

| | | | |
|-----------------|----------------|------------|-----------------------|
| Name | Ishwar sharma | ID | MED111089111 |
| Age & Gender | 54Year(s)/MALE | Visit Date | 5/16/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

| | | |
|-------------------------------|---|--------|
| AORTA | : | 2.5cms |
| LEFT ATRIUM | : | 3.0cms |
| AVS | : | ---- |
| LEFT VENTRICLE (DIASTOLE) | : | 4.2cms |
| (SYSTOLE) | : | 2.8cms |
| VENTRICULAR SEPTUM (DIASTOLE) | : | 0.9cms |
| (SYSTOLE) | : | 1.3cms |
| POSTERIOR WALL (DIASTOLE) | : | 0.9cms |
| (SYSTOLE) | : | 1.2cms |
| EDV | : | 79ml |
| ESV | : | 30ml |
| FRACTIONAL SHORTENING | : | 33% |
| EJECTION FRACTION | : | 62% |
| EPSS | : | --- |
| RVID | : | 1.3cms |

DOPPLER MEASUREMENTS:

| | | | | |
|-----------------|---|-------------|-------------|-------|
| MITRAL VALVE | : | E' 0.50 m/s | A' 0.84 m/s | NO MR |
| AORTIC VALVE | : | 0.78 m/s | | NO AR |
| TRICUSPID VALVE | : | E' 1.88 m/s | A' - m/s | NO TR |
| PULMONARY VALVE | : | 0.78 m/s | | NO PR |

| | | | |
|-----------------|----------------|------------|-----------------------|
| Name | Ishwar sharma | ID | MED111089111 |
| Age & Gender | 54Year(s)/MALE | Visit Date | 5/16/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

2D ECHOCARDIOGRAPHY FINDINGS:

Left ventricle : Normal size, Normal systolic function.
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

IMPRESSION:

- **LV DIASTOLIC DYSFUNCTION**
- **NORMAL SIZED CARDIAC CHAMBERS.**
- **NORMAL LV SYSTOLIC FUNCTION. EF:62 %.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

DR. K.S. SUBRAMANI. MBBS, MD, DM (CARDIOLOGY) FESC
SENIOR CONSULTANT INTERVENTIONAL CARDIOLOGIST
Kss/da

| | | | |
|-----------------|----------------|------------|-----------------------|
| Name | Ishwar sharma | ID | MED111089111 |
| Age & Gender | 54Year(s)/MALE | Visit Date | 5/16/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

Note:

- * Report to be interpreted by qualified medical professional.**
- * To be correlated with other clinical findings.**
- * Parameters may be subjected to inter and intra observer variations.**

CLUMAX DIAGNOSTICS



--- A MEDALL COMPANY ---

Date 16-May-2022 7:26 AM

Customer Name : **MR.ISHWAR SHARMA**DOB : **22 Nov 1967**Ref Dr Name : **MediWheel**Age : **54Y/MALE**Customer Id : **MED111089111**Visit ID : **422042352**

Email Id :

Phone No : **9886455451**Corp Name : **MediWheel**

Address :

HF 108
 WF - 60.3
 BP - 110/74
 Pulse - 84

COMPLEMENTARY
 BREAK FAST

Package Name : **Mediwheel Full Body Health Checkup Male Above 40**

NS - done

| S.No | Modality | Study | Accession No | Time | Seq | Signature |
|------|----------|---------------------------------------|--------------|------|-----|-----------|
| 1 | LAB | BLOOD UREA NITROGEN (BUN) | | | | |
| 2 | LAB | CREATININE | | | | |
| 3 | LAB | GLUCOSE - FASTING | | | | |
| 4 | LAB | GLUCOSE - POSTPRANDIAL (2 HRS) | | | | |
| 5 | LAB | GLYCOSYLATED HAEMOGLOBIN (HbA1c) | | | | |
| 6 | LAB | URIC ACID | | | | |
| 7 | LAB | LIPID PROFILE | | | | |
| 8 | LAB | LIVER FUNCTION TEST (LFT) | | | | |
| 9 | LAB | TOTAL PROSTATE SPECIFIC ANTIGEN - PSA | | | | |
| 10 | LAB | THYROID PROFILE/ TFT(T3, T4, TSH) | | | | |
| 11 | LAB | URINE GLUCOSE - FASTING | | | | |
| 12 | LAB | URINE GLUCOSE - POSTPRANDIAL (2 Hrs) | | | | |
| 13 | LAB | COMPLETE BLOOD COUNT WITH ESR | | | | |
| 14 | LAB | STOOL ANALYSIS - ROUTINE | | | | |
| 15 | LAB | URINE ROUTINE | | | | |
| 16 | LAB | BUN/CREATININE RATIO | | | | |
| 17 | LAB | BLOOD GROUP & RH TYPE | | | | |

| | | | |
|-----------------|----------------|------------|-----------------------|
| Name | Ishwar sharma | ID | MED111089111 |
| Age & Gender | 54Year(s)/MALE | Visit Date | 5/16/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

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 shows 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 shows normal shape, size and echopattern. Spleen measures 9.4cms in long axis and 4.2cms in short axis.

