



DR. CHARU HEALTH CHECK UP &lt;insurancedckc234@gmail.com&gt;

## Health Check up Booking Request(35E5682)

Mediwheel <wellness@mediwheel.in>  
 To: insurancedckc234@gmail.com  
 Cc: customercare@mediwheel.in

3 May 2024 at 18:31

*mineendra@gmail.com*



**Mediwheel**  
 ...Your wellness partner

011-41195959

Dear Dr. Charu Kohli Cilnic

We have received a booking request with the following details. Provide your confirmation by clicking on the Yes button.

**You confirm this booking?**  Yes  No

Name : MINEENDRA .S.R  
 Contact Details : 9967887077  
 Hospital Package Name : MediWheel Full Body Comprehensive Plus Vitamins Female  
 Location : A C-234, Block C, Defence Colony,  
 Appointment Date : 12-05-2024

Member Information		
Booked Member Name	Age	Gender
MINEENDRA .S.R	45 year	Female

### Tests included in this Package -

- Bmi Check
- Pap Smear
- ✓ Mammography
- ✓ Ent Consultation
- Dietician Consultation
- Gynae Consultation
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- ✓ Chest X-ray
- ECG
- ✓ USG Whole Abdomen
- Eye Check-up consultation
- Vitamin B12
- Vitamin D
- Urine Sugar Fasting
- Urine Sugar PP

- **Dental Consultation**
- **Phosphorous**
- **Urine analysis**
- **CBC**
- **HbA1c**
- **Lipid Profile**
- **Kidney Profile**
- **Liver profile**

Thanks,  
Mediwheel Team  
Please Download Mediwheel App



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52 / 55

@ 2024 - 25, Arcofemi Healthcare Pvt Limited.(Mediwheel)

NAME : MINEENDRA S R

AGE/SEX : 45Y/F

DATE : 23.06.2024

Height	Weight	BP	BMI
157 cm	55 kg	130/88 mmHg	22.3
<u>HABITS</u>	SMOKING : NO ALCOHOL : NO DRUGS ; NO		

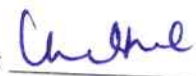
**Family History:**

- Asthma : NO
- Diabetes : MOTHER HAS DM X 20 YRS
- TB : NO
- Cancer : NO
- Heart Disease : NO
- HTN : NO
- BP : NO
- Thyroid : NO

**Personal History:**

- Pleurisy : NO
- Rheumatic : NO
- Acquired deformity : NO
- Operated for : LSCS X 2005
- Accidents : NO
- Psychosomatic history : NO
- Diabetes : NI
- Thyroid : NO
- BP : NO
- TB : NO

Eye / Vision	DISTANCE VISION		NEAR VISION		COLOUR VISION	GLASSES
	RT Eye	LT Eye	RT Eye	LT Eye		
	6/18 Without glass	6/18 Without glass	N/6	N/6	NORMAL	YES

Signature of Medical Examiner: 

**DR. CHARU KOHLI**  
CONSULTANT MBBS  
DMC-8388

Name: Minendra  
Date: June 23, 2024

### WHOLE ABDOMEN SCAN( SCREENING )

Liver is normal in size and echotexture is raised. Partially obliterated intrahepatic biliary radicles and normal appearing venous channels. No focal lesion in either lobes. Portal vein is normal. No sub-diaphragmatic collection or pleural effusion.

Gall bladder is normal distended and shows echofree lumen.  
CBD: not dilated ; apparently echofree.

Both the kidneys are normal in size, position and echopattern with normal pelvicalyceal systems and corticomedullary differentiation.

LK: 8.88 x 4.73 cm  
RK: 7.56 x 2.91 cm

Pancreas is of normal size & echopattern. No focal lesion or peri-pancreatic collection.

Spleen is of normal size and echopattern. No focal lesion or calcification. Splenic vein is not dilated.

Aorta and IVC are normal. No retroperitoneal lymphadenopathy.

Urinary bladder shows normal distension and wall-thickness. No calculus or mass.

Uterus measures 6.21 x 6.5 cm in a.p. and transverse diameters and is 8.51 cm in fundo-cervical length. Endometrial lining is regular and maintained and is 6.7 mm thick. Multiple myomata measuring 2.55 x 1.97cm, 1.29 x 3.29cm, 2.93 x 2.55cm size noted, remaining myometrial echoes are maintained with a regular serosal outline.

Cervix is normal in length and mucosal pattern. Echopattern is homogenous.

Rt. Ovary measures 2.19 x 1.14 cm  
Lt. ovary measures 1.72 x 1.01 cm

No free fluid is seen in cul de sac.

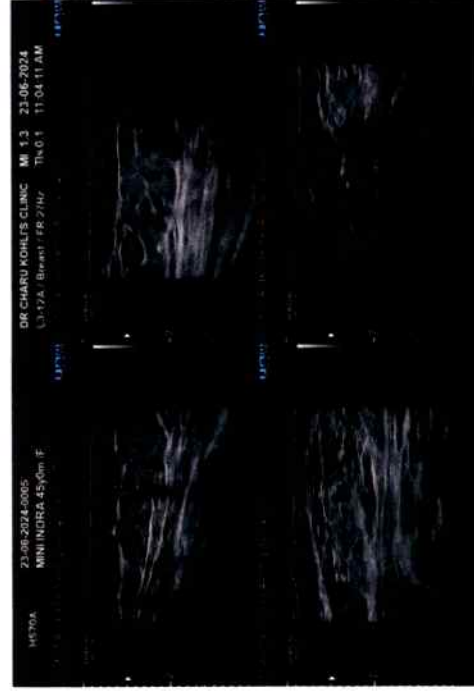
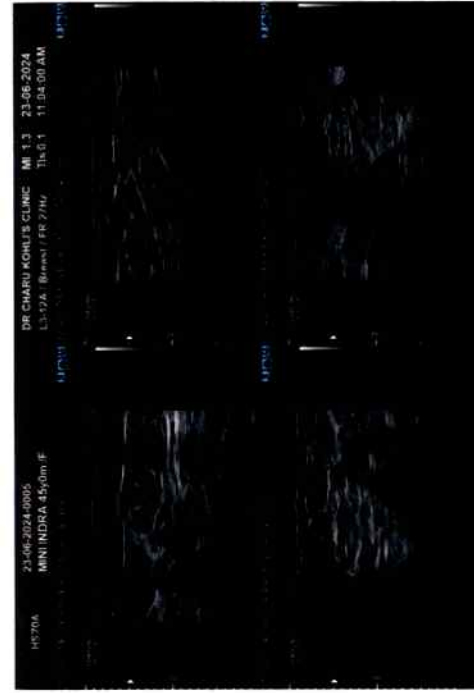
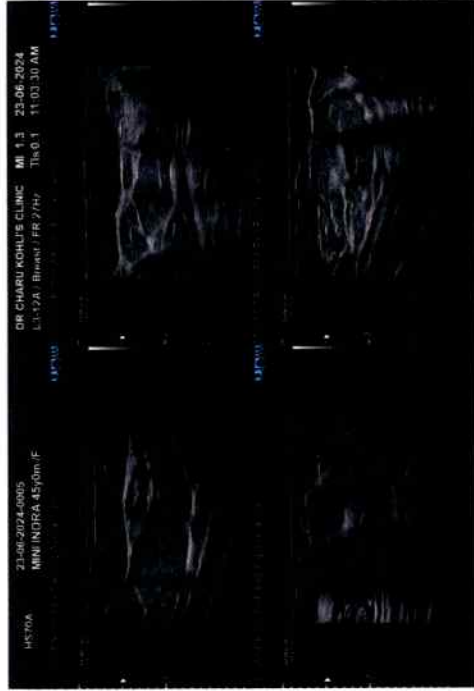
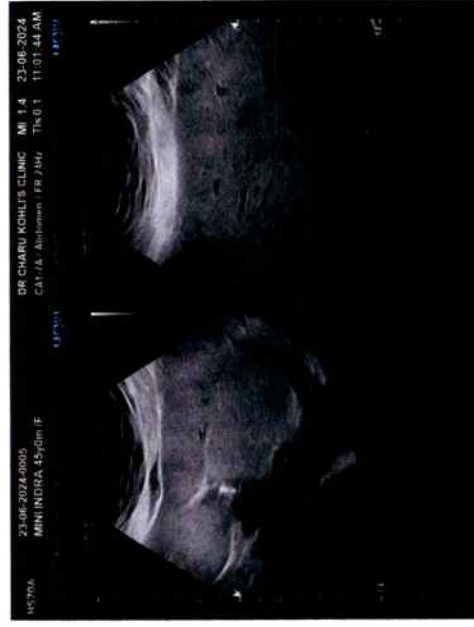
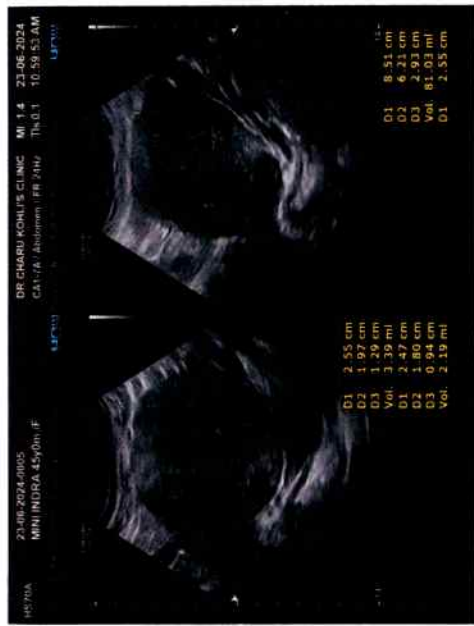
### IMPRESSION:

Grade 2 fatty liver with multiple uterine myomata ,otherwise sonological study is within normal limits .



