Reg. No : 2402100335

Name : GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

Client: MEDIWHEEL WELLNESS

Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On: 10-Feb-2024 13:00

Printed On : 10-Feb-2024 13:00

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval
	COMPLETE BLC	OD COUNT (CBC)

Hemoglobin 17.2 g/dL 13.0 - 17.0 RBC Count 5.26 million/cmm 4.5 - 5.5 Hematrocrit (PCV) 49.8 % 40 - 54 MCH 32.7 Pg 27 - 32 MCV 94.7 fL 83 - 101 MCHC 34.5 % 31.5 - 34.5 RDW 13.6 % 11.5 - 14.5 WBC Count 8650 /cmm 4000 - 11000 DIFFERENTIAL WBC COUNT (Flow cytometry) Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	
Hematrocrit (PCV) 49.8 % 40 - 54 MCH 32.7 Pg 27 - 32 MCV 94.7 fL 83 - 101 MCHC 34.5 % 31.5 - 34.5 RDW 13.6 % 11.5 - 14.5 WBC Count 8650 /cmm 4000 - 11000 DIFFERENTIAL WBC COUNT (Flow cytometry) Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 0 % 0 - 2	oglobin
MCH 32.7 Pg 27 - 32 MCV 94.7 fL 83 - 101 MCHC 34.5 % 31.5 - 34.5 RDW 13.6 % 11.5 - 14.5 WBC Count 8650 /cmm 4000 - 11000 DIFFERENTIAL WBC COUNT (Flow cytometry) Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	Count
MCV 94.7 fL 83 - 101 MCHC 34.5 % 31.5 - 34.5 RDW 13.6 % 11.5 - 14.5 WBC Count 8650 /cmm 4000 - 11000 DIFFERENTIAL WBC COUNT (Flow vtometry) Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	atrocrit (PCV)
MCHC 34.5 % 31.5 - 34.5 RDW 13.6 % 11.5 - 14.5 WBC Count 8650 /cmm 4000 - 11000 DIFFERENTIAL WBC COUNT (Flow cytometry) Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	1
RDW 13.6 % 11.5 - 14.5 WBC Count 8650 /cmm 4000 - 11000 DIFFERENTIAL WBC COUNT (Flow cytometry) Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	!
WBC Count 8650 /cmm 4000 - 11000 DIFFERENTIAL WBC COUNT (Flow cytometry) Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	łC
DIFFERENTIAL WBC COUNT (Flow cytometry) Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	V
Neutrophils (%) 56 % 38 - 70 Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	Count
Lymphocytes (%) 39 % 20 - 40 Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	ERENTIAL WBC COUNT (Flow
Monocytes (%) 04 % 2 - 8 Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	rophils (%)
Eosinophils (%) 01 % 0 - 6 Basophils (%) 0 % 0 - 2	phocytes (%)
Basophils (%) 0 % 0 - 2	ocytes (%)
	nophils (%)
Novince halo	ophils (%)
Neutrophils 4844 /cmm	trophils
Lymphocytes 3374 /cmm	phocytes
Monocytes 346 /cmm	ocytes
Eosinophils 87 /cmm	nophils
Basophils 0 /cmm	ophils
Platelet Count (Flow cytometry) 299000 /cmm 150000 - 45000	elet Count (Flow cytometry)
MPV 8.5 fL 7.5 - 11.5	,
ERYTHROCYTE SEDIMENTATION RATE	THROCYTE SEDIMENTATION F
ESR (After 1 hour) 12 mm/hr 0 - 14 Modified Westergren Method	,

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

Page 1 of 11

Approved by: DR PS RAO

MD Pathologist



: 2402100335 Reg. No

: GADHWAL HARLAL SINGH Name

Age/Sex 48 Years / Male

Ref. By

Client : MEDIWHEEL WELLNESS Reg. Date

: 10-Feb-2024

Collected On

: 10-Feb-2024 11:47

Approved On

: 10-Feb-2024 11:56

Printed On : 10-Feb-2024 13:00

<u>Unit</u> Reference Interval **Parameter** Result

PLASMA GLUCOSE

Fasting Blood Sugar (FBS) 80.1 mg/dL 70 - 110

Hexokinase Method

97.6 70 - 140 Post Prandial Blood Sugar (PPBS) mg/dL

Hexokinase Method

Criteria for the diagnosis of diabetes1. HbA1c >/= 6.5 *

2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

3. Two hour plasma glucose >/= 200mg/dL during an oral glucose tolerence test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >/= 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.