No demonstrable Para -aortic lymphadenopathy.

KIDNEYS move well with respiration and have normal shape, size and echopattern. Cortico- medullary differentiations are well made out. No evidence of calculus or hydronephrosis. **A simple cortical cyst measuring about 1.3 x 1.2cms is noted in the upper pole of the right kidney.**

The kidney measures as follows:

| | Bipolar length (cms) | Parenchymal thickness (cms) |
|---------------------|-----------------------------|------------------------------------|
| Right Kidney | 9.5 | 1.2 |
| Left Kidney | 9.7 | 1.3 |

URINARY BLADDER shows mildly (5-6mm) thickened walls. It has clear contents. No evidence of diverticula.

Prevoid: 180cc

Postvoid: 10cc

PROSTATE is mildly enlarged in size. It measures 4.7 x 3.7 x 3.9cms (Vol:35cc).

No evidence of ascites / pleural effusion.

IMPRESSION:

- **MILD PROSTATOMEGALY.**
- **CHANGES OF MILD CYSTITIS.**

DR. H.K. ANAND
CONSULTANT RADIOLOGISTS
MS/vp

DR. MEERA S

| | | | |
|-----------------|----------------|------------|-----------------------|
| Name | Ishwar sharma | ID | MED111089111 |
| Age & Gender | 54Year(s)/MALE | Visit Date | 5/16/2022 12:00:00 AM |
| Ref Doctor Name | MediWheel | | |

| | | | |
|--------------|---------------|-------------|--------------------|
| Name | Ishwar sharma | Customer ID | MED111089111 |
| Age & Gender | 54Y/M | Visit Date | May 16 2022 7:26AM |
| Ref Doctor | MediWheel | | |

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:

No significant abnormality detected.

DR. H.K. ANAND

DR. SHWETHA S

DR. CHARUL

DR. APARNA

CONSULTANT RADIOLOGISTS



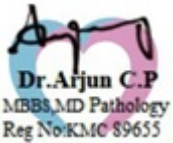
Name : Mr. Ishwar sharma
PID No. : MED111089111 Register On : 16/05/2022 7:28 AM
SID No. : 422042352 Collection On : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male Report On : 16/05/2022 2:14 PM
Type : OP Printed On : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

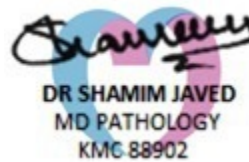
HAEMATOLOGY

Complete Blood Count With - ESR

| | | | |
|--|-------------|-------------|--------------|
| Haemoglobin (EDTA Blood/Spectrophotometry) | 13.9 | g/dL | 13.5 - 18.0 |
| Packed Cell Volume(PCV)/Haematocrit (EDTA Blood) | 43.9 | % | 42 - 52 |
| RBC Count (EDTA Blood) | 5.00 | mill/cu.mm | 4.7 - 6.0 |
| Mean Corpuscular Volume(MCV) (EDTA Blood) | 87.7 | fL | 78 - 100 |
| Mean Corpuscular Haemoglobin(MCH) (EDTA Blood) | 27.8 | pg | 27 - 32 |
| Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood) | 31.8 | g/dL | 32 - 36 |
| RDW-CV (EDTA Blood) | 13.2 | % | 11.5 - 16.0 |
| RDW-SD (EDTA Blood) | 40.52 | fL | 39 - 46 |
| Total Leukocyte Count (TC) (EDTA Blood) | 5900 | cells/cu.mm | 4000 - 11000 |
| Neutrophils (EDTA Blood) | 52.6 | % | 40 - 75 |
| Lymphocytes (EDTA Blood) | 35.4 | % | 20 - 45 |
| Eosinophils (EDTA Blood) | 3.5 | % | 01 - 06 |