**DR CHARU KOHLI**  
MBBS ,DMRD  
DMC 8388

**DR. CHARU KOHLI**  
CONSULTANT RADIOLOGIST  
DMC - 8388  
**DR. CHARU KOHLI'S CLINIC**  
C-234, DEFENCE COLONY, NEW DELHI-110024



**Name : MINEENDRA**  
**Date : June 23, 2024**

**SONO-MAMMOGRAPHY using 5MHz Linear transducer**

All four Quadrants of each breast were scanned, followed by evaluation of the subareolar region and axillary tails.

Both breast parenchymae display a uniform echogenicity and echotexture of the fibrofatty and glandular components, which are in normal proportion for this age and parity.

The Subcutaneous, Subareolar and Retromammary soft tissue planes are normal.

Both axillae are normal.

There is no evidence of axillary or supraclavicular lymphadenopathy.

**IMPRESSION:**

Normal study

**DR. CHARU KOHLI**  
CONSULTANT RADIOLOGIST  
DMC - 8388  
DR. CHARU KOHLI'S CLINIC  
C-234, DEFENCE COLONY, NEW DELHI-110024

Dr. Charu Kohli  
MBBS DMRD  
DMC8388

**IMPORTANT:** Owing to technical limitations, in case of any error in the study, the Doctor cannot be held responsible for claim of damages of any nature, and this report is not valid for any Medicolegal aspect.  
Every modern technology has its own limitations, in case of discrepancy/difference in opinion advised- repeat scan/ second opinion

Ms. MINEENDRA S R  
ID : 490  
AGE/SEX : 45/F  
RECORDED : 23-6-2024 13:38

RATE : 67 BPM  
B.P. : 130/88 mmHg

DR. CHARU KOHLI CLINIC

SUPINE  
PRETEST

*Raw*  
DR. D. R. RAJIV  
MBBS, MD

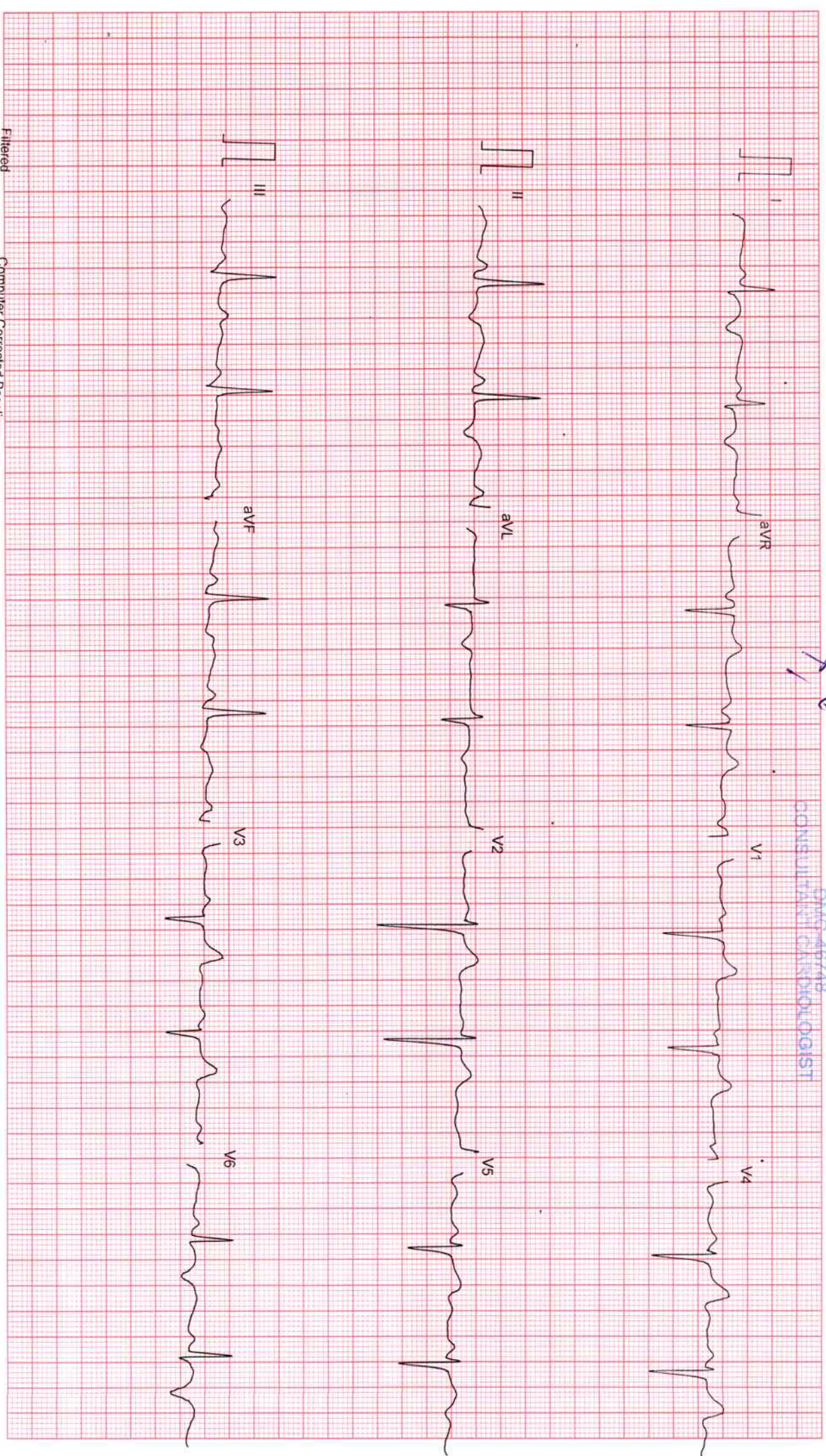
DMC-46748  
CONSULTANT CARDIOLOGIST

RAW E.C.G.

ST @ 10mm/mV  
80ms PostU



*Normal ECG  
67 bpm*



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

# DR. CHARU KOHLI CLINIC

C-234, Defence Colony, New Delhi

Ms. MINEENDRA S R  
 Age : 45/F  
 Recorded : 23-6-2024 13:38  
 Ref. by :  
 Indication :

ID : 490  
 HWT : /

## TREADMILL TEST SUMMARY REPORT

Protocol: BRUCE  
 History:  
 Medication :



PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	ST LEVEL V2 (mm)	V5	METS
SUPINE	0:02	0:02			67	130/88	87	-0.5	2.3	2.4
HYPERVENT					66	130/88	85	-0.3	2.0	2.3
VALSALVA					67	130/88	87	-0.7	2.4	2.1
STANDING					72	130/88	93	-0.5	2.3	2.1
STAGE 1	2:59	2:59	2.70	10.00	83	130/88	107	-0.8	2.1	1.9
STAGE 2	5:59	2:59	4.00	12.00	91	140/90	127	-1.5	1.6	1.4
STAGE 3	8:59	2:59	5.40	14.00	110	146/92	160	-1.9	1.8	1.4
STAGE 4	11:29	2:29	6.70	16.00	148	156/94	230	-2.0	3.5	3.8
PEAK EXERCISE	11:40	2:40			150	156/94	234	-2.3	3.2	3.5
RECOVERY	2:59	2:59	0.00	0.00	80	156/94	124	0.2	2.3	3.5
RECOVERY	5:59	5:59	0.00	0.00	77	140/86	107	-1.2	1.6	1.5

### RESULTS

Exercise Duration : 11:40 Minutes  
 Max Heart Rate : 150 bpm 85% of target heart rate 175 bpm  
 Max Blood Pressure : 156/94 mmHg  
 Max Work Load : 13.58 METS  
 Reason of Termination :