American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

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

TEST REPORT

Reg. No : 2402100335

Name : GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

<u>Parameter</u>

Client : MEDIWHEEL WELLNESS Reg. Date

: 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On : 10-Feb-2024 11:56

Printed On

: 10-Feb-2024 13:00

Unit	Reference Interval

KIDNEY FUNCTION TEST				
UREA (Urease & glutamate dehydrogenase)	21.4	mg/dL	10 - 50	
Creatinine (Jaffe method)	0.71	mg/dL	0.5 - 1.4	
Uric Acid (Enzymatic colorimetric)	4.9	mg/dL	2.5 - 7.0	

Result

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

Reg. No : 2402100335

Name : GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

Client MEDIWHEEL WELLNESS Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On : 10-Feb-2024 11:56

Printed On : 10-Feb-2024 13:00

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval	
	LIVER FUN	ICTION TEST WIT	TH GGT	
Total Bilirubin	0.36	mg/dL	0.10 - 1.0	
Colorimetric diazo method				
Conjugated Bilirubin	0.09	mg/dL	0.0 - 0.3	
Sulph acid dpl/caff-benz				
Unconjugated Bilirubin	0.27	mg/dL	0.0 - 1.1	
Sulph acid dpl/caff-benz				
SGOT	28.4	U/L	0 - 37	
(Enzymatic)				
SGPT	30.1	U/L	0 - 40	
(Enzymatic)				
GGT	22.4	U/L	11 - 49	
(Enzymatic colorimetric)				
Alakaline Phosphatase	108.6	U/L	53 - 130	
(Colorimetric standardized method)				
Protien with ratio				
Total Protein	7.1	g/dL	6.5 - 8.7	
(Colorimetric standardized method)				
Albumin	4.0	mg/dL	3.5 - 5.3	
(Colorimetric standardized method)				
Globulin	3.10	g/dL	2.3 - 3.5	
Calculated				
A/G Ratio	1.29		0.8 - 2.0	
Calculated				

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

This is an electronically authenticated report.



Reg. No : 2402100335

Name : GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

Client : MEDIWHEEL WELLNESS Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On : 10-Feb-2024 11:56

Printed On : 10-Feb-2024 13:00

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval
	LI	PID PROFILE	
Cholesterol (Enzymatic colorimetric)	136.4	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride (Enzymatic colorimetric)	189.7	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
VLDL	37.94	mg/dL	15 - 35
Calculated			
LDL CHOLESTEROL	69.56	mg/dL	Optimal: < 100.0 Near / above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: >190.0
HDL Cholesterol	28.9	mg/dL	30 - 70
Homogeneous enzymatic colorime	tric		
Cholesterol /HDL Ratio Calculated	4.72		0 - 5.0
LDL / HDL RATIO Calculated	2.41		0 - 3.5

This is an electronically authenticated report.



Reg. No : 2402100335

Name : GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

Client : MEDIWHEEL WELLNESS

Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On : 10-Feb-2024 11:56

Printed On : 10-Feb-2024 13:00

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

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 ------

Page 6 of 11

Approved by: DR PS RAO

MD Pathologist



Reg. No : 2402100335

Name : GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

Client: MEDIWHEEL WELLNESS

Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On : 10-Feb-2024 11:57

Printed On : 10-Feb-2024 13:00

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval	
	THYRC	DID FUNCTION TE	ST	
T3 (Triiodothyronine)	0.91	ng/mL	0.87 - 1.81	
Chemiluminescence				
T4 (Thyroxine)	8.22	μg/dL	5.89 - 14.9	
Chemiluminescence				
TSH (ultra sensitive)	4.336	μIU/ml	0.34 - 5.6	
Chemiluminescence				

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 -----

TEST REPORT

: 2402100335 Reg. No

Name : GADHWAL HARLAL SINGH

48 Years / Male

Age/Sex Ref. By

Parameter

Client : MEDIWHEEL WELLNESS Reg. Date

: 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Printed On : 10-Feb-2024 13:00

Approved On : 10-Feb-2024 11:56

Reference Interval

HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

Hb A1C

Boronate Affinity with Fluorescent Quenching

5.7 % of Total Hb

Poor Control: > 7.0 %

Good Control: 6.2-7.0 % Non-diabetic Level: 4.3-6.2 %

Mean Blood Glucose Calculated

125.62

Result

mg/dL

Unit

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 symthesised in the red blood cell throught 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 oncentration 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 measurnment which effects 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:

*Errneous 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 -----

Page 8 of 11

This is an electronically authenticated report.

