





The Pre-natal Diagnostic  
(57 of 1994)  
our hereby  
clinic  
diagnose  
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**Dr. Sharva Pandya**  
MBBS, M.S., (Ophthalmology)  
RMC Reg. No. : 021537  
**डॉ. शर्वा पण्ड्या**  
चरित नेत्र रोग विशेषज्ञ चर्जन

Ashish Agarwal

334/M

23/12/23

clo - For eye check up

DVA 6/9P  
6/3P

NVA N/18  
N/18

Colour vision -

RCC + 0.50 DS C/C  
+ 0.50 DS C/C

add + 2.25 N/C

*Sharva*  
**D.R. SHARVA PANDYA**  
MBBS, MS (OPHTH.)  
RMC : 021537 (MBBS) 007516 (MS.)  
JAI DRISHTI EYE HOSPITAL  
UDAIPUR (RA.)

चित्रकूट नगर, उदयपुर में हमारी  
नेत्र चिकित्सा सेवाएं शीघ्र उपलब्ध होगी।

Cosmetology Partner :

Jai Drishti Eye Hospital, 23A, Residency Road, Opp. Equitas Bank, Sardarpura, Udaipur  
जय दृष्टि आई हॉस्पिटल, 23-ए, रेजीडेन्सी रोड, एक्विटास बैंक के सामने, सरदारपुरा, उदयपुर





Summary

Ref. By :  
Medication :  
Objective :

Protocol : BRUCE  
History :

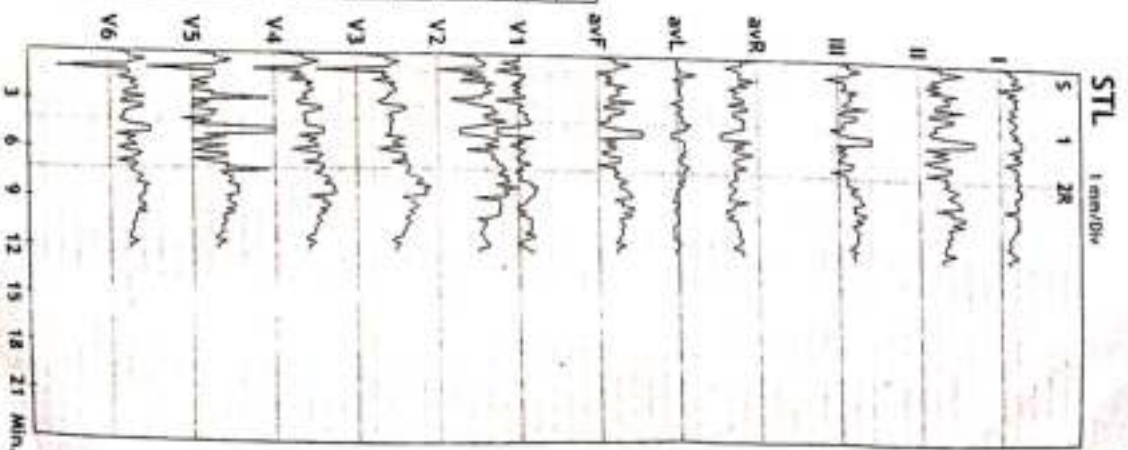
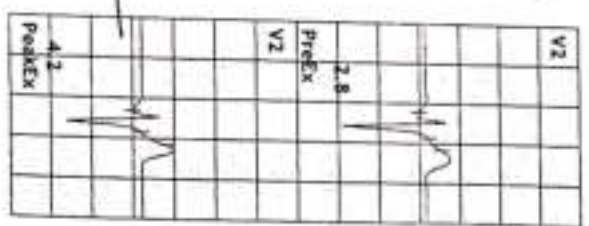
**KSHIPRA SCANS & LABS**  
**ZB COURT CHOURAHA UDAIPUR**  
230310Z246/Asish AGARWAL 33 Yrs/Male  
Date: 23-Dec-2023 02:44:59 PM

80 Kg/0 Cms

| Stage    | StageTime (min:sec) | PhaseTime (min:sec) | Speed (mph) | Grade (%) | METs | H.R. (bpm) | B.P. (mmHg) | R.P.P. x100 | PVC | Comments |
|----------|---------------------|---------------------|-------------|-----------|------|------------|-------------|-------------|-----|----------|
| Supine   |                     |                     |             |           | 1.0  | 131        | 130/80      | 170         | -   |          |
| Standing |                     |                     |             |           | 1.0  | 133        | 130/80      | 172         | -   |          |
| EXstart  |                     |                     |             |           | 1.0  | 124        | 130/80      | 161         | -   |          |
| Stage 1  | 3:00                | 3:01                | 1.7         | 10.0      | 4.7  | 149        | 140/80      | 208         | -   |          |
| Stage 2  | 3:00                | 6:01                | 2.5         | 12.0      | 7.1  | 120        | 150/88      | 180         | -   |          |
| PeakEx   | 0:04                | 6:05                | 3.4         | 14.0      | 7.2  | 164        | 150/88      | 246         | -   |          |
| Recovery | 1:00                |                     | 0.0         | 0.0       | 1.2  | 139        | 150/88      | 208         | -   |          |
| Recovery | 3:00                |                     | 0.0         | 0.0       | 1.0  | 139        | 130/80      | 180         | -   |          |
| Recovery | 5:00                |                     | 0.0         | 0.0       | 1.0  | 139        | 130/80      | 180         | -   |          |

Findings :

Exercise Time : 6:05 minutes  
 Max HR attained : 164 bpm 88% of Max Predictable HR 187  
 Max BP : 150/88(mmHg)  
 Workload attained : 7.2 (Fair Effort Tolerance )  
 No significant ST segment changes noted during exercise or recovery.  
 No Angina/Arrhythmia/S3/murmur  
 Final Impression : Test is negative for inducible ischaemia.  
 Maximum Depression: 1:39