*Negative for any major the parameters of exercise.*

### IMPRESSIONS

Cardiologist

Dr. D. R. RAJIV  
 MBBS, MD  
 DMCC-46748  
 CONSULTANT CARDIOLOGIST



Ms: MINEENDRA S R  
I.D. : 490  
AGE/SEX : 45/F  
RECORDED : 23-6-2024 13:38

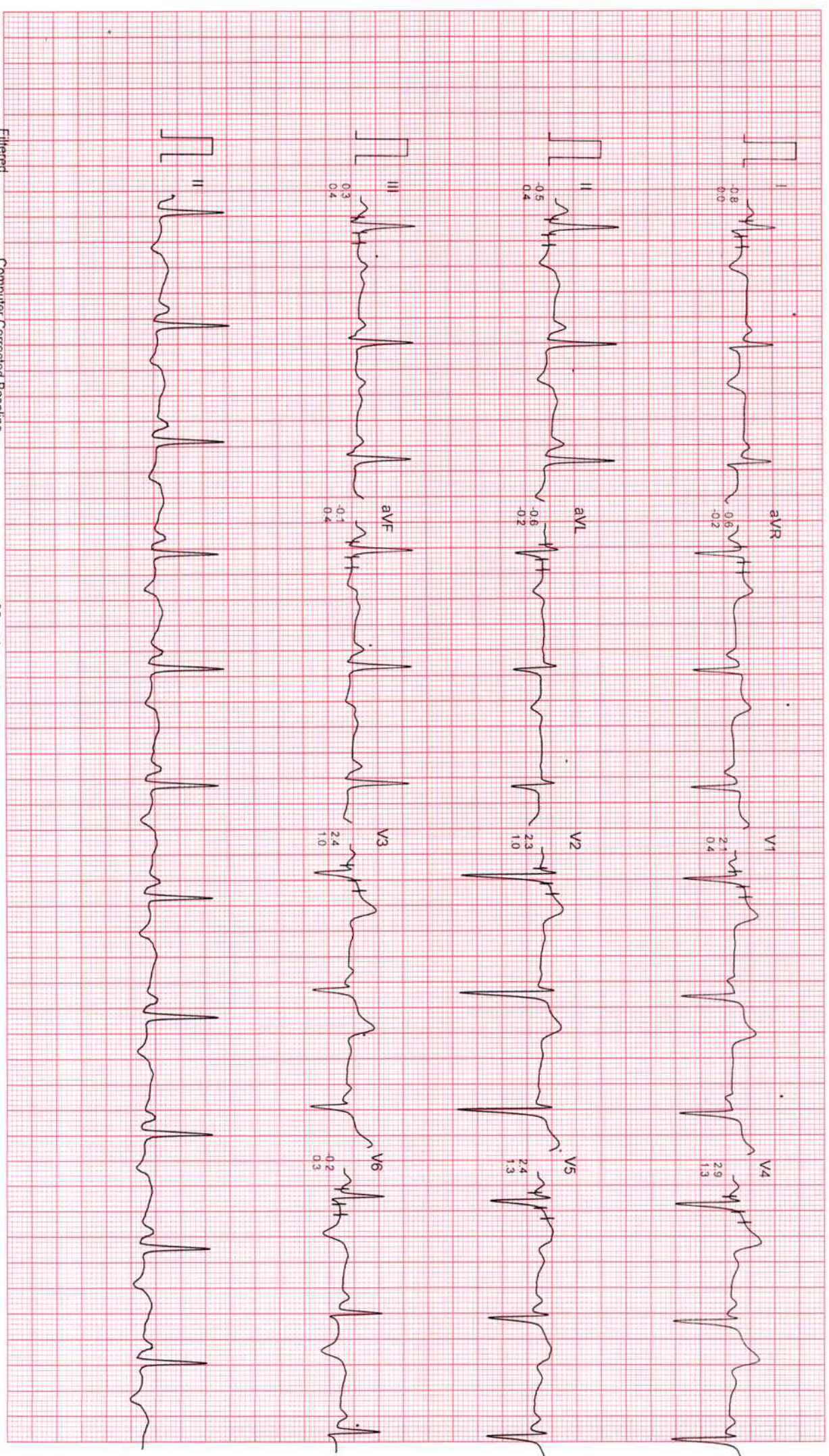
RATE : 67 BPM  
B.P. : 130/88 mmHg

DR. CHARU KOHLI CLINIC

SUPINE  
PRETEST

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN



MS. MINEENDRA S R  
I.D. : 490  
AGE/SEX : 45/F  
RECORDED : 23- 6-2024 13:38

RATE : 66 BPM  
B.P. : 130/88 mmHg

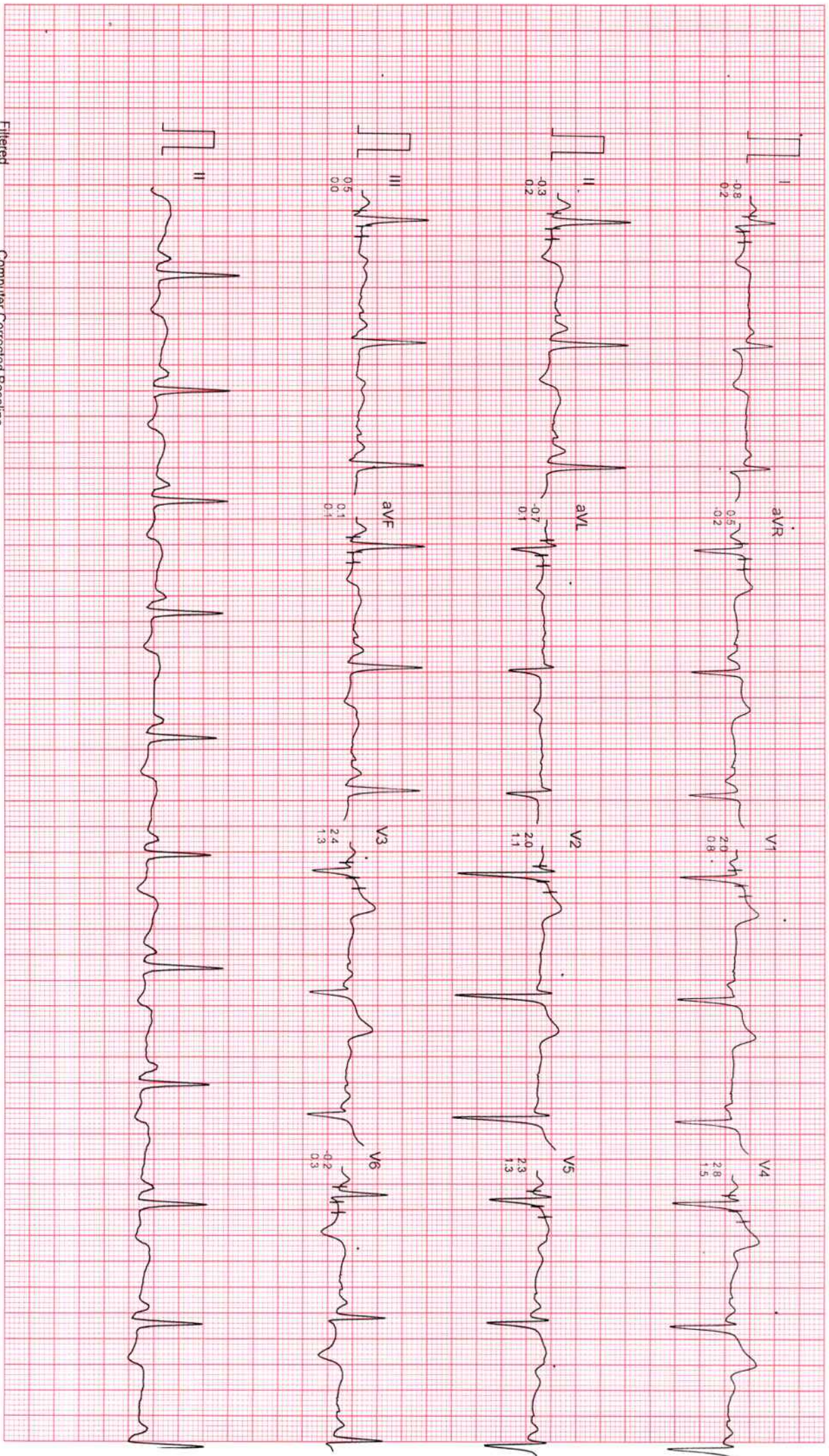
# DR. CHARU KOHLI CLINIC

HYPERVENTILATION  
PRETEST

STAGE TIME : 0:02

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN



MS. MINEENDRA S R  
I.D. : 490  
AGE/SEX : 45/F  
RECORDED : 23-6-2024 13:38

