

Name : Ms. MANJULA M  
PID No. : MED110806479  
SID No. : 79192947  
Age / Sex : 34 Year(s) / Female  
Type : OP  
Ref. Dr : MediWheel

Register On : 11/12/2021 9:19 AM  
Collection On : 11/12/2021 2:28 PM  
Report On : 12/12/2021 12:25 PM  
Printed On : 13/12/2021 5:34 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>HAEMATOLOGY</u></b>			
<b><u>Complete Blood Count With - ESR</u></b>			
Haemoglobin (EDTA Blood/Spectrophotometry)	10.4	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood/Derived from Impedance)	34.3	%	37 - 47
RBC Count (EDTA Blood/Impedance Variation)	4.57	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (EDTA Blood/Derived from Impedance)	75.0	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood/Derived from Impedance)	22.8	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood/Derived from Impedance)	30.4	g/dL	32 - 36
RDW-CV (EDTA Blood/Derived from Impedance)	17.1	%	11.5 - 16.0
RDW-SD (EDTA Blood/Derived from Impedance)	44.89	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood/Impedance Variation)	5700	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood/Impedance Variation & Flow Cytometry)	62.9	%	40 - 75
Lymphocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	30.6	%	20 - 45
Eosinophils (EDTA Blood/Impedance Variation & Flow Cytometry)	1.0	%	01 - 06
Monocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	5.0	%	02 - 10
Basophils (EDTA Blood/Impedance Variation & Flow Cytometry)	0.5	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	3.59	10 <sup>3</sup> / µl	1.5 - 6.6

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Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	1.74	10 <sup>3</sup> / $\mu$ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.06	10 <sup>3</sup> / $\mu$ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.28	10 <sup>3</sup> / $\mu$ l	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.03	10 <sup>3</sup> / $\mu$ l	< 0.2
Platelet Count (EDTA Blood/Impedance Variation)	267	10 <sup>3</sup> / $\mu$ l	150 - 450
MPV (EDTA Blood/Derived from Impedance)	8.6	fL	8.0 - 13.3
PCT (EDTA Blood/Automated Blood cell Counter)	0.23	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (EDTA Blood/Modified Westergren)	<b>25</b>	mm /1st hr	0 - 20

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<b><u>BIOCHEMISTRY</u></b>			
<b><u>Liver Function Test</u></b>			
Bilirubin(Total) (Serum/Diazotized Sulfanilic Acid)	0.6	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.2	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.4	mg/dL	0.1 - 1.0
Total Protein (Serum/Biuret)	7.1	g/dL	6.0 - 8.3
Albumin (Serum/Bromocresol green)	3.6	g/dL	3.5 - 5.2
Globulin (Serum/Derived)	3.5	g/dL	2.3 - 3.5
A : G Ratio (Serum/Derived)	<b>1.0</b>		1.5 - 2.5
SGOT/AST (Aspartate Aminotransferase) (Serum/IFCC Kinetic)	14	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/IFCC / Kinetic)	9	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/IFCC Kinetic)	72	U/L	42 - 98
GGT(Gamma Glutamyl Transpeptidase) (Serum/SZASZ standarised IFCC)	12	U/L	< 38

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**Lipid Profile**

Cholesterol Total (Serum/Cholesterol oxidase/Peroxidase)	142	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
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Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	47	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500
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**INTERPRETATION:** The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	48	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
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LDL Cholesterol (Serum/Calculated)	84.6	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
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VLDL Cholesterol (Serum/Calculated)	9.4	mg/dL	< 30
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Non HDL Cholesterol (Serum/Calculated)	94.0	mg/dL	Optimal: <130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >=220
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**INTERPRETATION:** 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.  
 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
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Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	1		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	1.8		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

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<b><u>Glycosylated Haemoglobin (HbA1c)</u></b>			
HbA1C (Whole Blood/HPLC)	5.3	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose 105.41 mg/dL  
(Whole Blood)

**INTERPRETATION: 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 glycaemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

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## IMMUNOASSAY

### THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/CMIA)	0.96	ng/mL	0.7 - 2.04
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#### **INTERPRETATION:**