*Negative*

STL 1 mm/Div





12 Lead + Comparison

2303102246/Ashish AGARWAL31 bpm  
33 Yrs/Male METS: 1.0  
80 Kg/0 Cms BP: 130/80

MPHR: 70% of 187  
Speed: 1.1 mph  
Grade: 0.0%

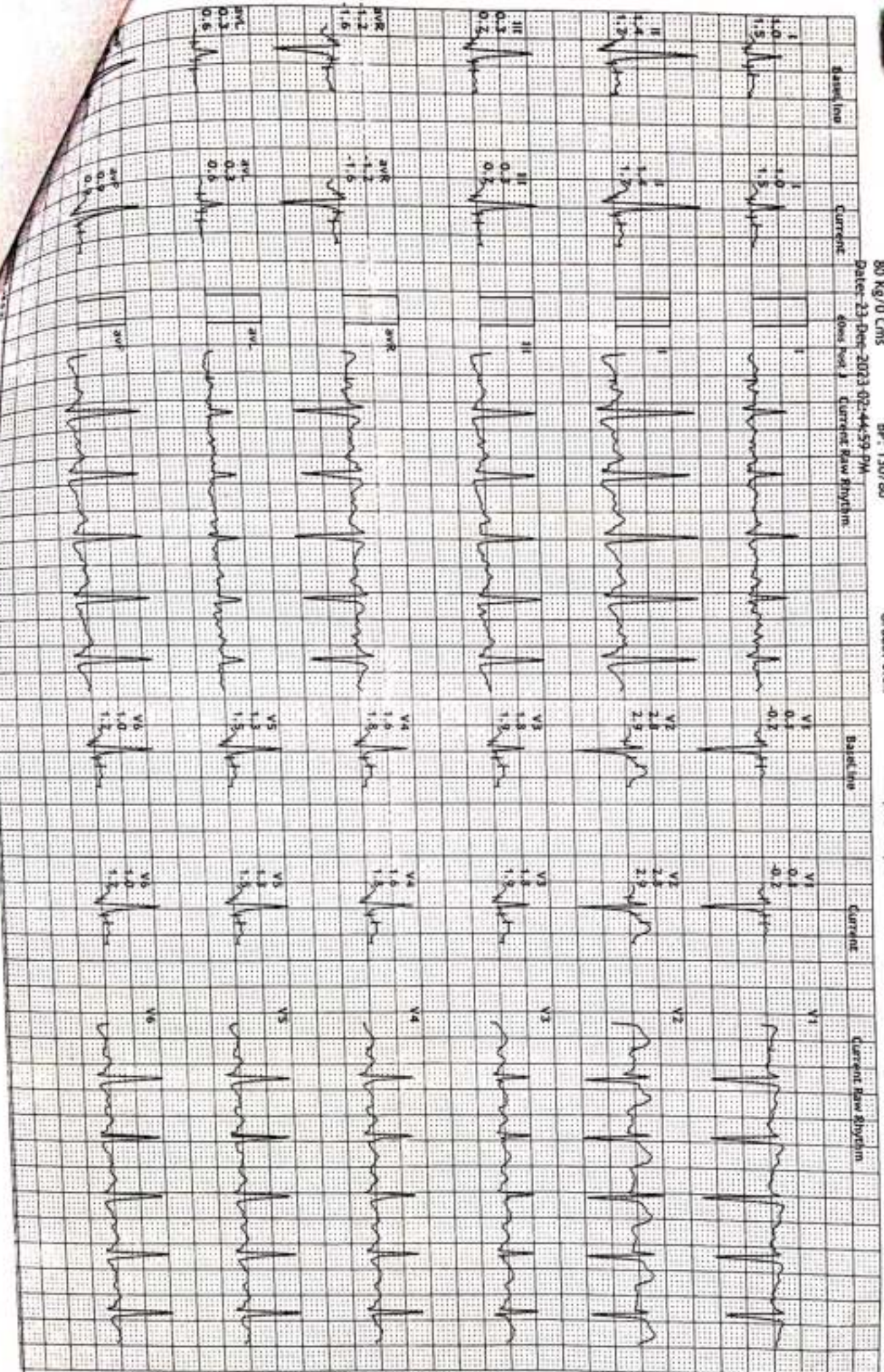
**KSHIPRA SCANS & LABS**  
2B COURT CHOURAHA UDAIPUR

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 01:07  
BLC :On  
Notch :On

