

Age / Gender

OP Visit No

Reported on

Specimen

Doctor:

: 38 Y / M

: Serum

: FDUROPV37495

: 01-04-2023 17:23

Patient Name : Mr. Kuntal Mazumder UHID/MR No. : FDUR.0000028470

Visit Date : 01-04-2023 10:07
Sample Collected on : 01-04-2023 12:24

Ref Doctor : SELF

Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL CHECKUP

MALE - 2D ECHO - PAN INDIA - FY2324

Emp/Auth/TPA ID : 12

Sponsor Name : ARCOFEMI HEALDERCARTMENT 25 LABORATORY MEDICINE

TEST NAMERESULTBIOLOGICAL REFERENCE INTERVALSUNITSGGTP: GAMMA GLUTAMYL TRANSPEPTIDASE20*Male: Age 20 yrs to 59: 53 - 128U/LMethod: GLUPA-CEnd of the report

Results are to be correlated clinically



: 38 Y / M

: Urine

: FDUROPV37495

: 01-04-2023 16:32

UNITS

Patient Name : Mr. Kuntal Mazumder

UHID/MR No. : FDUR.0000028470 **Visit Date** : 01-04-2023 10:07

Sample Collected on : 01-04-2023 12:24

Ref Doctor : SELF

Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL CHECKUP

MALE - 2D ECHO - PAN INDIA - FY2324

Emp/Auth/TPA ID : 12

TEST NAME

Sponsor Name : ARCOFEMI HEALDERCARTMENT QE LABORATORY MEDICINE

RESULT BIOLOGICAL REFERENCE INTERVALS

URINE GLUCOSE(POST PRANDIAL)

URINE GLUCOSE(POST PRANDIAL). Absent

End of the report

Results are to be correlated clinically

Lab Technician / Technologist.

Poulomi_Biswas

Jawar L Dr. GAURAV PAL MD PATHOLOGIST PATHOLOGIST

Age / Gender OP Visit No

Reported on

Specimen

Doctor:



 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUROPV37495

 Visit Date
 : 01-04-2023 10:07
 Reported on
 : 01-04-2023 15:48

Sample Collected on: 01-04-2023 12:24 Specimen : Urine

Ref Doctor : SELF

Emp/Auth/TPA ID : 12

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

Doctor:

URINE ROUTINE EXAMINATION

TEST RESULT

PHYSICAL EXAMINATION

Volume	20 ml
Color	Pale Straw
Appearance	Clear
Specific Gravity	1.005

CHEMICAL EXAMINATION

Reaction	Acidic
Protein	Absent
Sugar	Absent
Ketone Bodies	Absent
Bile Salts	Absent
Bile Pigments	Absent

MICROSCOPIC EXAMINATION

Pus Cell	1 - 2 / hpf
Red Blood Cells	Not found
Epithelial Cells	3 - 4 / hpf
Cast	Not found
Crystals	Not found
Others	Not found

End of the report

Results are to be correlated clinically

Lab Technician / Technologist. Poulomi_Biswas



 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUROPV37495

 Visit Date
 : 01-04-2023 10:07
 Reported on
 : 01-04-2023 15:46

 Sample Collected on
 : 01-04-2023 12:24
 Specimen
 : EDTA Blood

Ref Doctor: : SELF Doctor: :

Emp/Auth/TPA ID : 12

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME RESULT BLOOD GROUP AND RH TYPE

RESULT BIOLOGICAL REFERENCE INTERVALS

UNITS

BLOOD GROUP B A, B, O, AB Method: Slide Test

RH: Positive POSITIVE, NEGATIVE

End of the report

Results are to be correlated clinically

Lab Technician / Technologist.

Poulomi_Biswas

Dr. GAURAV PAL MD PATHOLOGIST PATHOLOGIST

Jawa K



 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUROPV37495

 Visit Date
 : 01-04-2023 10:07
 Reported on
 : 01-04-2023 15:46

Sample Collected on: 01-04-2023 12:24 Specimen : Serum

Ref Doctor : SELF Emp/Auth/TPA ID : 12

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

Doctor:

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	<u>UNITS</u>
LIVER FUNCTION TEST (PACKAGE)			
Bilirubin(Total) Method: Daizo	1.0	0.3 - 1.0	mg/dl
Bilirubin (Direct) Method: Daizo	0.4*	0.1 - 0.3	mg/dl
Bilirubin (Indirect) Method: Calculated	0.6	0.2 - 0.7	mg/dl
SGOT(AST) Method: IFCC	26	10 - 35	U/L
SGPT(ALT) Method: IFCC	32	10 - 45	U/L
GGT	20	<55	U/L
Alka-Phos Method: ALP-AMP	80	Male : 53 - 128 U/L Female : 42 - 98 U/L	U/L
Total Protein Method: Biuret	7.4	5.5 - 8.3	gm/dl
Albumin Method: BCG	4.0	3.5 - 5.5	gm/dl
Globulin Method: Calculated	3.4	2.0 - 3.5	gm/dl
A/G Ratio Method: Calculated	1.1:1		

End of the report

Results are to be correlated clinically

Lab Technician / Technologist. Poulomi_Biswas



 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUROPV37495

 Visit Date
 : 01-04-2023 10:07
 Reported on
 : 01-04-2023 15:43

Sample Collected on: 01-04-2023 12:24 Specimen : Serum

Ref Doctor : SELF Emp/Auth/TPA ID : 12

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

Doctor:

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	<u>UNITS</u>
LIPID PROFILE TEST (PACKAGE)			
TRIGLYCERIDE: Method: GPO-POD	190*	Normal : < 161 mg/dL High : 161-199 mg/dL Hypertriglyceridemic : 200-499 mg/dL Very High : > 499 mg/dL	mg/dL
CHOLESTEROL: Method: CHOD - PAP	103	Desirable <200 Borderline high 200 High >240 Desirable <200 Borderline high 200	mg/dL
HDL CHOLESTEROL: Method: DIRECT	37	Male : 35.3 – 79.5 mg/dL	mg/dL
LDL CHOLESTEROL: Method: DIRECT	45	Optimal : <100 mg/dL Above Optimal : 100 - 129 mg/dL Borderline High : 130 – 159 mg/dL High : 160 - 189 mg/dL Very High : 190 mg/dL	mg/dL
VLDL Method: Calculated.	21	<32	mg/dl

End of the report

Results are to be correlated clinically

Lab Technician / Technologist. Poulomi_Biswas

Dr. GAURAV PAL MD PATHOLOGIST PATHOLOGIST

Jawa k



 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUROPV37495

 Visit Date
 : 01-04-2023 10:07
 Reported on
 : 01-04-2023 15:40

Sample Collected on: 01-04-2023 12:24 Specimen : Serum

Ref Doctor : SELF Emp/Auth/TPA ID : 12

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

Doctor:

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	<u>UNITS</u>
KFT - RENAL PROFILE-SERUM			
Urea: Method: GLDH	28	13 - 50	mg/dl
Creatinine: Method: Enzymatic	0.9	0.5 - 1.3	mg/dl
Uric Acid Method: Uricase-Pod	7.2	2.6 - 7.2	mg/dl
Sodium (Na+) Method: ISE	137	135 - 145	mEq/L
Potassium (K+) Method: ISE	4.6	3.5 - 5.0	mEq/L
Chloride (CI)	105	96 - 106	mEq/L
Calcium Method: ARESENAZO	10.0	8.6 - 10.2	mg/dl
Phosphorus Method: UV MOLYBDATE	4.0	2.5 - 4.5	mg/dl
GLUCOSE - (FASTING)			
Glucose Fasting Method: GOD-POD	102	70 - 110	mg/dl
GLUCOSE - (POST PRANDIAL)			
Glucose - (Post Prandial) Method: GOD-POD	140	100 - 140	mg/dl

End of the report

Results are to be correlated clinically

Lab Technician / Technologist. Poulomi_Biswas



 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUROPV37495

 Visit Date
 : 01-04-2023 10:07
 Reported on
 : 01-04-2023 15:39

Sample Collected on: 01-04-2023 12:24 Specimen : Blood

Ref Doctor : SELF Emp/Auth/TPA ID : 12

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

Doctor:

PERIPHERAL SMEAR

RBC: Normocytic Normochromic

WBC : No abnormal cell seen

Platelet: Adequate

End of the report

Results are to be correlated clinically

Lab Technician / Technologist. Poulomi_Biswas



Patient Name : Mr. Kuntal Mazumder Age / Gender : 38 Y / M

 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUR.OPV37495

 Visit Date
 : 01-04-2023 10:07
 Reported on
 : 01-04-2023 15:38

 Sample Collected on
 : 01-04-2023 12:24
 Specimen
 : Whole Blood (Edta)

Ref Doctor : SELF

: ARCOFEMI HEALTHCARE LIMITED

Emp/Auth/TPA ID : 12

Sponsor Name

DEPARTMENT OF LABORATORY MEDICINE

Doctor:

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	<u>UNITS</u>
HAEMOGRAM			
HAEMOGLOBIN Method: Non Cyanide,Sls Based	12.4*	13 - 17	gm/dl
EOSINOPHIL Method: Microscopy	04	1 6	%
RBC COUNT Method: Electrical Impedence	4.83	4.5 - 5.5	Million/Cumm.
NEUTROPHIL Method: Microscopy	61	40 - 80	%
BASOPHIL Method: Microscopy	00	< 1 - 2	%
TOTAL WBC COUNT Method: Electrical Impedence	8600	4000 - 10000	thousand/cumm
HEMATOCRIT (PCV) Method: Cumulative Pulse	36.9*	40 - 50	%
MCV Method: Calculated	76.5*	83 - 101	fl
MCH Method: Calculated	25.7*	27 - 32	pg
MCHC Method: Calculated	33.7	31.5 - 34.5	gm/dl
PLATELET COUNT Method: Electrical Impedence	1.6	1.5 - 4.0	Lakhs/c.mm
LYMPHOCYTE Method: Microscopy	33	20 - 40	%
MONOCYTE Method: Microscopy	02	210	%
ESR Method: Westergren's Method	34*	Male -10, Female-12	mm/hr

End of the report

Results are to be correlated clinically

Lab Technician / Technologist. Poulomi_Biswas

Dr. GAURAV PAL MD PATHOLOGIST PATHOLOGIST

Jawa L

 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUROPV37506

 Visit Date
 : 01-04-2023 17:11
 Reported on
 : 02-04-2023 16:56

 Sample Collected on : 01-04-2023 17:25
 Specimen
 : Serum(Spl)

Ref Doctor : SELF Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	<u>UNITS</u>
THYROID PROFILE - I(T3,T4 AND TSH)			
T3. Method: CLIA	0.9	0.69 - 2.15	ng/mL
T4. Method: CLIA	7.7*	52 - 127	ng/mL
TSH. Method: CLIA	1.2	0.3 - 4.5	uIU/mL

Methodology : CLIA

Specimen: Serum

Comment: Increase in serum concentration of TSH is an early and sensitive indicator of decreased thyroid reserve and in conjunction with decreased T4 is diagnostic of primary hypothyroidism. In secondary and tertiary hypothyroidism concentration of T4 are usually low and TSH level are generally low or normal. An increase in T3 without an increase in T4 is frequently associated with recurrent thyrotoxicosis in previously treated patients. Graves' disease, which is an autoimmune disorder, most often causes hyperthyroidism and older women may get another form of hyperthyroidism like toxic nodular goiter.

Please correlate with clinical conditions.

Test Done By: MAGLUMI 2000 Snibe USA FDA Approved Fully Automated Immunoassay System

End of the report

Results are to be correlated clinically

Lab Technician / Technologist Poulomi_Biswas

Dr. GAURAV PAL MD PATHOLOGIST PATHOLOGIST

Jawar K

 UHID/MR No.
 : FDUR.0000028470
 OP Visit No
 : FDUROPV37506

 Visit Date
 : 01-04-2023 17:11
 Reported on
 : 02-04-2023 16:56

 Sample Collected on : 01-04-2023 17:25
 Specimen
 : Serum(Spl)

Ref Doctor : SELF Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	<u>UNITS</u>
THYROID PROFILE - I(T3,T4 AND TSH)			
T3. Method: CLIA	0.9	0.69 - 2.15	ng/mL
T4. Method: CLIA	7.7*	52 - 127	ng/mL
TSH. Method: CLIA	1.2	0.3 - 4.5	uIU/mL

Methodology : CLIA

Specimen: Serum

Comment: Increase in serum concentration of TSH is an early and sensitive indicator of decreased thyroid reserve and in conjunction with decreased T4 is diagnostic of primary hypothyroidism. In secondary and tertiary hypothyroidism concentration of T4 are usually low and TSH level are generally low or normal. An increase in T3 without an increase in T4 is frequently associated with recurrent thyrotoxicosis in previously treated patients. Graves' disease, which is an autoimmune disorder, most often causes hyperthyroidism and older women may get another form of hyperthyroidism like toxic nodular goiter.

Please correlate with clinical conditions.

Test Done By: MAGLUMI 2000 Snibe USA FDA Approved Fully Automated Immunoassay System

End of the report

Results are to be correlated clinically

Lab Technician / Technologist Poulomi_Biswas

Dr. GAURAV PAL MD PATHOLOGIST PATHOLOGIST

Jawar K