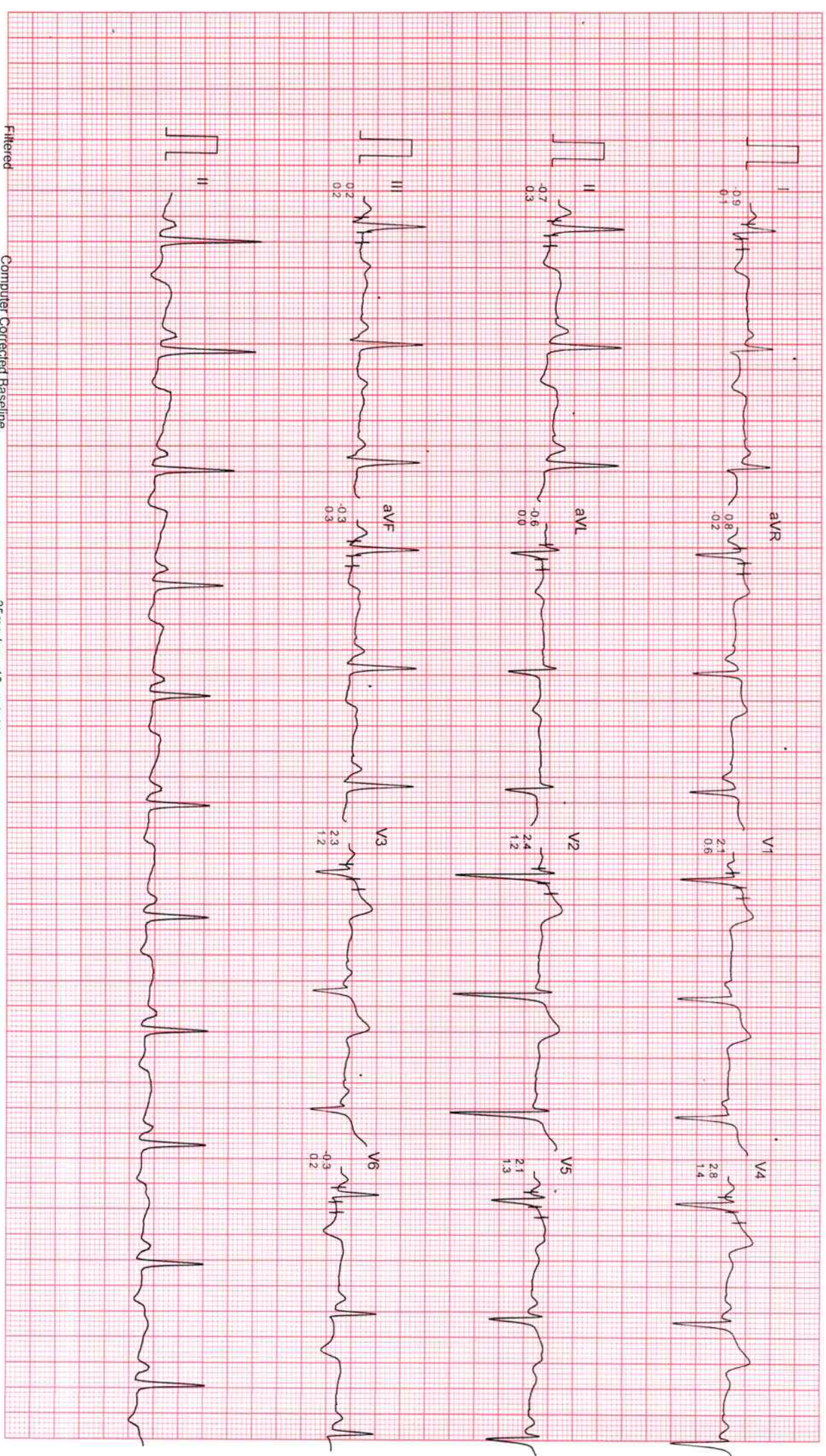
RATE : 67 BPM  
B.P. : 130/88 mmHg

DR. CHARU KOHLI CLINIC

VALSALVA  
PRETEST

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN



MS. MINEENDRA S R  
I.D. : 490  
AGE/SEX : 45/F  
RECORDED : 23-6-2024 13:38

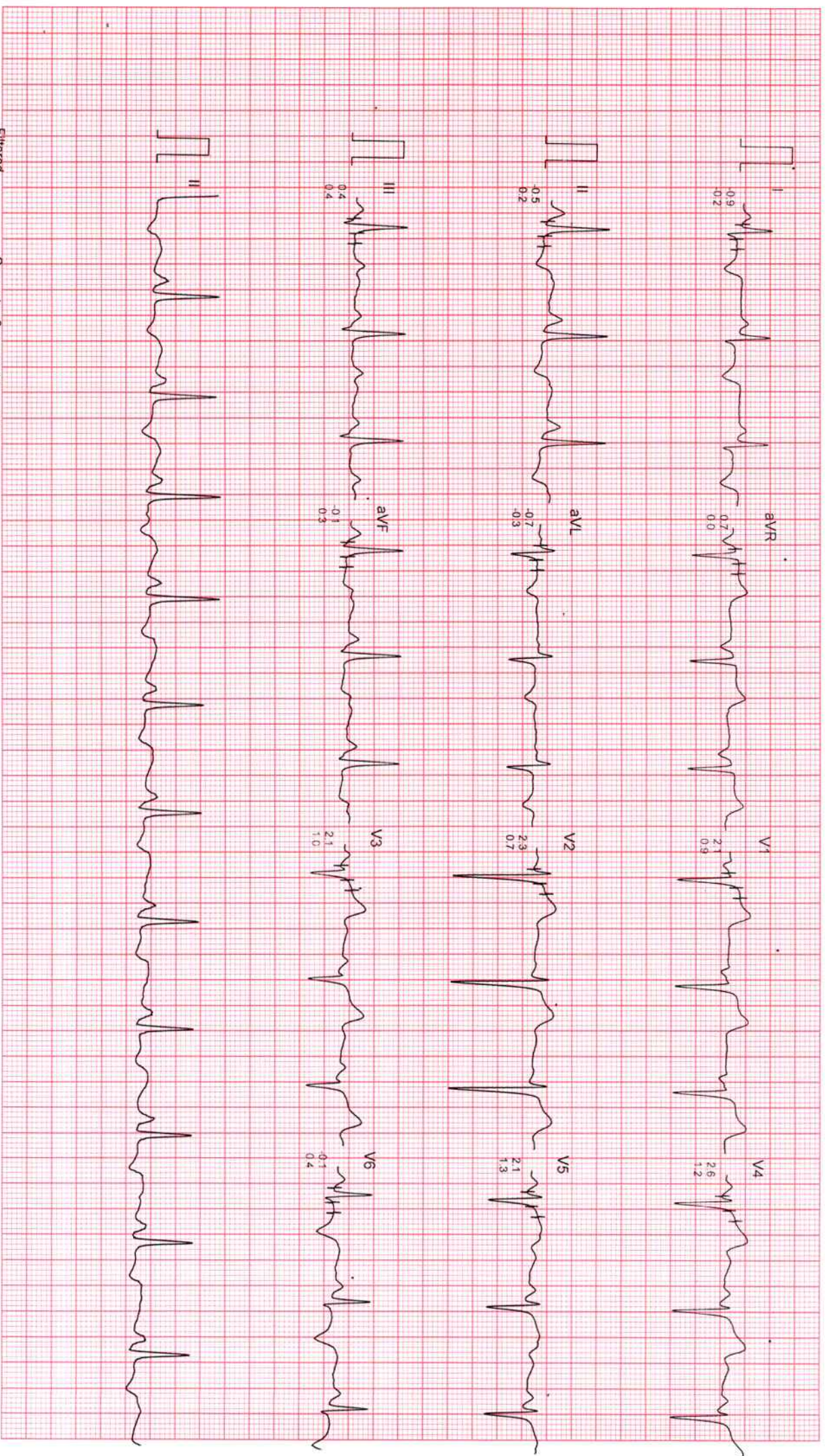
RATE : 72 BPM  
B.P. : 130/88 mmHg

# DR. CHARU KOHLI CLINIC

STANDING  
PRETEST

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

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MS. MINEENDRA S R

I.D. : 490

AGE/SEX : 45/F

RECORDED : 23-6-2024 13:38

RATE : 83 BPM

B.P. : 130/88 mmHg

DR. CHARU KOHLI CLINIC

BRUCE

EXERCISE 1

PHASE TIME : 2:59

STAGE TIME : 2:59

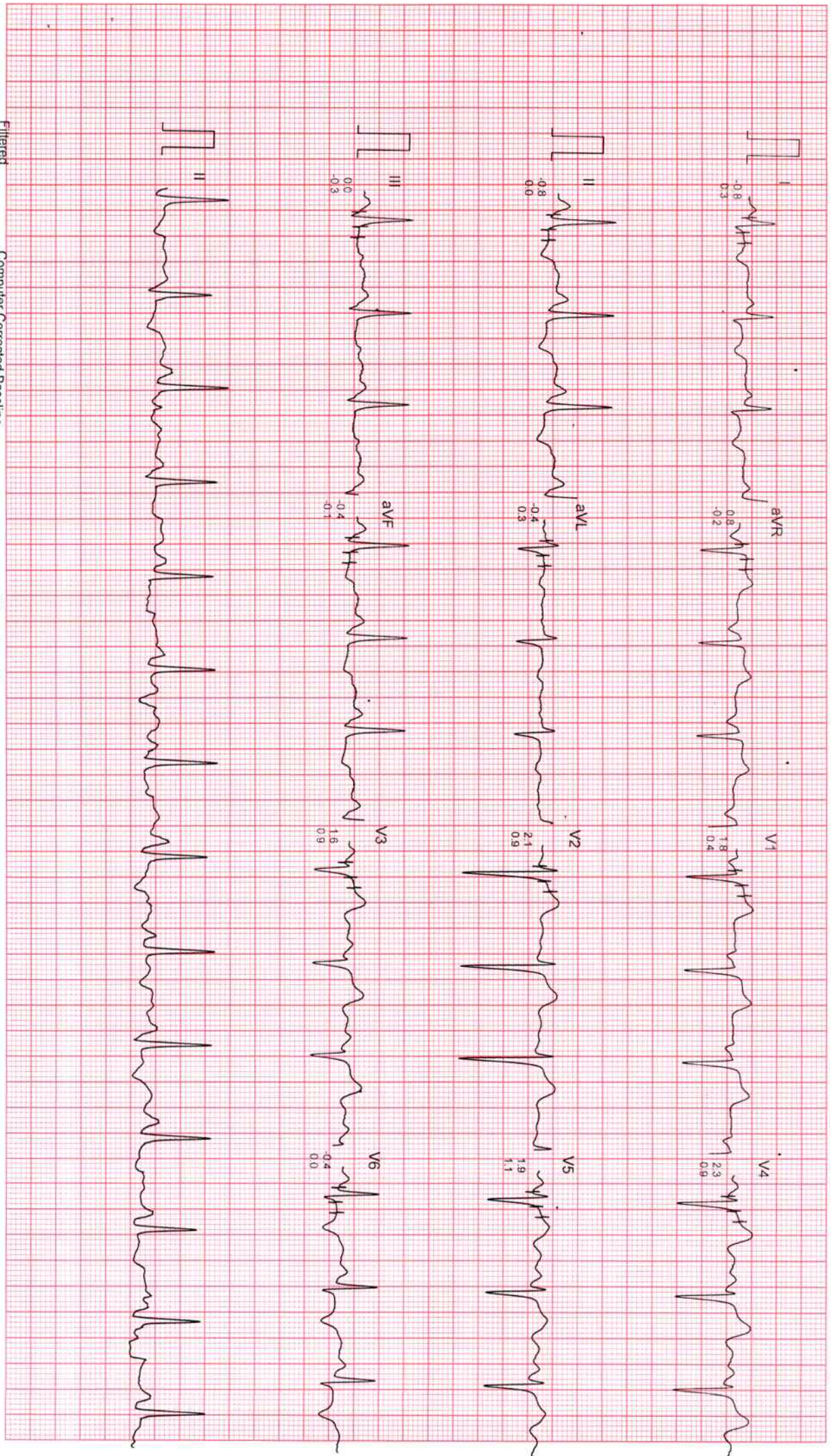
ST @ 10mm/mv

80ms PostJ

SPEED : 2.7 Km./Hr.