**SUPINE**  
10.0 mm/mV  
25 mm/Sec.

Date: 23-Dec-2023 02:44:59 PM







12 Lead + Comparison

2303102246/Ashish AGARWAL 34 bpm  
33 Yrs/Male  
80 Kg/0 Cms

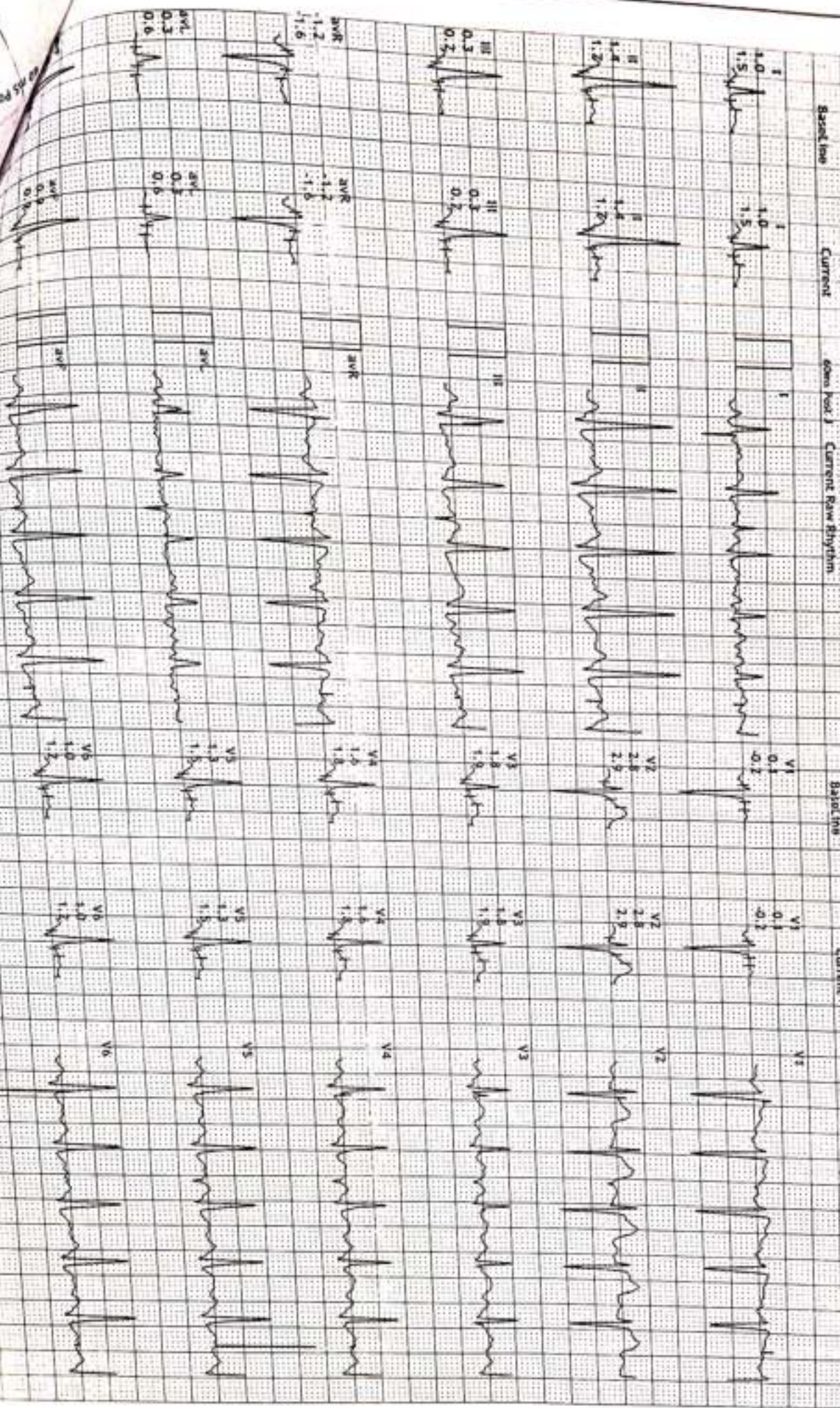
M/HR: 71% of 187  
Speed: 1.1 mph  
Grade: 0.0%

Raw ECG  
BRUCE  
11.0-100/Hz

Ex Time 01:10  
BLC -On  
Notch -On

STANDING  
10.0 mm/mv  
25 mm/Sec.

Date: 23-Dec-2023 02:44:59 PM



KSHIPRA SCANS & LABS  
2B COURT CHOURAHA UDAIPUR













12 Lead + Comparison

**KSHIPRA SCANS & LABS**  
2B COURT CHOURAHA UDAIPUR

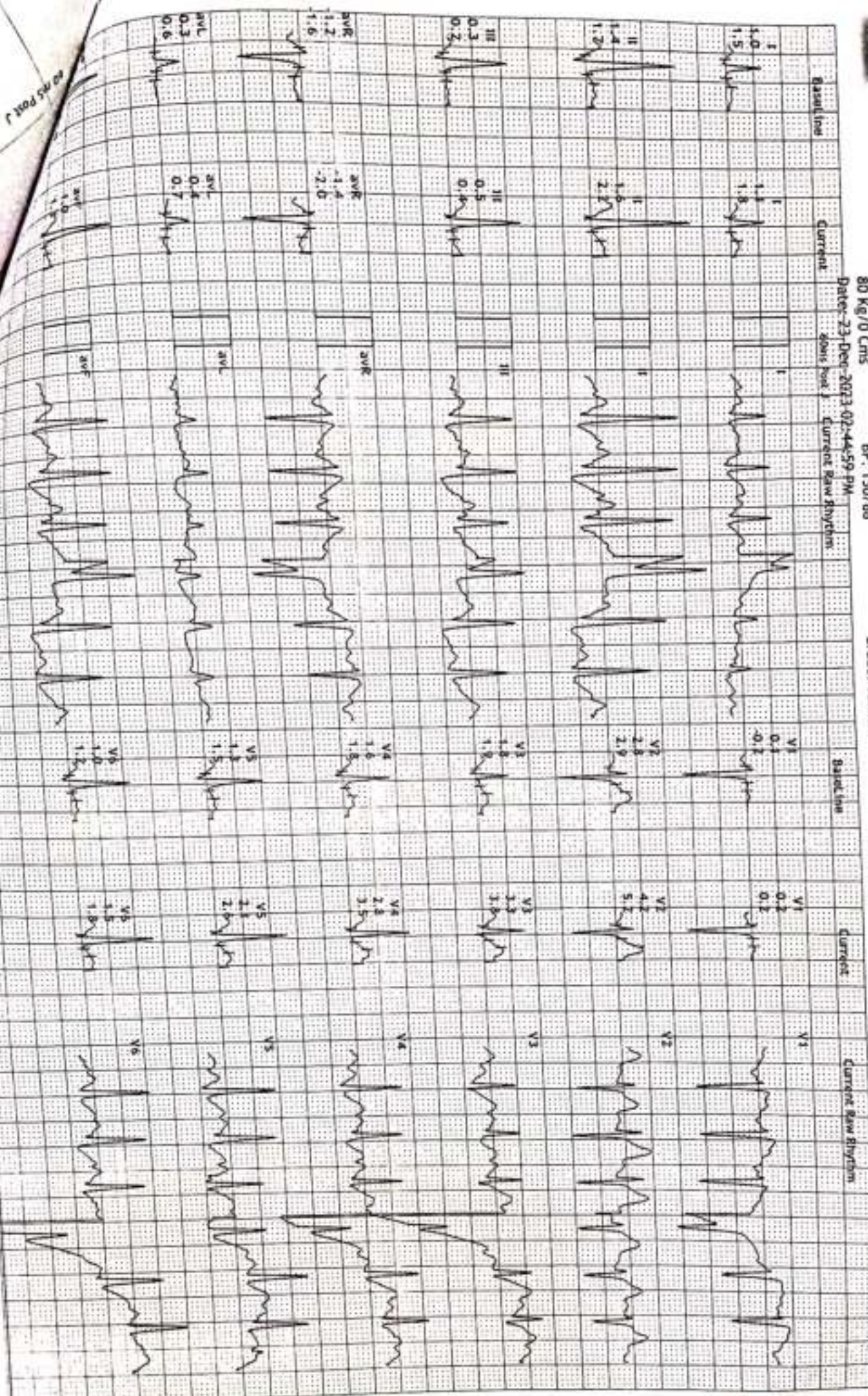
2303102246/Ashish AGARWAL 20 bpm  
33 Yrs/Male  
80 Kg/0 Cms