VERIFIED BY



APPROVED BY


Name : Mr. Ishwar sharma
PID No. : MED111089111 **Register On** : 16/05/2022 7:28 AM
SID No. : 422042352 **Collection On** : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male **Report On** : 16/05/2022 2:14 PM
Type : OP **Printed On** : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|---|-----------------------|---------------------------|--------------------------------------|
| Monocytes (EDTA Blood) | 7.5 | % | 01 - 10 |
| Basophils (Blood) | 1.0 | % | 00 - 02 |
| INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically. | | | |
| Absolute Neutrophil count (EDTA Blood) | 3.10 | 10 ³ / μ l | 1.5 - 6.6 |
| Absolute Lymphocyte Count (EDTA Blood) | 2.09 | 10 ³ / μ l | 1.5 - 3.5 |
| Absolute Eosinophil Count (AEC) (EDTA Blood) | 0.21 | 10 ³ / μ l | 0.04 - 0.44 |
| Absolute Monocyte Count (EDTA Blood) | 0.44 | 10 ³ / μ l | < 1.0 |
| Absolute Basophil count (EDTA Blood) | 0.06 | 10 ³ / μ l | < 0.2 |
| Platelet Count (EDTA Blood) | 199 | 10 ³ / μ l | 150 - 450 |
| MPV (EDTA Blood) | 8.6 | fL | 7.9 - 13.7 |
| PCT (EDTA Blood/Automated Blood cell Counter) | 0.17 | % | 0.18 - 0.28 |
| ESR (Erythrocyte Sedimentation Rate) (Citratd Blood) | 12 | mm/hr | < 20 |



Dr. Arjun C.P
 MBBS, MD Pathology
 Reg No: KMC 89655

VERIFIED BY



DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902

APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 **Register On** : 16/05/2022 7:28 AM
SID No. : 422042352 **Collection On** : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male **Report On** : 16/05/2022 2:14 PM
Type : OP **Printed On** : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

BIOCHEMISTRY

Liver Function Test

| | | | |
|--|-------|-------|-----------|
| Bilirubin(Total) (Serum/DCA with ATCS) | 0.57 | mg/dL | 0.1 - 1.2 |
| Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid) | 0.21 | mg/dL | 0.0 - 0.3 |
| Bilirubin(Indirect) (Serum/Derived) | 0.36 | mg/dL | 0.1 - 1.0 |
| SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC) | 20.26 | U/L | 5 - 40 |
| SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC) | 12.52 | U/L | 5 - 41 |
| GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic) | 18.65 | U/L | < 55 |
| Alkaline Phosphatase (SAP) (Serum/Modified IFCC) | 58.7 | U/L | 56 - 119 |
| Total Protein (Serum/Biuret) | 6.62 | gm/dl | 6.0 - 8.0 |
| Albumin (Serum/Bromocresol green) | 4.61 | gm/dl | 3.5 - 5.2 |
| Globulin (Serum/Derived) | 2.01 | gm/dL | 2.3 - 3.6 |
| A : G RATIO (Serum/Derived) | 2.29 | | 1.1 - 2.2 |


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902
APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 **Register On** : 16/05/2022 7:28 AM
SID No. : 422042352 **Collection On** : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male **Report On** : 16/05/2022 2:14 PM
Type : OP **Printed On** : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|---|-----------------------|-------------|---|
| <u>Lipid Profile</u> | | | |
| Cholesterol Total (Serum/CHOD-PAP with ATCS) | 138.03 | mg/dL | Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240 |
| Triglycerides (Serum/GPO-PAP with ATCS) | 96.11 | mg/dL | Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500 |

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) | 46.64 | mg/dL | Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40 |
| LDL Cholesterol (Serum/Calculated) | 72.2 | mg/dL | Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190 |
| VLDL Cholesterol (Serum/Calculated) | 19.2 | mg/dL | < 30 |
| Non HDL Cholesterol (Serum/Calculated) | 91.4 | mg/dL | Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220 |



DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 **Register On** : 16/05/2022 7:28 AM
SID No. : 422042352 **Collection On** : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male **Report On** : 16/05/2022 2:14 PM
Type : OP **Printed On** : 19/05/2022 12:58 PM
Ref. Dr : MediWheel


| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

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

| | | | |
|--|-----|--|--|
| Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated) | 2.1 | | Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0 |
|--|-----|--|--|

| | | | |
|---|-----|--|---|
| LDL/HDL Cholesterol Ratio (Serum/Calculated) | 1.5 | | Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0 |
|---|-----|--|---|


DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902
APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 Register On : 16/05/2022 7:28 AM
SID No. : 422042352 Collection On : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male Report On : 16/05/2022 2:14 PM
Type : OP Printed On : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|--|-----------------------|-------------|---|
| <u>Glycosylated Haemoglobin (HbA1c)</u> | | | |
| HbA1C (Whole Blood/HPLC) | 7.6 | % | 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 171.42 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 glyceimic 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.