GRADE : 10.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

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Ms. MINEENDRA S R

ID : 490

AGE/SEX : 45/F

RECORDED : 23-6-2024 13:38

RATE : 91 BPM

B.P. : 140/90 mmHg

DR. CHARU KOHLI CLINIC

BRUCE

EXERCISE 2

PHASE TIME : 5:59

STAGE TIME : 2:59

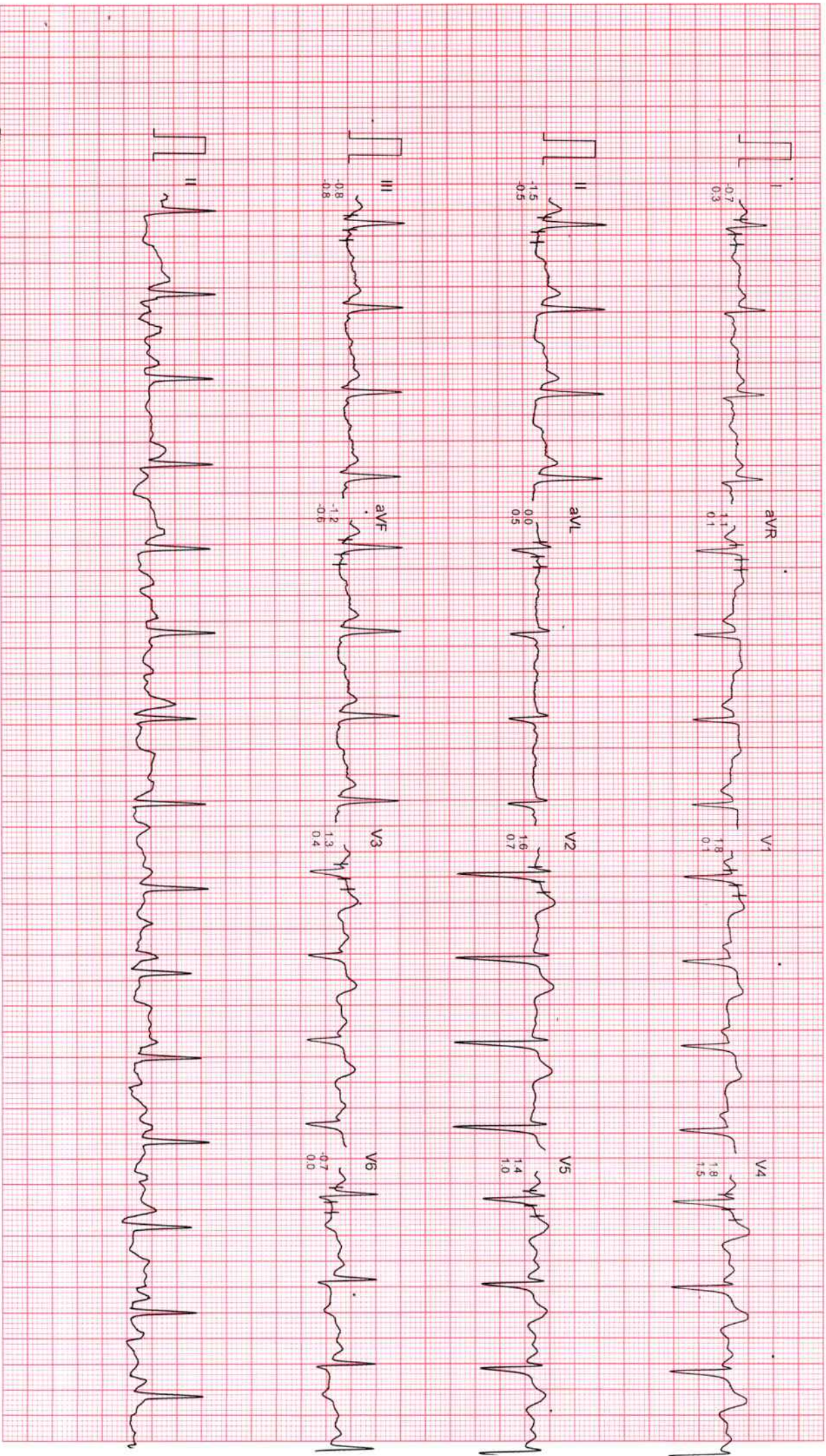
ST @ 10mm/mV

80ms PostJ

SPEED : 4.0 Km/Hr.

GRADE : 12.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCon, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

MS. MINEENDRA S R

ID : 490

AGE/SEX : 45/F

RECORDED : 23-6-2024 13:38

RATE : 110 BPM  
B.P. : 146/92 mmHg

DR. CHARU KOHLI CLINIC

BRUCE

EXERCISE 3

PHASE TIME : 8:59

STAGE TIME : 2:59

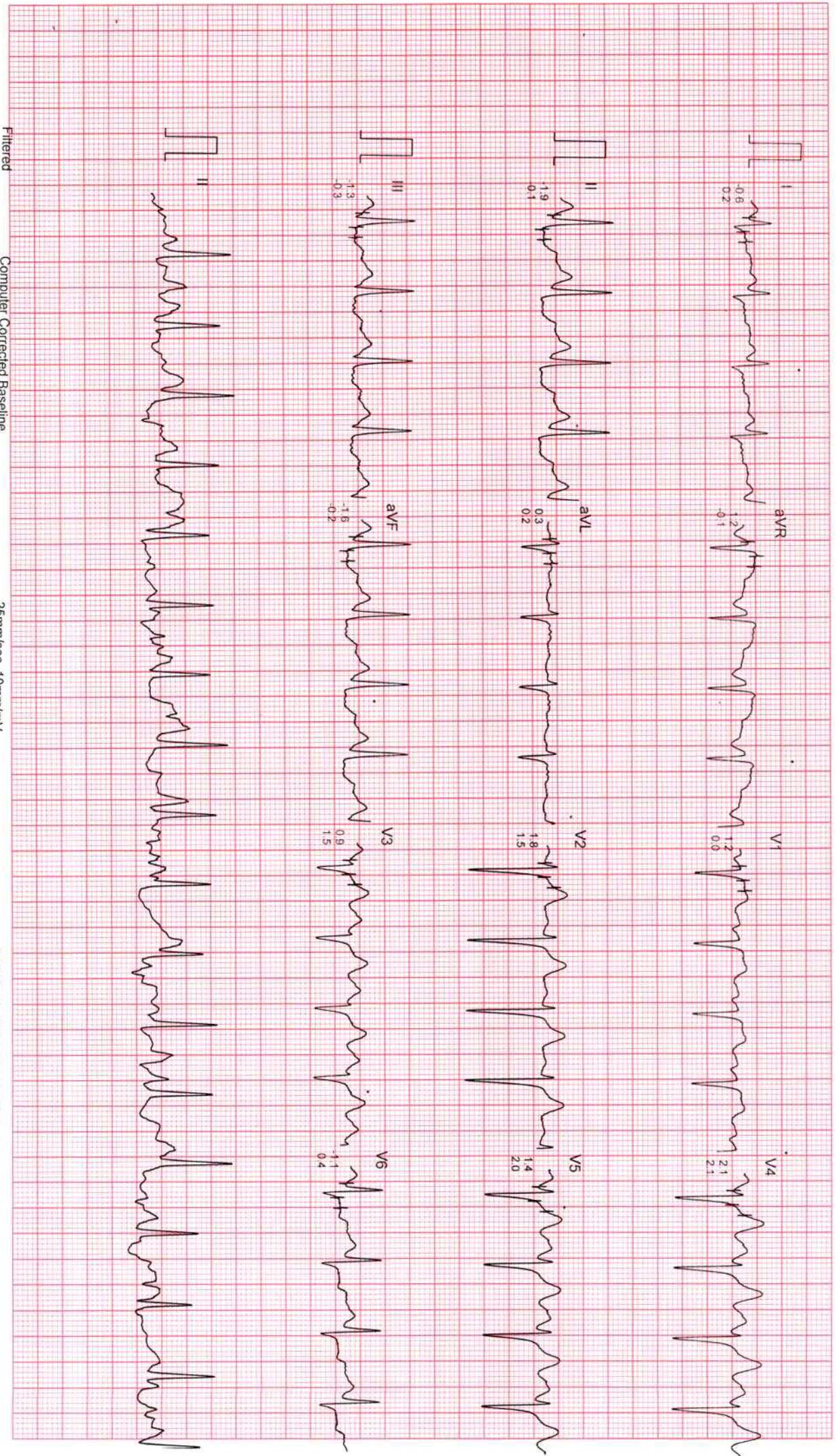
ST @ 10mm/mV

80ms PostJ

SPEED : 5.4 Km./Hr.

GRADE : 14.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, IN/DIA Ph.:091-731-2620740 TeleFax:091-731-2431214

Ms. MINEENDRA S R

ID : 490

AGE/SEX : 45/F

RECORDED : 23-6-2024 13:38

RATE : 148 BPM  
B.P. : 156/94 mmHg

DR. CHARU KOHLI CLINIC

BRUCE

EXERCISE 4

PHASE TIME : 11:29

STAGE TIME : 2:29

ST @ 10mm/mV

80ms PostJ

SPEED : 6.7 Km./Hr.