METS: 7.1  
BP: 150/88

MPHR: 64% of 187  
Speed: 2.5 mph  
Grade: 12.0%

Raw ECG  
BRUCE  
11.0-100)Hz

Ex Time 06:00  
BLC :On  
Notch :On  
Stage 2 ( 03:00 )  
10.0 mm/mV  
25 mm/Sec.



60 mm Post J





12 Lead + Comparison

KSHIPRA SCANS & LABS  
2B COURT CHOURAHA UDAIPUR

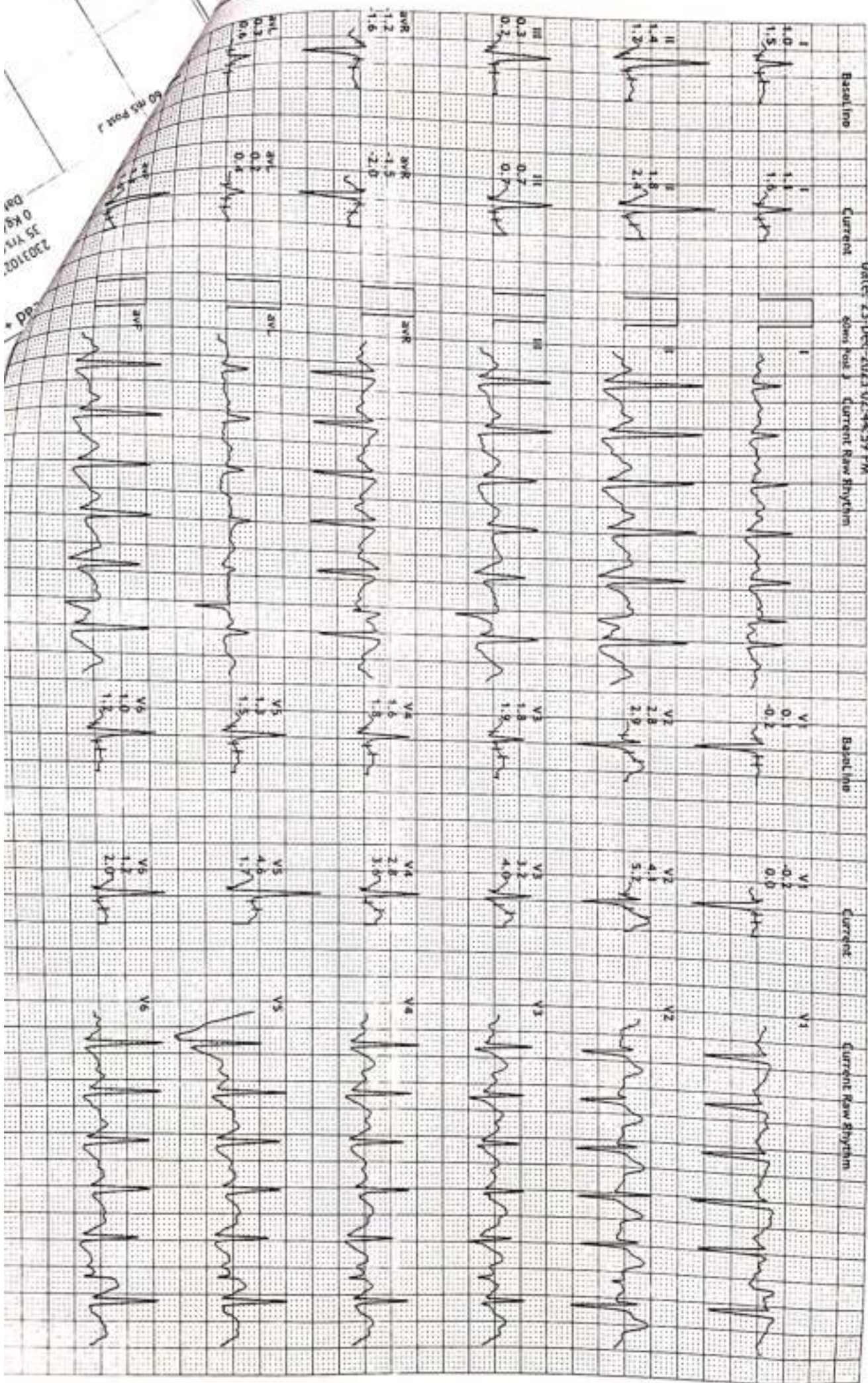
2303102246/Ashish AGARWAL 64 bpm  
33 Yrs/Male METS: 7.2  
80 Kg/0 Cms BP: 150/88  
Date: 23-Dec-2023 02:44:59 PM

MHR: 87% of 187  
Speed: 3.4 mph  
Grade: 14.0%

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 06:04  
BLC : On  
Notch : On

PeakEx  
10.0 mm/mV  
25 mm/Sec.