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902
APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 **Register On** : 16/05/2022 7:28 AM
SID No. : 422042352 **Collection On** : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s)/ Male **Report On** : 16/05/2022 2:14 PM
Type : OP **Printed On** : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

IMMUNOASSAY

THYROID PROFILE / TFT

| | | | |
|--|-------|-------|------------|
| T3 (Triiodothyronine) - Total (Serum/ECLIA) | 0.909 | ng/ml | 0.4 - 1.81 |
|--|-------|-------|------------|

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 (Tyroxine) - Total (Serum/ECLIA) | 9.27 | µg/dl | 4.2 - 12.0 |
|--|------|-------|------------|

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/ECLIA) | 1.61 | µIU/mL | 0.35 - 5.50 |
|--|------|--------|-------------|

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

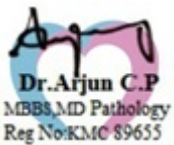
(Indian Thyroid Society Guidelines)

Comment :

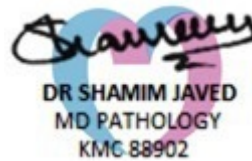
1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

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



VERIFIED BY



APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 **Register On** : 16/05/2022 7:28 AM
SID No. : 422042352 **Collection On** : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male **Report On** : 16/05/2022 2:14 PM
Type : OP **Printed On** : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|

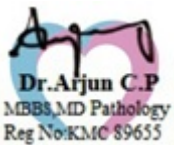
CLINICAL PATHOLOGY

PHYSICAL EXAMINATION (URINE COMPLETE)

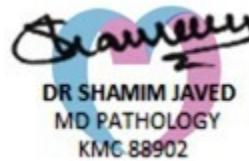
| | | | |
|------------------------|-------------|--|-----------------|
| Colour (Urine) | Pale Yellow | | Yellow to Amber |
| Appearance (Urine) | Clear | | Clear |
| Volume(CLU) (Urine) | 15 | | |

CHEMICAL EXAMINATION (URINE COMPLETE)

| | | | |
|-----------------------------|----------|--|---------------|
| pH (Urine) | 6.0 | | 4.5 - 8.0 |
| Specific Gravity (Urine) | 1.010 | | 1.002 - 1.035 |
| Ketone (Urine) | Negative | | Negative |
| Urobilinogen (Urine) | Normal | | Normal |
| Blood (Urine) | Negative | | Negative |
| Nitrite (Urine) | Negative | | Negative |
| Bilirubin (Urine) | Negative | | Negative |
| Protein (Urine) | Negative | | Negative |



VERIFIED BY



APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 **Register On** : 16/05/2022 7:28 AM
SID No. : 422042352 **Collection On** : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male **Report On** : 16/05/2022 2:14 PM
Type : OP **Printed On** : 19/05/2022 12:58 PM
Ref. Dr : MediWheel


| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|------------------------------|-----------------------|-------------|--------------------------------------|
| Glucose (Urine/GOD - POD) | Negative | | Negative |
| Leukocytes(CP) (Urine) | Negative | | |

MICROSCOPIC EXAMINATION
(URINE COMPLETE)

| | | | |
|-----------------------------|------------|------|-----|
| Pus Cells (Urine) | 0-1 | /hpf | NIL |
| Epithelial Cells (Urine) | 1-2 | /hpf | NIL |
| RBCs (Urine) | Nil | /hpf | NIL |
| Others (Urine) | Nil | | |


INTERPRETATION:Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

| | | | |
|---------------------|-----|------|-----|
| Casts (Urine) | Nil | /hpf | NIL |
| Crystals (Urine) | Nil | /hpf | NIL |



Dr. Arjun C.P
 MBBS, MD Pathology
 Reg No:KMC 89655

VERIFIED BY



DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902

APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 Register On : 16/05/2022 7:28 AM
SID No. : 422042352 Collection On : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male Report On : 16/05/2022 2:14 PM
Type : OP Printed On : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|


PHYSICAL EXAMINATION(STOOL COMPLETE)

| | | | |
|---------------------|-------------------|--|---------------------|
| Mucus (Stool) | Absent | | Absent |
| Consistency (Stool) | Semi Solid | | Semi Solid to Solid |
| Colour (Stool) | Brownish | | Brown |
| Blood (Stool) | Absent | | Absent |