##### **Comment :**

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Thyroxine) - Total (Serum/CMIA)	10.55	µg/dL	4.2 - 12.0
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#### **INTERPRETATION:**

##### **Comment :**

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Microparticle Immunoassay(CMIA))	2.02	µIU/mL	0.35 - 5.50
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#### **INTERPRETATION:**

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

##### **Comment :**

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

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**CLINICAL PATHOLOGY**

**PHYSICAL EXAMINATION**

Colour (Urine)	Pale yellow		
Volume (Urine)	10	mL	
Appearance (Urine)	Slightly hazy		Clear

**CHEMICAL EXAMINATION(Automated-Urineanalyser)**

pH (Urine/AUTOMATED URINANALYSER)	5.0		4.5 - 8.0
Specific Gravity (Urine)	1.015		1.002 - 1.035
Protein (Urine)	Negative	mg/dL	Negative
Glucose (Urine)	Negative	mg/dL	Negative
Ketones (Urine)	Negative	mg/dL	Negative
Leukocytes (Urine)	Trace	leuco/uL	Negative
Nitrite (Urine/AUTOMATED URINANALYSER)	Negative		Negative
Bilirubin (Urine/AUTOMATED URINANALYSER)	Negative	mg/dL	Negative
Blood (Urine/AUTOMATED URINANALYSER)	Negative	Ery/uL	Negative
Urobilinogen (Urine/AUTOMATED URINANALYSER)	0.2	mg/dL	0.2 - 1.0

**MICROSCOPY(URINE DEPOSITS)**

Pus Cells (Urine/Flow cytometry)	4-6	/hpf	3-5
Epithelial Cells (Urine)	2-4	/hpf	1-2



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RBCs (Urine/Flow cytometry)	Nil	/hpf	2-3
Others (Urine)	Bacteria present		Nil

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**BIOCHEMISTRY**

BUN / Creatinine Ratio	16		6 - 22
Glucose Fasting (FBS) (Plasma - F/GOD - POD)	79	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose Fasting - Urine (Urine - F)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD - POD)	87	mg/dL	70 - 140

**INTERPRETATION:**

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Glucose Postprandial - Urine (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease-GLDH)	8	mg/dL	7.0 - 21
Creatinine (Serum/Jaffe Kinetic)	0.5	mg/dL	0.6 - 1.1

**INTERPRETATION:** Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine, chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Uricase/Peroxidase)	2.3	mg/dL	2.6 - 6.0
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**IMMUNOHAEMATOLOGY**

BLOOD GROUPING AND Rh TYPING (EDTA Blood/Agglutination)	'A' 'Positive'		
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-- End of Report --



सत्यमेव जयते  
भारत सरकार



आधार

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತಿನ ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India  
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 1190/12695/33233

To  
ಮಂಜುಳಾ ಎಮ್  
Manjula M  
D/O P Murugesh  
Type 6-30  
24/04/2012 R T P S Colony Shaktinagar Deosugur  
Shaktinagar Raichur  
Karnataka 584170  
9980184855

33717572



UG337175723IN



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

**5573 4561 7914**

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ

GOVERNMENT OF INDIA



ಮಂಜುಳಾ ಎಮ್  
Manjula M  
ಹುಟ್ಟಿದ ವರ್ಷ / Year of Birth : 1987  
ಸ್ತ್ರೀ / Female



**5573 4561 7914**

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ

<b>Name</b>	<b>MS.MANJULA M</b>	<b>ID</b>	<b>MED110806479</b>
<b>Age &amp; Gender</b>	<b>34Y/FEMALE</b>	<b>Visit Date</b>	<b>11/12/2021</b>
<b>Ref Doctor</b>	<b>MediWheel</b>		

### ABDOMINO-PELVIC ULTRASONOGRAPHY

**LIVER** is normal in shape, size and has uniform echopattern.  
No evidence of focal lesion or intrahepatic biliary ductal dilatation.  
Hepatic and portal vein radicals are normal.