60 mm Box J

2303102  
35 Yrs/  
0 Kg/  
0cm





12 Lead + Comparison

2303102246/Ashish AGARWAL 41 bpm  
33 Yrs/Male  
80 Kg/0 Cms  
BP- 140/84

MPHR: 75% of 187  
Speed: 0.0 mph  
Grade: 0.0%

KSHIPRA SCANS & LABS  
2B COURT CHOURAHA UDAIPUR

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 06:04  
BLC :On  
Notch :On

Recovery : ( 02:00 )  
10.0 mm/mV  
25 mm/Sec.

Date: 23-Dec-2023 02:44:59 PM

From lead 1 Current Raw Rhythm

Current

Current Raw Rhythm

Baseline

Current

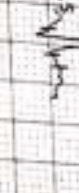
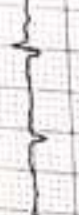
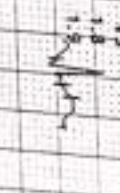
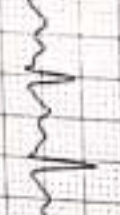
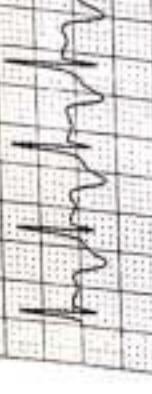
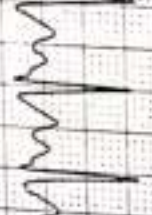
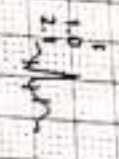
From lead 1

Current Raw Rhythm

Baseline

Current

Current Raw Rhythm



2303102246  
33 Yrs/Male  
80 Kg/0 Cms

Date: 23-Dec-2023





12 Lead + Comparison

2303102246/Ashish AGARWAL 38 bpm  
33 Yrs/Male  
80 Kg/0 Cms  
METS: 1.0  
BP: 130/80

APHR: 73% of 187  
Speed: 0.0 mph  
Grade: 0.0%

KSHIPRA SCANS & LABS  
2B COURT CHOURAHA UDAIPUR

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 06:04  
BLC : On  
Notch : On

Recovery : ( 04:00 )  
10.0 mm/mv  
25 mm/Sec

Date: 23-Dec-2023 02:44:59 PM

Lead I

Current

Baseline

Current Raw Rhythm

Lead II

Current

Baseline

Current Raw Rhythm

Lead III

Current

Baseline

Lead aVR

Current

Baseline

Current Raw Rhythm

Lead aVL

Current

Baseline

Current Raw Rhythm

Lead aVF

Current

Baseline

Current Raw Rhythm

Lead V1

Current

Baseline

Current Raw Rhythm

Lead V2

Current

Baseline

Current Raw Rhythm

Lead V3

Current

Baseline

Current Raw Rhythm

Lead V4

Current

Baseline

Current Raw Rhythm

Lead V5

Current

Baseline

Current Raw Rhythm

Lead V6

Current

Baseline

Current Raw Rhythm

Stage  
Supine  
Standing  
Exercise  
Start  
StageTime  
(mm:ss)

Record By :

avr

avf

v1

v2

v3

v4

v5

v6



|           |                      |      |               |
|-----------|----------------------|------|---------------|
| Name      | : Mr. Ashish Agarwal | Age  | : 33 Yrs. / M |
| Thanks To | : Mediwheel wellness | Date | : 23/12/2023  |

## ULTRASOUND STUDY OF WHOLE ABDOMEN

### LIVER

Liver is mild enlarged in size (16.9cm) & bright in echotexture. No focal mass lesion is seen. Intra hepatic biliary radicles are normal. Portal vein is normal in caliber.

### GALL BLADDER

Gall bladder is well distended. The wall thickness appears normal. No evidence of calculus or mass lesion is seen. C.B.D. appears normal.

### PANCREAS

Pancreas is normal in size, shape & echotexture. No focal mass lesion is seen.

### SPLEEN

Spleen is normal in size, shape & echotexture. No focal mass lesion is seen.

### BOTH KIDNEYS

Both kidneys are normal in size, shape & echotexture. Renal parenchyma appears normal. No evidence of hydronephrosis or cortical scarring is seen in both kidneys. There are few calculi seen in middle and lower calyx of both kidneys, average sizes measures 4-5 mm.

Right kidney measures : 12.0 x 5.4 cms.

Left kidney measures : 11.7 x 5.0 cms.

### URINARY BLADDER

Urinary bladder is well distended and appears normal in contour. The wall thickness appears normal.

### PROSTATE

Prostate is normal in size, shape and echotexture

No obvious abdominal lymphadenopathy is seen.

No free fluid is seen in peritoneal cavity.

### OPINION:

- Mild hepatomegaly with fatty changes grade I.
- Bilateral multiple renal calculi.

*BUT J*

Dr. Bharat Jain

MD (Radio-Diagnosis)

Consultant Radiologist

*N.B.: This is only a professional opinion and not the final diagnosis. MRI/CT is subject to variations due to technical limitations, hence correlation with clinical findings and other investigations should be carried out to know the true nature of illness*