DR PS RAO Approved by: MD Pathologist

TEST REPORT

Reg. No : 2402100335

Name : GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

Parameter

Client : MEDIWHEEL WELLNESS

Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On : 10-Feb-2024 11:57

Printed On : 10-Feb-2024 13:00

Result Unit Reference Interval

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity 20 cc

Colour Pale Yellow

Appearance Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC METHOD)

pH 6.0 5.0 - 8.0 Sp. Gravity 1.005 1.002 - 1.03

Nil Protein Nil Glucose 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)

Erythrocytes (Red Cells)

Nil

Epithelial Cells

Amorphous Material

Casts

Nil

Crystals

Nil

Nil

Bacteria Nil Monilia Nil

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

TEST REPORT

Reg. No : 2402100335

Name : GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

Parameter

Client: MEDIWHEEL WELLNESS

Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On : 10-Feb-2024 11:57

Printed On : 10-Feb-2024 13:00

<u>Unit</u> <u>Reference Interval</u>

STOOL EXAMINATION

Colour Yellow

Consistency Semi Solid

Result

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

Ril
Epithelial Cells

Vegetable Cells

Trophozoites

Nil
Cysts

Nil
Ova

Nil
Neutral Fat

Nil
Nil

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

Nil

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

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

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

Page 10 of 11

Monilia

Approved by: DR PS RAO

MD Pathologist

		TEST REPORT		
Reg. No	: 2402100335		Reg. Date	: 10-Feb-2024
Name	: GADHWAL HARLAL SINGH		Collected On	: 10-Feb-2024 11:47
Age/Sex	: 48 Years / Male		Approved On	: 10-Feb-2024 13:00
Ref. By	:		Printed On	: 10-Feb-2024 13:00
Client	: MEDIWHEEL WELLNESS			
Paramete	<u>er</u>	Result		
	Specimen:	BLOOD GROUP & RH EDTA and Serum; Method: Haemagglu	utination	
ABO		'A'		
Rh (D)		Positive		
	-	End Of Report		



 Name
 : GADHWAL HARLAL SINGH
 Collected On
 : 10-Feb-2024 11:47

 Age/Sex
 : 48 Years / Male
 Approved On
 : 10-Feb-2024 13:00

Ref. By : **Printed On** : 10-Feb-2024 13:00

Client : MEDIWHEEL WELLNESS

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval				
COMPLETE BLOOD COUNT (CBC)							
	SPECIMEN:	EDTA BLOOD					
Hemoglobin	17.2	g/dL	13.0 - 17.0				
RBC Count	5.26	million/cmm	4.5 - 5.5				
Hematrocrit (PCV)	49.8	%	40 - 54				
MCH	32.7	Pg	27 - 32				
MCV	94.7	fL	83 - 101				
MCHC	34.5	%	31.5 - 34.5				
RDW	13.6	%	11.5 - 14.5				
WBC Count	8650	/cmm	4000 - 11000				
DIFFERENTIAL WBC COUNT (Flow	cytometry)						
Neutrophils (%)	56	%	38 - 70				
Lymphocytes (%)	39	%	20 - 40				
Monocytes (%)	04	%	2 - 8				
Eosinophils (%)	01	%	0 - 6				
Basophils (%)	0	%	0 - 2				
Neutrophils	4844	/cmm					
Lymphocytes	3374	/cmm					
Monocytes	346	/cmm					
Eosinophils	87	/cmm					
Basophils	0	/cmm					
Platelet Count (Flow cytometry)	299000	/cmm	150000 - 450000				
MPV	8.5	fL	7.5 - 11.5				
ERYTHROCYTE SEDIMENTATION F	RATE						
ESR (After 1 hour)	12	mm/hr	0 - 14				
Modified Westergren Method							

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

Page 1 of 11

This is an electronically authenticated report.