MICROSCOPIC EXAMINATION(STOOL COMPLETE)


| | | | |
|----------------------|------------|------|-----|
| Ova (Stool) | NIL | | NIL |
| Cysts (Stool) | NIL | | NIL |
| Trophozoites (Stool) | NIL | | NIL |
| RBCs (Stool) | NIL | /hpf | Nil |
| Pus Cells (Stool) | 1-3 | /hpf | NIL |
| Others (Stool) | NIL | | |

CHEMICAL EXAMINATION(STOOL ROUTINE)



Dr. Arjun C.P
MBBS, MD Pathology
Reg No. KMC 89655

VERIFIED BY




DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY


Name : Mr. Ishwar sharma
PID No. : MED111089111 Register On : 16/05/2022 7:28 AM
SID No. : 422042352 Collection On : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male Report On : 16/05/2022 2:14 PM
Type : OP Printed On : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|---|-----------------------|-------------|--------------------------------------|
| Reaction (Stool) | Alkaline | | Alkaline |
| Reducing Substances (Stool/Benedict's) | Negative | | Negative |



Dr. Arjun C.P
MBBS, MD Pathology
Reg No: KMC 89655

VERIFIED BY



DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902


APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 Register On : 16/05/2022 7:28 AM
SID No. : 422042352 Collection On : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male Report On : 16/05/2022 2:14 PM
Type : OP Printed On : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|----------------------|-----------------------|-------------|--------------------------------------|
|----------------------|-----------------------|-------------|--------------------------------------|


IMMUNOHAEMATOLOGY

| | | | |
|--|---------------|--|--|
| BLOOD GROUPING AND Rh TYPING (EDTA Blood/Agglutination) | 'B' Positive' | | |
|--|---------------|--|--|



Dr. Arjun C.P
MBBS, MD Pathology
Reg No:KMC 89655

VERIFIED BY



DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 **Register On** : 16/05/2022 7:28 AM
SID No. : 422042352 **Collection On** : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male **Report On** : 16/05/2022 2:14 PM
Type : OP **Printed On** : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|---|-----------------------|-------------|--|
| <u>BIOCHEMISTRY</u> | | | |
| BUN / Creatinine Ratio | 6.9 | | 6.0 - 22.0 |
| Glucose Fasting (FBS) (Plasma - F/GOD-PAP) | 149.11 | 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/GOD - POD) | Negative | | Negative |
| Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP) | 169.00 | 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.

| | | | |
|--|----------|-------|-----------|
| Urine Glucose(PP-2 hours) (Urine - PP) | Negative | | Negative |
| Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived) | 7.2 | mg/dL | 7.0 - 21 |
| Creatinine (Serum/Modified Jaffe) | 1.03 | mg/dL | 0.9 - 1.3 |

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/Enzymatic) | 5.11 | mg/dL | 3.5 - 7.2 |
|--------------------------------|------|-------|-----------|


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902
APPROVED BY

Name : Mr. Ishwar sharma
PID No. : MED111089111 Register On : 16/05/2022 7:28 AM
SID No. : 422042352 Collection On : 16/05/2022 8:04 AM
Age / Sex : 54 Year(s) / Male Report On : 16/05/2022 2:14 PM
Type : OP Printed On : 19/05/2022 12:58 PM
Ref. Dr : MediWheel

| <u>Investigation</u> | <u>Observed Value</u> | <u>Unit</u> | <u>Biological Reference Interval</u> |
|---|-----------------------|-------------|--|
| <u>IMMUNOASSAY</u> | | | |
| Prostate specific antigen - Total(PSA) (Serum/Manometric method) | 1.24 | ng/ml | Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0 |

INTERPRETATION: Analytical sensitivity: 0.008 - 100 ng/mL

PSA is a tumor marker for screening of prostate cancer. Increased levels of PSA are associated with prostate cancer and benign conditions like bacterial infection, inflammation of prostate gland and benign hypertrophy of prostate/ benign prostatic hyperplasia (BPH).

Transient elevation of PSA levels are seen following digital rectal examination, rigorous physical activity like bicycle riding, ejaculation within 24 hours.

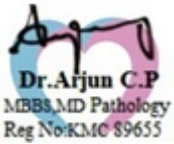
PSA levels tend to increase in all men as they age.

Clinical Utility of PSA:

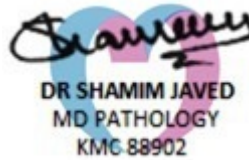
ÉIn the early detection of Prostate cancer.

ÉAs an aid in discriminating between Prostate cancer and Benign Prostatic disease.

ÉTo detect cancer recurrence or disease progression.



VERIFIED BY



APPROVED BY

-- End of Report --