ASHISH AGARWAL 33Y/M

Veal. Rate(BPM) : 79

PR Int.(ms) : 140

P/QRS/T Int.(ms) : 109 106 162

QT/QTc Int.(ms) : 355 408

P/QRS/T Axis(Deg.) : 43 28 47

RV1/SV5 Amp.(mV) : 0.37 0.24

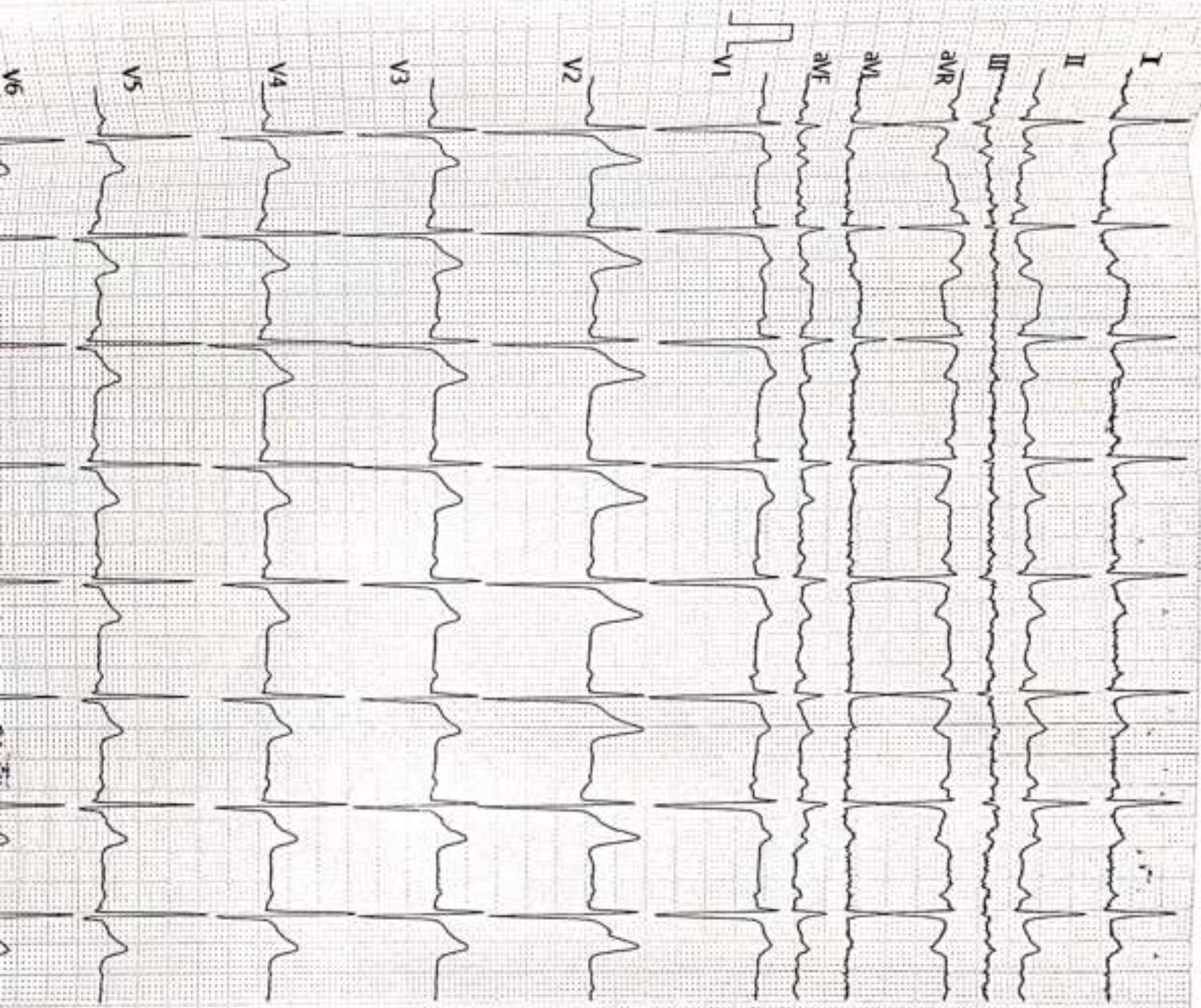
RV5/SV1 Amp.(mV) : 1.64 1.73

<ECG Analysis Result>

800 Normal Sinus Rhythm

312 Left Ventricular Hypertrophy(?)

\*\*\* Borderline Abnormal ECG \*\*\*



V2.33 Technician :

Note : Unconfirmed Report Need to Revt

ST LEVEL(mV)

| I     | II    | III   | aVR   | aVL   | aVF   |
|-------|-------|-------|-------|-------|-------|
| +0.02 | +0.03 | +0.00 | -0.02 | +0.00 | +0.02 |
| V1    | V2    | V3    | V4    | V5    | V6    |
| +0.09 | +0.25 | +0.13 | +0.12 | +0.10 | +0.06 |







**TEST REPORT**

**Reg. No** : 2312100809  
**Name** : ASHISH AGARWAL  
**Age/Sex** : 33 Years / Male  
**Ref. By** :  
**Client** : MEDIWHEEL WELLNESS

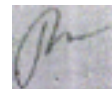
**Reg. Date** : 23-Dec-2023  
**Collected On** : 23-Dec-2023 09:44  
**Approved On** : 23-Dec-2023 18:31  
**Printed On** : 24-Dec-2023 12:36

| <u>Parameter</u> | <u>Result</u> | <u>Unit</u> | <u>Reference Interval</u> |
|------------------|---------------|-------------|---------------------------|
|------------------|---------------|-------------|---------------------------|

**KIDNEY FUNCTION TEST**

|                                                       |      |       |           |
|-------------------------------------------------------|------|-------|-----------|
| UREA<br><i>(Urease &amp; glutamate dehydrogenase)</i> | 18.4 | mg/dL | 10 - 50   |
| Creatinine<br><i>(Jaffe method)</i>                   | 0.71 | mg/dL | 0.5 - 1.4 |
| Uric Acid<br><i>(Enzymatic colorimetric)</i>          | 3.9  | mg/dL | 2.5 - 7.0 |

----- End Of Report -----







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|-----------|--------|------|--------------------|
|-----------|--------|------|--------------------|

### COMPLETE BLOOD COUNT (CBC)

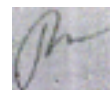
SPECIMEN: EDTA BLOOD

|                  |      |             |              |
|------------------|------|-------------|--------------|
| Hemoglobin       | 16.6 | g/dL        | 13.0 - 17.0  |
| RBC Count        | 5.22 | million/cmm | 4.5 - 5.5    |
| Hematocrit (PCV) | 51.6 | %           | 40 - 54      |
| MCH              | 31.8 | Pg          | 27 - 32      |
| MCV              | 98.9 | fL          | 83 - 101     |
| MCHC             | 32.2 | %           | 31.5 - 34.5  |
| RDW              | 14.2 | %           | 11.5 - 14.5  |
| WBC Count        | 6700 | /cmm        | 4000 - 11000 |