Approved by: DR PS RAO



2402100335 Reg. No

Name GADHWAL HARLAL SINGH

Age/Sex 48 Years / Male

Ref. By

<u>Parameter</u>

Client : MEDIWHEEL WELLNESS Reg. Date

: 10-Feb-2024

Collected On

: 10-Feb-2024 11:47

Approved On

: 10-Feb-2024 11:56

Printed On 10-Feb-2024 13:00

Reference Interval

PLASMA GLUCOSE

Fasting Blood Sugar (FBS)

80.1

Result

mg/dL

<u>Unit</u>

70 - 110

Hexokinase Method

Post Prandial Blood Sugar (PPBS)

97.6

mg/dL

70 - 140

Hexokinase Method

Criteria for the diagnosis of diabetes 1. HbA1c >/= 6.5 *

2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

3. Two hour plasma glucose >/= 200mg/dL during an oral glucose tolerence test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >/= 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.

American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

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

Page 2 of 11

This is an electronically authenticated report.

Test done from collected sample

2-B, Hazareshwar Colony, Udaipur 313001 (Raj.) , Mob.: 7229961115, 7229970005

(24 x 7 Customer Service) Email : kshipralabsudaipur@gmail.com

Approved by:



: MEDIWHEEL WELLNESS

TEST REPORT

2402100335 Reg. Date Reg. No : 10-Feb-2024 Name : GADHWAL HARLAL SINGH **Collected On**

: 10-Feb-2024 11:47 Age/Sex : 48 Years / Male **Approved On** : 10-Feb-2024 11:56

Ref. By **Printed On** : 10-Feb-2024 13:00

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

KIDNEY FUNCTION TEST				
UREA (Urease & glutamate dehydrogenase)	21.4	mg/dL	10 - 50	
Creatinine (Jaffe method)	0.71	mg/dL	0.5 - 1.4	
Uric Acid (Enzymatic colorimetric)	4.9	mg/dL	2.5 - 7.0	

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



Client

This is an electronically authenticated report.

Test done from collected sample

Approved by:

2-B, Hazareshwar Colony, Udaipur 313001 (Raj.) , Mob.: 7229961115, 7229970005 (24 x 7 Customer Service) Email: kshipralabsudaipur@gmail.com



Reg. No 2402100335 Reg. Date : 10-Feb-2024

Name GADHWAL HARLAL SINGH Collected On : 10-Feb-2024 11:47 Age/Sex : 48 Years / Male **Approved On** : 10-Feb-2024 11:56

Ref. By **Printed On** : 10-Feb-2024 13:00

Client : MEDIWHEEL WELLNESS

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval		
LIVER FUNCTION TEST WITH GGT					
Total Bilirubin	0.36	mg/dL	0.10 - 1.0		
Colorimetric diazo method					
Conjugated Bilirubin	0.09	mg/dL	0.0 - 0.3		
Sulph acid dpl/caff-benz					
Unconjugated Bilirubin	0.27	mg/dL	0.0 - 1.1		
Sulph acid dpl/caff-benz					
SGOT	28.4	U/L	0 - 37		
(Enzymatic)					
SGPT	30.1	U/L	0 - 40		
(Enzymatic)					
GGT	22.4	U/L	11 - 49		
(Enzymatic colorimetric)					
Alakaline Phosphatase	108.6	U/L	53 - 130		
(Colorimetric standardized method					
Protien with ratio					
Total Protein	7.1	g/dL	6.5 - 8.7		
(Colorimetric standardized method)				
Albumin	4.0	mg/dL	3.5 - 5.3		
(Colorimetric standardized method)				
Globulin	3.10	g/dL	2.3 - 3.5		
Calculated					
A/G Ratio	1.29		0.8 - 2.0		
Calculated					
_					

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

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Reg. No : 2402100335

Name GADHWAL HARLAL SINGH

Age/Sex : 48 Years / Male

Ref. By

Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

Approved On : 10-Feb-2024 11:56

Printed On : 10-Feb-2024 13:00

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval
	LI	PID PROFILE	
Cholesterol (Enzymatic colorimetric)	136.4	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride (Enzymatic colorimetric)	189.7	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
VLDL	37.94	mg/dL	15 - 35
Calculated			
LDL CHOLESTEROL	69.56	mg/dL	Optimal : < 100.0 Near / above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >190.0
HDL Cholesterol	28.9	mg/dL	30 - 70
Homogeneous enzymatic color	imetric		
Cholesterol /HDL Ratio Calculated	4.72		0 - 5.0
LDL / HDL RATIO Calculated	2.41		0 - 3.5