**GALL BLADDER** show normal shape and has clear contents.  
Gall bladder wall is of normal thickness.  
CBD is of normal calibre.

**PANCREAS** has normal shape, size and uniform echopattern.  
No evidence of ductal dilatation or calcification.

**SPLEEN** show normal shape, size and echopattern.

No demonstrable Para -aortic lymphadenopathy.

**KIDNEYS** move well with respiration and have normal shape, size and echopattern.  
Cortico- medullary differentiations are well madeout.  
No evidence of calculus or hydronephrosis.

The kidney measures as follows

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	8.8	1.3
Left Kidney	9.4	1.4

**URINARY BLADDER** show normal shape and wall thickness.  
It has clear contents. No evidence of diverticula.

**UTERUS** is anteverted and has normal shape and size.  
It has uniform myometrial echopattern.

Endometrial echo is of normal thickness – 3.7mms.

Uterus measures as follows:

LS: 6.8cms      AP: 2.9cms      TS: 4.2cms.

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:2:

**OVARIES** are normal size, shape and echotexture

Ovaries measures as follows:

Right ovary: 2.0 x 1.3 cms.

Left ovary: 2.0 x 1.5 cms.

POD & adnexa are free.

No evidence of ascites.

**Impression:** *Essentially normal study.*

**CONSULTANT RADIOLOGISTS:**

DR. H. K. ANAND

DR. PRAJNA SHENOY

DR. MAHESH. M. S

DR. RADHA KRISHNA. A.

  
DR. HIMA BINDU.P

Hbp/so


Customer Name	Manjula .M	Customer ID	110806479
Age & Gender	34 / Female	Visit Date	11/12/21

Eye Screening

With spectacles / without spectacles (strike out whichever is not applicable)

	Right Eye	Left Eye
Near Vision	N6	N6
Distance Vision	6/6	6/6
Colour Vision	Normal	Normal

Observation / Comments: - Normal.

  
**Dr. RAVI.V. HALAKATTI**  
 M.S. (OPHTH)  
 EYE SURGEON  
 Regd. No. 11801



# Sign-up & Health Assessment Form

To be filled by Customer

Name: Mr/Ms/Mrs **M a n j a l a**

Gender:  Male  Female Age: **34** years DOB:  /  /

Address:  Pincodes:

Mobile:

Bar code

### Vitals

To be filled by Technician

Height: **153.5** cms

Waist: **39** in.

Thigh: **42** in.

Weight: **68.9** kg

Heart Rate: **40.8** %

Visc. Fat: **10.5** %

BMR: **1353** cal

BMI: **29.2** kg/m<sup>2</sup>

Body Age: **54** years

Sys. BP: **118** mmHg

Dia. BP: **83** mmHg

*PULSE 107*

To be filled by Customer

### Medical History

Have you been previously diagnosed with?

Diabetes (Sugar)  Yes  No

Hypertension (BP)  Yes  No

Cardiovascular Disease (Heart)  Yes  No

Asthma/Allergies (Dust, Pollen, Food, Animals, etc.)  Yes  No

Neurological Problems (Nerve)  Yes  No

Are you currently taking medications for?

Diabetes (Sugar)  Yes  No

Hypertension (BP)  Yes  No

Cardiovascular Disease (Heart)  Yes  No

Liver Disease  Yes  No

Cancer  Yes  No

Tuberculosis (TB)  Yes  No

### Family History

Is there a history of below diseases in your family?

Diabetes (Sugar)  Yes  No

Hypertension (BP)  Yes  No

Cardiovascular Disease (Heart)  Yes  No

Cancer  Yes  No

### Lifestyle

Do you exercise regularly?  Yes  No

Do you consume alcohol more than 2 times a week?  Yes  No

Do you smoke/chew tobacco?  Yes  No

Are you vegetarian?  Yes  No

### General

Do you see a doctor at least once in 6 months?  Yes  No

Do you undergo a health checkup every year?  Yes  No

How would you rate your overall Health?  Excellent  Good  Normal  Poor  Very Poor