### DIFFERENTIAL WBC COUNT (Flow cytometry)

|                                 |               |      |                 |
|---------------------------------|---------------|------|-----------------|
| Neutrophils (%)                 | 65            | %    | 38 - 70         |
| Lymphocytes (%)                 | 30            | %    | 20 - 40         |
| Monocytes (%)                   | 03            | %    | 2 - 8           |
| Eosinophils (%)                 | 02            | %    | 0 - 6           |
| Basophils (%)                   | 00            | %    | 0 - 2           |
| Neutrophils                     | 4355          | /cmm |                 |
| Lymphocytes                     | 2010          | /cmm |                 |
| Monocytes                       | 201           | /cmm |                 |
| Eosinophils                     | 134           | /cmm |                 |
| Basophils                       | 0             | /cmm |                 |
| Platelet Count (Flow cytometry) | <b>112000</b> | /cmm | 150000 - 450000 |
| MPV                             | 11.1          | fL   | 7.5 - 11.5      |

----- End Of Report -----







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**Parameter**

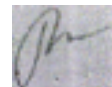
**Result**

**BLOOD GROUP & RH**

**Specimen: EDTA and Serum; Method: Haemagglutination**

ABO : 'B'  
Rh (D) : Positive

----- End Of Report -----







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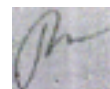
| <u>Parameter</u> | <u>Result</u> | <u>Unit</u> | <u>Reference Interval</u> |
|------------------|---------------|-------------|---------------------------|
|------------------|---------------|-------------|---------------------------|

**ERYTHROCYTE SEDIMENTATION RATE**

|                    |    |       |        |
|--------------------|----|-------|--------|
| ESR (After 1 hour) | 14 | mm/hr | 0 - 14 |
|--------------------|----|-------|--------|

*Modified Westergren Method*

----- End Of Report -----







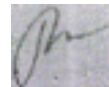
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| Parameter                                                          | Result      | Unit  | Reference Interval |
|--------------------------------------------------------------------|-------------|-------|--------------------|
| <b>LIVER FUNCTION TEST</b>                                         |             |       |                    |
| Total Bilirubin<br><i>Colorimetric diazo method</i>                | 0.68        | mg/dL | 0.10 - 1.0         |
| Conjugated Bilirubin<br><i>Sulph acid dpl/caff-benz</i>            | 0.22        | mg/dL | 0.0 - 0.3          |
| Unconjugated Bilirubin<br><i>Sulph acid dpl/caff-benz</i>          | 0.46        | mg/dL | 0.0 - 1.1          |
| SGOT<br><i>(Enzymatic)</i>                                         | <b>41.2</b> | U/L   | 0 - 37             |
| SGPT<br><i>(Enzymatic)</i>                                         | <b>40.1</b> | U/L   | 0 - 40             |
| Alakaline Phosphatase<br><i>(Colorimetric standardized method)</i> | 98.6        | U/L   | 53 - 130           |
| <b>Protien with ratio</b>                                          |             |       |                    |
| Total Protein<br><i>(Colorimetric standardized method)</i>         | 6.9         | g/dL  | 6.5 - 8.7          |
| Albumin<br><i>(Colorimetric standardized method)</i>               | 4.0         | mg/dL | 3.5 - 5.3          |
| Globulin<br><i>Calculated</i>                                      | 2.90        | g/dL  | 2.3 - 3.5          |
| A/G Ratio<br><i>Calculated</i>                                     | 1.38        |       | 0.8 - 2.0          |

----- End Of Report -----







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| Parameter                                                    | Result | Unit  | Reference Interval                                                                                                       |
|--------------------------------------------------------------|--------|-------|--------------------------------------------------------------------------------------------------------------------------|
| <b>LIPID PROFILE</b>                                         |        |       |                                                                                                                          |
| Cholesterol<br><i>(Enzymatic colorimetric)</i>               | 189.6  | mg/dL | Desirable : < 200.0<br>Borderline High : 200-239<br>High : > 240.0                                                       |
| Triglyceride<br><i>(Enzymatic colorimetric)</i>              | 121.8  | mg/dL | Normal : < 150.0<br>Borderline : 150-199<br>High : 200-499<br>Very High : > 500.0                                        |
| VLDL<br><i>Calculated</i>                                    | 24.36  | mg/dL | 15 - 35                                                                                                                  |
| LDL CHOLESTEROL                                              | 125.84 | mg/dL | Optimal : < 100.0<br>Near / above optimal : 100-129<br>Borderline High : 130-159<br>High : 160-189<br>Very High : >190.0 |
| HDL Cholesterol<br><i>Homogeneous enzymatic colorimetric</i> | 39.4   | mg/dL | 30 - 70                                                                                                                  |
| Cholesterol /HDL Ratio<br><i>Calculated</i>                  | 4.81   |       | 0 - 5.0                                                                                                                  |
| LDL / HDL RATIO<br><i>Calculated</i>                         | 3.19   |       | 0 - 3.5                                                                                                                  |





**TEST REPORT**

**Reg. No** : 2312100809  
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**Age/Sex** : 33 Years / Male  
**Ref. By** :  
**Client** : MEDIWHEEL WELLNESS

**Reg. Date** : 23-Dec-2023  
**Collected On** : 23-Dec-2023 09:44  
**Approved On** : 23-Dec-2023 18:31  
**Printed On** : 24-Dec-2023 12:36

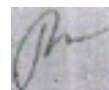
| Parameter | Result | Unit | Reference Interval |
|-----------|--------|------|--------------------|
|-----------|--------|------|--------------------|

**NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP**<?xml:namespace prefix = "o" ns = "urn:schemas-microsoft-com:office:office" />

**LDL CHOLESTEROL**  
**CHOLESTEROL**  
**HDL CHOLESTEROL**  
**TRIGLYCERIDES**  
Optimal<100  
Desirable<200  
Low<40  
Normal<150  
Near Optimal 100-129  
Border Line 200-239  
High >60  
Border High 150-199  
Borderline 130-159  
High >240  
-  
High 200-499  
High 160-189  
-  
-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
  - For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpreation available from the lab
  - All tests are done according to NCEP guidelines and with FDA approved kits.
  - LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- # For test performed on specimens received or collected from non-KSHIPRA locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender.  
KSHIPRA will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.  
. All other responsibility will be of referring Laboratory.