2402100335 Reg. No

Name GADHWAL HARLAL SINGH

Age/Sex 48 Years / Male

Ref. By

Client MEDIWHEEL WELLNESS Reg. Date : 10-Feb-2024

Collected On : 10-Feb-2024 11:47

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Printed On : 10-Feb-2024 13:00

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

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP<?xml:namespace prefix = "o" ns = "urn:schemasmicrosoft-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 ---

Page 6 of 11

This is an electronically authenticated report

Approved by: DR PS RAO

(24 x 7 Customer Service) Email : kshipralabsudaipur@gmail.com



2402100335 Reg. Date Reg. No Name GADHWAL HARLAL SINGH Collected On

: 10-Feb-2024 11:47 Age/Sex : 48 Years / Male Approved On : 10-Feb-2024 11:57

Ref. By Printed On : 10-Feb-2024 13:00

Client : MEDIWHEEL WELLNESS

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval	
THYROID FUNCTION TEST				
T3 (Triiodothyronine)	0.91	ng/mL	0.87 - 1.81	
Chemiluminescence				
T4 (Thyroxine)	8.22	μg/dL	5.89 - 14.9	
Chemiluminescence				
TSH (ultra sensitive)	4.336	μIU/ml	0.34 - 5.6	
Chemiluminescence				

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



: 10-Feb-2024



 Name
 : GADHWAL HARLAL SINGH
 Collected On
 : 10-Feb-2024 11:47

 Age/Sex
 : 48 Years / Male
 Approved On
 : 10-Feb-2024 11:56

Ref. By : **Printed On** : 10-Feb-2024 13:00

Client : MEDIWHEEL WELLNESS

Parameter Result Unit Reference Interval

HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

Hb A1C 5.7 % of Total Hb Poor Control: > 7.0 % Good Control: 6.2-7.0 %

Non-diabetic Level : 4.3-6.2 %

Mean Blood Glucose 125.62 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 symthesised in the red blood cell throught 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 oncentration 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 measurnment which effects 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:

*Errneous 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 -----

Page 8 of 11

This is an electronically authenticated report.

Test done from collected sample

()h

Approved by: DR PS RAO MD Pathologis

2-B, Hazareshwar Colony, Udaipur 313001 (Raj.) , Mob.: 7229961115, 7229970005 (24 x 7 Customer Service) Email : kshipralabsudaipur@gmail.com



 Name
 : GADHWAL HARLAL SINGH
 Collected On
 : 10-Feb-2024 11:47

 Age/Sex
 : 48 Years / Male
 Approved On
 : 10-Feb-2024 11:57

Ref. By : **Printed On** : 10-Feb-2024 13:00

Client : MEDIWHEEL WELLNESS

Result

URINE ROUTINE EXAMINATION

Unit

Reference Interval

PHYSICAL EXAMINATION

Parameter

Quantity 20 cc
Colour Pale Yellow
Appearance Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC METHOD)

pH 6.0 5.0 - 8.0 Sp. Gravity 1.005 1.002 - 1.03

Nil Protein Nil Glucose Ketone Bodies Nil Urine Bile salt and Bile Pigment Nil Urine Bilirubin Nil Nitrite Nil Nil Leucocytes Blood Nil

MICROSCOPIC EXAMINATION (MANUAL BY MCIROSCOPY)

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

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

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STOOL EXAMINATION

Colour Yellow
Consistency Semi Solid

MEDIWHEEL WELLNESS

CHEMICAL EXAMINATION

Occult Blood Negative

Peroxidase Reaction with o-

Dianisidine

Client

Reaction Acidic

pH Strip Method

Reducing Substance Absent

Benedict's Method

MICROSCOPIC EXAMINATION

Mucus Nil
Pus Cells 1 - 2/hpf

Red Cells

Fighthelial Cells

Vegetable Cells

Nil

Trophozoites

Nil

Cysts

Nil

Ova

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 occassinal unruptured RBCs.

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

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

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Ref. By : **Printed On** : 10-Feb-2024 13:00

<u>Parameter</u> <u>Result</u>

: MEDIWHEEL WELLNESS

Client

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

ABO 'A'

Rh (D) Positive

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

Page 11 of 11

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Test done from collected sample

Approved by: DR PS RAO

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