GRADE : 16.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214



DR. CHARU KOHLI CLINIC

Ms. MINEENDRA S R

ID : 490

AGE/SEX : 45/F

RECORDED : 23-6-2024 13:38

RATE : 150 BPM  
B.P. : 156/94 mmHg

BRUCE  
PEAK EXERCISE  
PHASE TIME : 11:40  
STAGE TIME : 2:40

ST @ 10mm/mV  
80ms PostJ  
SPEED : 6.7 Km./Hr.  
GRADE : 16.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCorr, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

MS. MINEENDRA S R  
I.D. : 490  
AGE/SEX : 45/F  
RECORDED : 23-6-2024 13:38

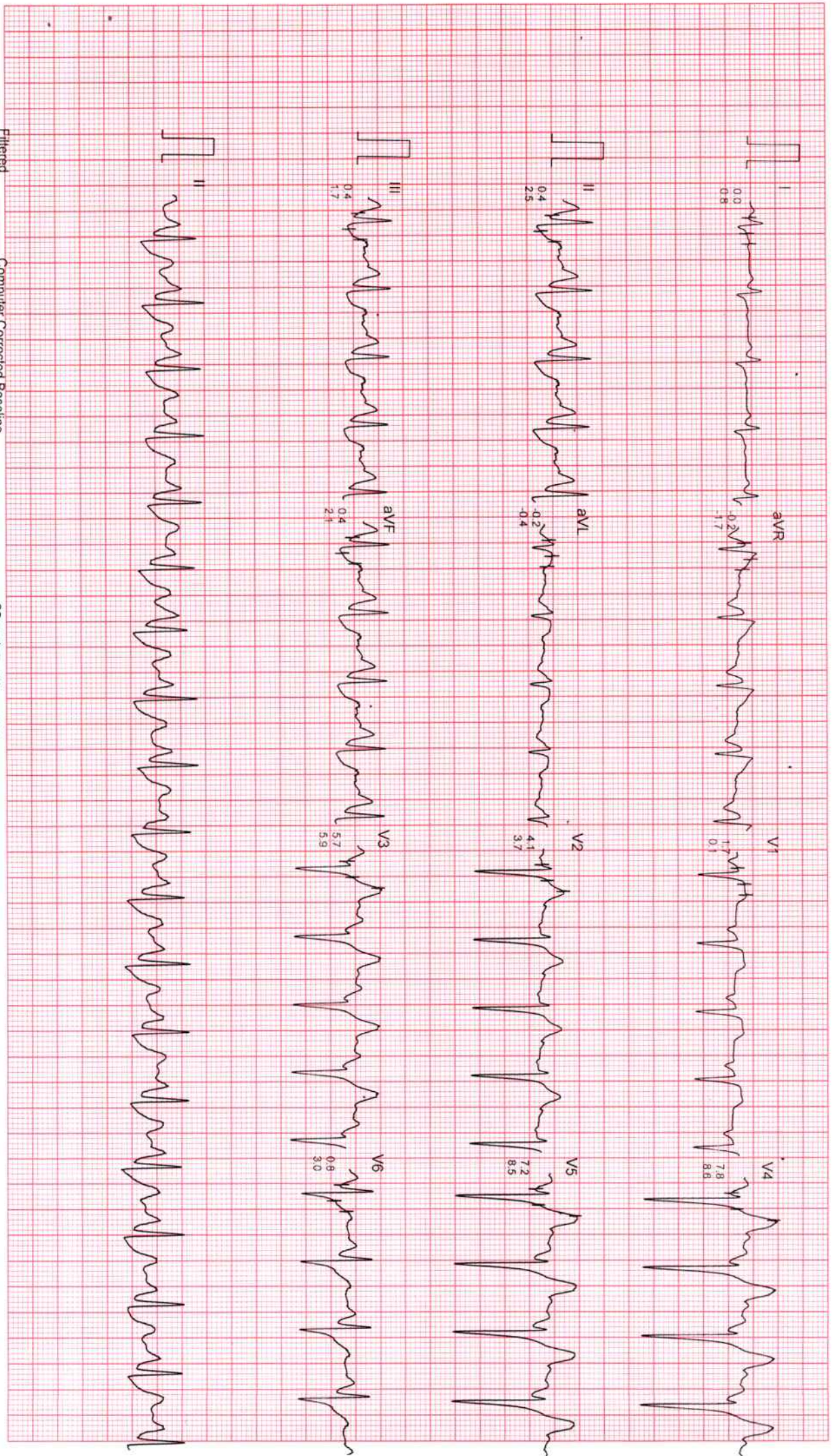
RATE : 114 BPM  
B.P. : 156/94 mmHg

# DR. CHARU KOHLI CLINIC

BRUCE  
RECOVERY  
PHASE TIME : 0:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 0.0 Km./Hr.  
GRADE : 0.0 %

LINKED MEDIAN



Filtered

Computer Corrected Baseline

25mm/Sec 10mm/mV

CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

MS. MINEENDRA S R  
I.D. : 490  
AGE/SEX : 45/F  
RECORDED : 23-6-2024 13:38

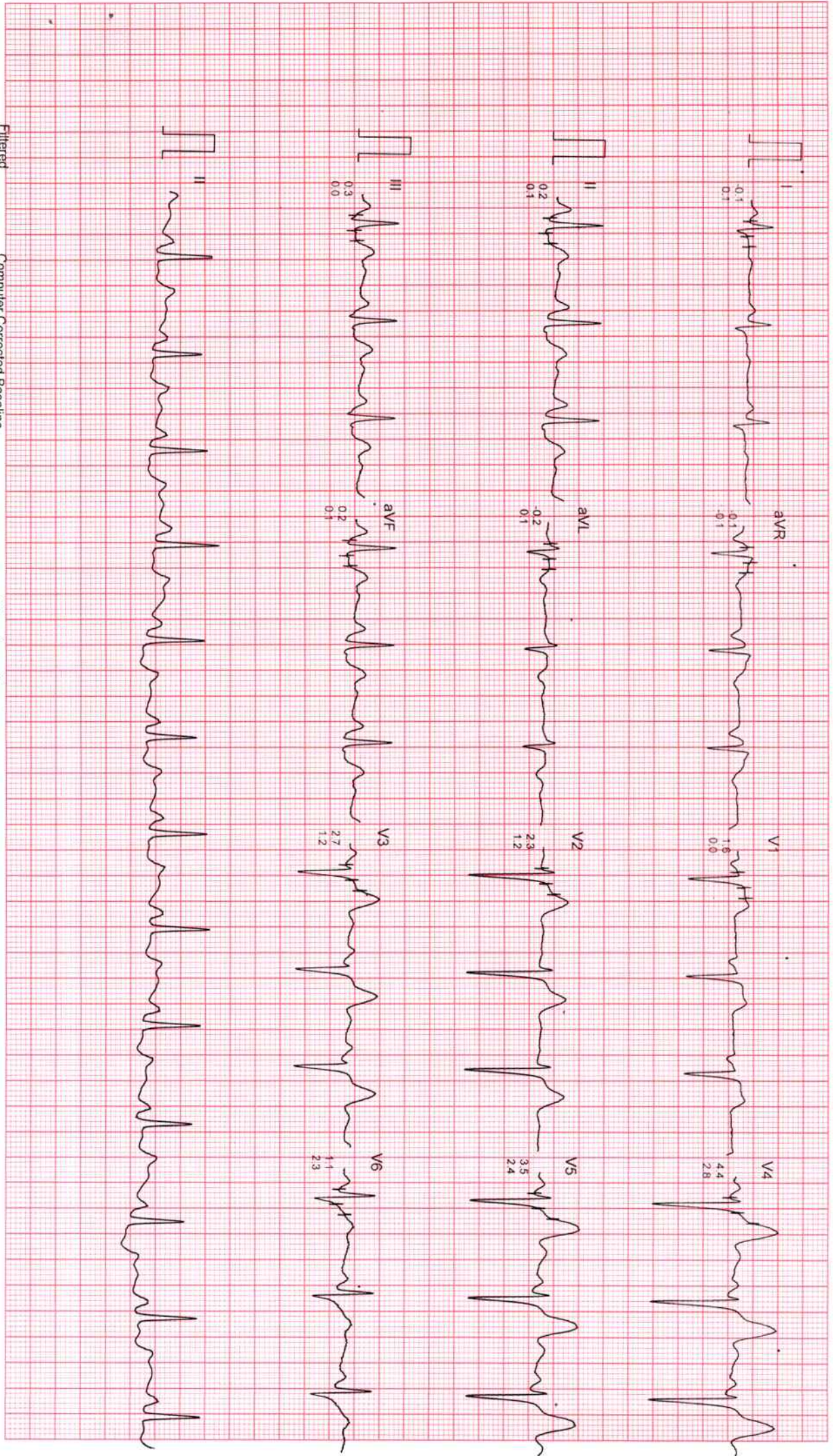
RATE : 80 BPM  
B.P. : 156/94 mmHg

# DR. CHARU KOHLI CLINIC

BRUCE  
RECOVERY  
PHASE TIME : 2:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 0.0 Km./Hr.  
GRADE : 0.0 %