----- End Of Report -----







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|------------------|---------------|-------------|---------------------------|
|------------------|---------------|-------------|---------------------------|

### HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

|                                                               |     |               |                                                                                      |
|---------------------------------------------------------------|-----|---------------|--------------------------------------------------------------------------------------|
| Hb A1C<br><i>Boronate Affinity with Fluorescent Quenching</i> | 5.6 | % of Total Hb | Poor Control : > 7.0 %<br>Good Control : 6.2-7.0 %<br>Non-diabetic Level : 4.3-6.2 % |
|---------------------------------------------------------------|-----|---------------|--------------------------------------------------------------------------------------|

|                                         |        |       |  |
|-----------------------------------------|--------|-------|--|
| Mean Blood Glucose<br><i>Calculated</i> | 122.06 | mg/dL |  |
|-----------------------------------------|--------|-------|--|

**Degree of Glucose Control Normal Range:**

Poor Control >7.0% \*

Good Control 6.0 - 7.0 %\*\*Non-diabetic level < 6.0 %

\* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

\* Some danger of hypoglycemic reaction in Type I diabetics.

\* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

**EXPLANATION :-**

\*Total haemoglobin A1 c is continuously synthesised in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.

\*The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

\*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

\*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

**HbA1c assay Interferences:**

\*Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

----- End Of Report -----





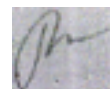
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| <u>Parameter</u>                                             | <u>Result</u> | <u>Unit</u> | <u>Reference Interval</u> |
|--------------------------------------------------------------|---------------|-------------|---------------------------|
| Fasting Blood Sugar (FBS)<br><i>Hexokinase Method</i>        | 84.6          | mg/dL       | 70 - 110                  |
| Post Prandial Blood Sugar (PPBS)<br><i>Hexokinase Method</i> | 111.4         | mg/dL       | 70 - 140                  |

----- End Of Report -----





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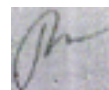
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### THYROID FUNCTION TEST

|                                                     |       |        |             |
|-----------------------------------------------------|-------|--------|-------------|
| T3 (Triiodothyronine)<br><i>Chemiluminescence</i>   | 1.03  | ng/mL  | 0.87 - 1.81 |
| T4 (Thyroxine)<br><i>Chemiluminescence</i>          | 7.41  | µg/dL  | 5.89 - 14.9 |
| TSH ( ultra sensitive )<br><i>Chemiluminescence</i> | 4.010 | µIU/ml | 0.34 - 5.6  |

**SUMMARY** The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. **LIMITATION** Presence of autoantibodies may cause unexpected high value of TSH

----- End Of Report -----







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|-----------|--------|------|--------------------|
|-----------|--------|------|--------------------|

### URINE ROUTINE EXAMINATION

#### PHYSICAL EXAMINATION

|            |             |
|------------|-------------|
| Quantity   | 15 cc       |
| Colour     | Pale Yellow |
| Appearance | Clear       |

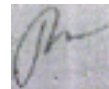
#### CHEMICAL EXAMINATION ( BY REFLECTANCE PHOTOMETRIC METHOD)

|                                  |       |              |
|----------------------------------|-------|--------------|
| pH                               | 6.0   | 5.0 - 8.0    |
| Sp. Gravity                      | 1.015 | 1.002 - 1.03 |
| Protein                          | Nil   |              |
| Glucose                          | Nil   |              |
| Ketone Bodies                    | Nil   |              |
| Urine Bile salt and Bile Pigment | Nil   |              |
| Urine Bilirubin                  | Nil   |              |
| Nitrite                          | Nil   |              |
| Leucocytes                       | Nil   |              |
| Blood                            | Nil   |              |

#### MICROSCOPIC EXAMINATION (MANUAL BY MCIROSCOPY)

|                          |         |
|--------------------------|---------|
| Leucocytes (Pus Cells)   | Nil     |
| Erythrocytes (Red Cells) | Nil     |
| Epithelial Cells         | 1-2/hpf |
| Amorphous Material       | Nil     |
| Casts                    | Nil     |
| Crystals                 | Nil     |
| Bacteria                 | Nil     |
| Monilia                  | Nil     |

----- End Of Report -----





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### STOOL EXAMINATION

|             |            |
|-------------|------------|
| Colour      | Yellow     |
| Consistency | Semi Solid |

#### CHEMICAL EXAMINATION

|              |          |
|--------------|----------|
| Occult Blood | Negative |
|--------------|----------|

*Peroxidase Reaction with o-Dianisidine*

|          |        |
|----------|--------|
| Reaction | Acidic |
|----------|--------|

*pH Strip Method*

|                    |        |
|--------------------|--------|
| Reducing Substance | Absent |
|--------------------|--------|

*Benedict's Method*

#### MICROSCOPIC EXAMINATION

|                  |           |
|------------------|-----------|
| Mucus            | Nil       |
| Pus Cells        | 1 - 2/hpf |
| Red Cells        | Nil       |
| Epithelial Cells | Nil       |
| Vegetable Cells  | Nil       |
| Trophozoites     | Nil       |
| Cysts            | Nil       |
| Ova              | Nil       |
| Neutral Fat      | Nil       |
| Monilia          | Nil       |

**Note:** Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.

**False negative:** False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occasional unruptured RBCs.

**False positive:** False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.

----- End Of Report -----