### Women's Health

Is there a family history of Breast Cancer?  Yes  No

Is there a family history of Endometrial (Uterus) Cancer?  Yes  No

Is there a family history of Ovarian Cancer?  Yes  No

Do you have irregular periods?  Yes  No

Do you have heavy bleeding during periods?  Yes  No

Do you have scanty periods?  Yes  No

Have you attained Menopause?  Yes  No

Do you have children?  Yes  No

Was it a normal delivery?  Yes  No



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**X - RAY CHEST PA VIEW**

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

**Impression:** *Essentially normal study.*

**CONSULTANT RADIOLOGISTS:**

**DR. H. K. ANAND**

**DR. PRAJNA SHENOY**

  
**DR. MAHESH. M. S**

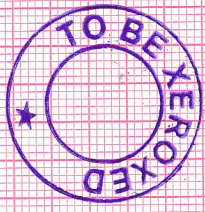
**DR. RADHA KRISHNA. A.**

**DR. HIMA BINDU.P**

*Ms/pu*

ID: 110806479

11-Dec-2021  
11:04:19



83bpm

BP: 110/70

ST @ 10mm/mV  
80ms postd

PRETEST  
SUPINE  
5:30

BRUCE  
\*\*m/ph  
\*\*%/

Lead  
ST(m  
Slope

(Needs Clinical Correlation  
for further Management)

*HR-83bpm*  
*WNL*  
*Wm +70°*  
*W normal SII*

**Dr. SRIDHAR .E**  
MD.(Med), DM(Cardio), FICC  
Interventional Cardiologist  
K.M.C.No.: 32248

\*I  
-0.3  
-0.6

\*aVR  
0.1  
-0.9

\*V1  
0.5  
0.3

\*V4  
0.1  
0.1

\*II  
0.0  
-0.3

\*aVL  
-1.1  
-1.5

\*V2  
0.2  
-0.1

\*V5  
0.4  
0.0

\*III  
0.7  
-1.0

\*aVF  
-0.2  
-0.4

\*V3  
0.1  
-0.3

\*V6  
0.3  
0.1

II

Raw Rhythm

20 Hz

25.0 mm/s

10.0 mm/mV

A-H-S 50Hz HR 46

\* Computer Synthesized Rhythm

MAC55 010Bsp1

ID: 110806479

Total Exercise time: 5:18

25.0 mm/s

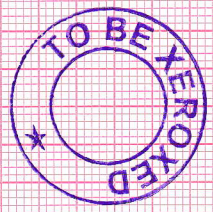
34years

Female

10.0 mm/mV  
100hz

11 Dec 2021  
10:48:50

Referred by: MEDIWHEEL  
Test Ind: IHD SCREENING



BRUCE  
Max HR: 172bpm 92% of max predicted 186bpm  
Max BP: 110/70  
Maximum workload: 7.0METS  
Reason for Termination: Max HR attained  
Comments: MODERATE EFFORT TOLERANCE. NORMAL HR & BP RESPONSE  
NO SIGNIFICANT ST T CHANGES SEEN DURING EXE OR RECOVERY  
NO ANGINA / ARRYTHMIAS  
\*\*IMP-STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA \*8  
\*\*\*NEEDS CLINICAL CORRELATION FOR FURTHER MANAGEMENT \*\*  
\*DR.SRIDHARL MD DM FICC CARDIOLOGIST \*\*\*\*

Phase Name

Stage Name

Time in Stage

Speed (mph)

Grade (%)

Workload (METS)

HR (bpm)

BP (mmHg)

RPP (x100)

Dr. SRIDHAR  
Interventional Cardiology  
K.M.C. No.: 3222

PRETEST

SUPINE

5:49

1.0

0.0

1.7

88

110/70

97

EXERCISE

STAGE 1

3:00

1.7

10.0

4.6

133

STAGE 2

2:18

2.5

12.0

7.0

156

RECOVERY

Post

4:50

\*\*.\*

\*\*.\*

1.0

100

Technician: KOMS

CLUMAX DIAGNOSTICS

Unconfirmed

MAC55 010Bsp1