LINKED MEDIAN



MS. MINEENDRA S R  
ID : 490  
AGE/SEX : 45/F  
RECORDED : 23-6-2024 13:38

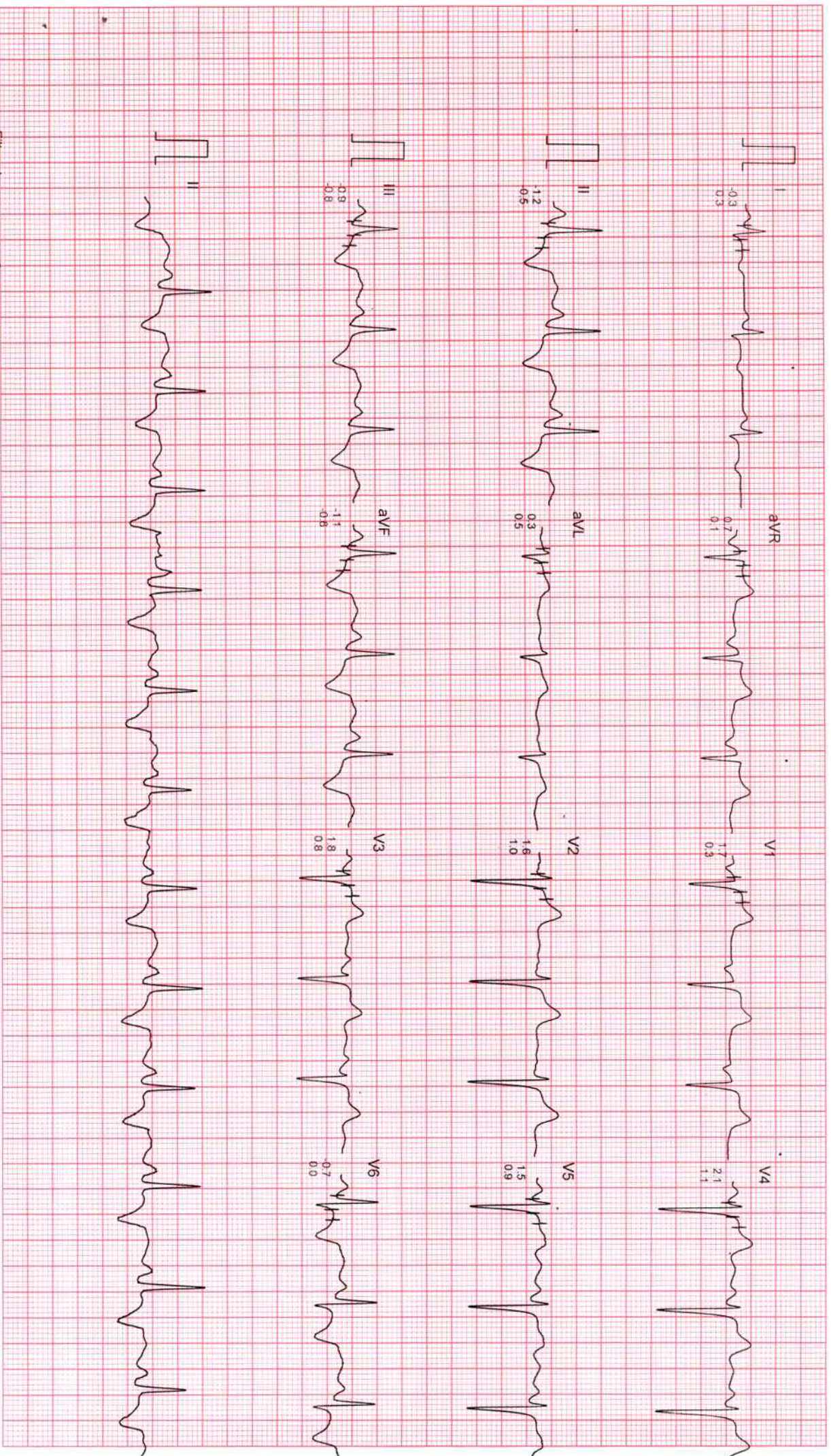
RATE : 77 BPM  
B.P. : 140/86 mmHg

# DR. CHARU KOHLI CLINIC

BRUCE  
RECOVERY  
PHASE TIME : 5:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 0.0 Km./Hr.  
GRADE : 0.0 %

LINKED MEDIAN



Filtered

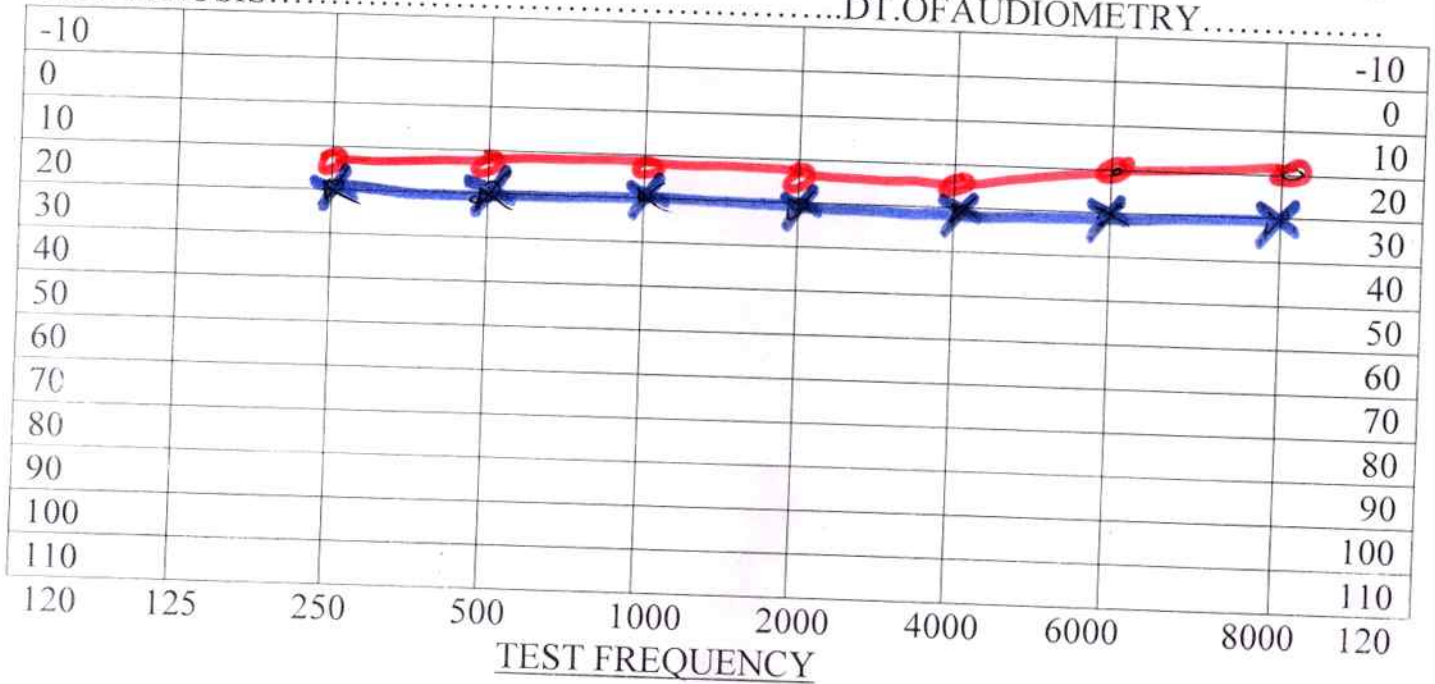
Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph: 091-731-2620740, TeleFax: 091-731-2431214

**AUDIOLOGICAL EVALUATION**

1. NAME mineendra .s.r AGE 45 SEX Female  
 2. ADDRESS.....  
 ..... OCCUPATION.....  
 3. DIAGNOSIS..... DT. OF AUDIOMETRY.....



AIR X = LEFT EAR --- Rinne ----- Hearing Loss for Speech R L \_\_\_\_\_  
 O = RIGHT EAR -----

BONE < = LEFT EAR --- weber ----- DISCRIMINATION SCORE R L \_\_\_\_\_

Masking

No Response  
Audiologists remarks

- 0dB-20dB....normal hearing
- 20dB-40dB....mild hearing loss
- 40dB-55dB....moderate hearing loss
- 55dB-70dB....moderately severe hearing loss
- 70dB-90dB....sever hearing loss
- >90dB.....profound hearing loss



**Dr. Charu Kohli's Clinic**  
C-234 Defence Colony, New Delhi-110024  
Ph 41550792, 24336960, 24332759  
E-mail: [drcharukohli@yahoo.com](mailto:drcharukohli@yahoo.com)

Name : MINEENDRA SR.  
Age/Sex : 45y/f  
Date : 23/06/2024

**SAMPLE NOT PROVIDED**

I do not wish to provide the PAPS, Dental sample.



**IMPORTANT:** Owing to technical limitations, in case of any error in the study, the Doctor cannot be held responsible for claim of damages of any nature, and this report is not valid for any Medicolegal aspect.



**Dr. Charu Kohli s Clinic**  
C-234 Defence Colony, New Delhi-1 10024  
Ph 41550792 ,24336960, 24332759  
E- mail: [drcharukohli@yahoo.com](mailto:drcharukohli@yahoo.com)

**NAME : MINEENDRA S R**

**AGE/SEX : 45Y/F**

**DATE : 23.06.2024**

**X - RAY CHEST PA VIEW :**

Cardiac shadow is normal.  
Aorta is normal.  
Bilateral lung fields are clear.  
Both costophrenic angles are clear.  
Bilateral domes of diaphragm are normal.  
No bony injury noted.

**IMPRESSION:** Normal chest skiagram

*Charu Kohli*

**DR. CHARU KOHLI**  
**MBBS, DMRD**  
**Consultant Radiologist**

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MINEENDRA S.R 45Y/F



02/08/201

FLAT NO. 305, B-WING, SUNDARAM-3,  
RAHEJA COMPLEX  
NEAR TIMES OF INDIA MALAD - EAST  
Malad (East)  
Mumbai( Sub Urban )  
Maharashtra 400097  
9967887077

Ref: 64 / 07E / 127053 / 127680 / P



UE419149472IN



आपला **आधार** क्रमांक / Your **Aadhaar** No. :

**2400 4312 8642**

**आधार** — सामान्य माणसाचा अधिकार



भारत सरकार  
GOVERNMENT OF INDIA



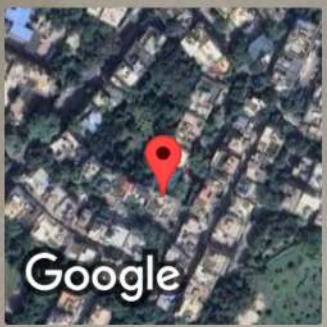
मिनीन्द्र एस.आर  
Mineendra S.R  
जन्म वर्ष / Year of Birth : 1978  
स्त्री / Female



**2400 4312 8642**

**आधार** — सामान्य माणसाचा अधिकार


GPS Map Camera



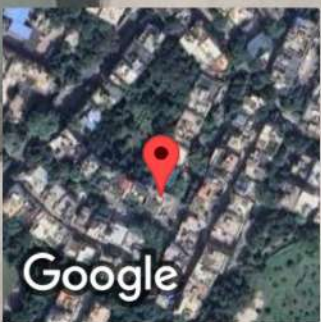
New Delhi, Delhi, India  
C234, Block C, Defence Colony, New Delhi, Delhi 110049, India  
Lat 28.570753°  
Long 77.229878°  
23/06/24 10:13 AM GMT +05:30



SAMPLE  
COLLECTION AREA

 GPS Map Camera

New Delhi, Delhi, India  
234, Block C, Defence Colony, New Delhi, Delhi 110024, India  
Lat 28.570737°  
Long 77.22987°  
23/06/24 10:13 AM GMT +05:30





<b>Registration No.</b>	<b>10245366</b>	Mobile No.	9967887077
<b>Patient Name</b>	<b>Ms. MINEENDRA S R</b>	Registration Date/Time	23/06/2024 10:11:49
Age / Sex	46 Yrs Female	Sample Collected Date/Time	23/06/2024 11:28:57
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	23/06/2024 14:41:03
Collected At	DCKC	Printed Date/Time	23/06/2024 17:06:05

Test Name	Value	Unit	Biological Ref Interval
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## HAEMATOLOGY

### Complete Blood Count (CBC)

Haemoglobin (Hb) ,EDTA <i>Method : Colorimetric</i>	<b>11.9</b>	g/dL	12.0 - 15.0
Total Leucocyte Count (TLC) ,EDTA <i>Method : Electric impedance</i>	06.8	10 <sup>9</sup> /L	04.0 - 11.0
Red Blood Cell (RBC) ,EDTA <i>Method : Electric impedance</i>	4.13	10 <sup>6</sup> /uL	3.80 - 4.80
Hematocrit (HCT /PCV) ,EDTA <i>Method : Pulse height detection</i>	36.9	%	36.0 - 46.0
Mean Corp Volume (MCV) ,EDTA <i>Method : Calculated</i>	89.4	fL	83.0 - 101.0
Mean Corp Hb (MCH) ,EDTA <i>Method : Calculated</i>	28.8	pg	27.0 - 32.0
Mean Corp Hb Conc (MCHC) ,EDTA <i>Method : Calculated</i>	32.3	g/dL	31.5 - 34.5
Platelet Count(PLT) ,EDTA <i>Method : Electric impedance/Microscopy</i>	261.00	10 <sup>3</sup> /uL	150.00 - 410.00
RDW- CV% ,EDTA	13.2	%	11.6 - 14.0
Differential Leucocyte Count <i>Method : Microscopy</i>			
Neutrophil ,EDTA	65.4	%	40.0 - 80.0
Lymphocyte ,EDTA	26.6	%	20.0 - 45.0
Eosinophil ,EDTA	3.0	%	1.0 - 6.0
Monocyte ,EDTA	5.0	%	2.0 - 10.0
Basophil ,EDTA	0.0	%	0.0 - 2.0
ESR ,EDTA <i>Method : Westergreen</i>	09	mm/1st hr.	00 - 20

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<b>Registration No.</b>	<b>10245366</b>	Mobile No.	9967887077
<b>Patient Name</b>	<b>Ms. MINEENDRA S R</b>	Registration Date/Time	23/06/2024 10:11:49
Age / Sex	46 Yrs Female	Sample Collected Date/Time	23/06/2024 11:28:57
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	23/06/2024 16:47:42
Collected At	DCKC	Printed Date/Time	23/06/2024 17:06:05

Test Name	Value	Unit	Biological Ref Interval
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Blood Group ABO ,EDTA

Method : Forward Grouping

"O"

Rh Typing ,EDTA

Method : Forward Grouping

POSITIVE

**HbA1c** ,EDTA

Method : Photometric method

5.0

%

4.0 - 5.6

**INTERPRETATIONS:-**

**NORMAL RANGE** **4.00 - 5.60** %

Pre Diabetic/ Higher chance of getting diabetes	5.70	- 6.20	%
Good Diabetic Control	6.20	- 6.80	%
Fair Diabetic Control	6.80	- 7.60	%
Uncontrolled Diabetes -action suggested	>7.6		%

**Note:-**

Glycosylated Haemoglobin is a specific component of HBA1C and is the blood glucose bound to it. This test is an index of carbohydrate in balance during the preceding two months. The estimation is of greater importance for specific group of patient. This result are not affected by time, meal intake exercise, diabetic drugs, emotional Stress etc. HbA1c should be routinely monitored ideally at least every 3 months.





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Age / Sex	46 Yrs Female	Sample Collected Date/Time	23/06/2024 11:28:57
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	23/06/2024 14:28:50
Collected At	DCKC	Printed Date/Time	23/06/2024 17:06:05

Test Name	Value	Unit	Biological Ref Interval
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## BIOCHEMISTRY

### LIPID PROFILE

Total Lipids ,Serum Plain	567	mg/dl	400 - 700
Serum Cholesterol ,Serum Plain <i>Method : CHOD-POD</i>	190	mg/dl	0 - 200
Serum Triglycerides ,Serum Plain <i>Method : GPO-POD</i>	<b>187</b>	mg/dl	40 - 140
Serum HDL Cholesterol ,Serum Plain <i>Method : Direct Method</i>	<b>33</b>	mg/dl	40 - 70
Serum LDL Cholesterol ,Serum Plain <i>Method : Calculated</i>	<b>119.6</b>	mg/dl	30.0 - 100.0
Serum VLDL Cholesterol ,Serum Plain <i>Method : Calculated</i>	37.4	mg/dl	24.0 - 45.0
Total CHO/HDL Cholesterol Ratio ,Serum Plain <i>Method : Calculated</i>	5.76		
LDL/HDL Cholesterol Ratio ,Serum Plain <i>Method : Calculated</i>	3.62		

Guidelines for Total Blood Cholesterol Levels on 11 to 12 hour fasting samples.

Desirable : Less than 200 mg/dl

Borderline High Risk : 200 to 239 mg/dl

High Risk : 240 mg/dl and over, on repeated values

Optimal Level for Cardiac Patients : Less than 200 mg/dl

HDL-C : High HDL has generally been found to be protective, decreasing the risk of coronary Artery disease (CAD) in most people. However, some recent studies have shown that in some people with high HDL, the HDL is not protective and may, in fact result in higher risk for CAD than in people with normal HDL levels. In one study it was shown that people with CAD and high HDL had underlying genetic anomalies in enzymes important in lipid turnover. Another study showed that high levels of abnormally large HDL particles were associated with increased risk of CAD. Factors that elevate HDL concentrations include chronic alcoholism, treatment with oral estrogen replacement therapy, extensive aerobic exercise, and treatment with niacin, statins, or fibrates. Smoking reduces levels of HDL cholesterol, while quitting smoking leads to a rise in the plasma HDL level.

Triglycerides  
Female 40 - 140  
Male 60 - 165

Adult levels:

Optimal <100 mg/dL  
Near Optimal/ above optimal 100 -129 mg/dL  
Borderline high 130 - 159 mg/dL  
High 160 - 189 mg/dL  
Very High ≥190 mg/dL

### KIDNEY FUNCTION TEST (KFT)

Blood Urea ,Serum Plain <i>Method : Urease -UV</i>	20.8	mg/dl	15.0 - 45.0
Serum Creatinine ,Serum Plain <i>Method : Modified Jaffe's</i>	0.95	mg/dl	0.50 - 1.50

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Age / Sex	46 Yrs Female	Sample Collected Date/Time	23/06/2024 11:28:57
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	23/06/2024 15:52:34
Collected At	DCKC	Printed Date/Time	23/06/2024 17:06:05

Test Name	Value	Unit	Biological Ref Interval
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Serum Uric Acid ,Serum Plain <i>Method : Uricase- POD</i>	5.24	mg/dl	2.40 - 5.70
Serum Sodium ,Serum Plain <i>Method : ISE Direct</i>	141.0	mmol/L	135.0 - 148.0
Serum Potassium ,Serum Plain <i>Method : ISE Direct</i>	4.20	mmol/L	3.50 - 5.00
Serum Chloride ,Serum Plain <i>Method : ISE DIRECT</i>	104.00	mmol/L	97.00 - 107.00
Serum Calcium ,Serum Plain <i>Method : Arsenazo III</i>	9.70	mg/dl	New Born : 7.8 - 11.2 mg/dl Adult : 8.2 - 10.6 mg/dl



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Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	23/06/2024 14:28:50
Collected At	DCKC	Printed Date/Time	23/06/2024 17:06:05

Test Name	Value	Unit	Biological Ref Interval
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**LIVER PROFILE / LFT**

Serum Bilirubin (Total) ,Serum Plain <i>Method : DSA Method</i>	0.45	mg/dl	0.00 - 1.20
Serum Bilirubin (Direct) ,Serum Plain <i>Method : DSA Method</i>	0.14	mg/dl	0.00 - 0.30
Serum Bilirubin (Indirect) ,Serum Plain <i>Method : Calculated Parameter</i>	0.31	mg/dl	0.00 - 0.60
SGOT ,Serum Plain <i>Method : IFCC/KINETIC</i>	23.2	IU/l	Males : Upto 46 IU/l Females : Upto 40 IU/l
SGPT ,Serum Plain <i>Method : IFCC/KINETIC</i>	33.6	IU/l	Upto 49 IU/l
Serum Alkaline Phosphatase ,Serum Plain <i>Method : DEA Method</i>	69.0	IU/l	30.0 - 120.0
Serum Total Protein ,Serum Plain <i>Method : Biuret Method</i>	7.38	gm/dl	6.00 - 8.50
Serum Albumin ,Serum Plain <i>Method : BCG Method</i>	4.39	gm/dl	3.20 - 5.50
Globulin ,Serum Plain <i>Method : Calculated</i>	2.99	gm/dl	2.00 - 4.10
A/G Ratio ,Serum Plain <i>Method : Calculated</i>	1.47		1.00 - 2.10
Serum GGTP ,Serum Plain <i>Method : G-Glutamyl Transferase</i>	26.0	U/L	0.0 - 50.0

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Age / Sex	46 Yrs Female	Sample Collected Date/Time	23/06/2024 11:28:57
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	23/06/2024 14:28:49
Collected At	DCKC	Printed Date/Time	23/06/2024 17:06:05

Test Name	Value	Unit	Biological Ref Interval
Blood Sugar (Fasting) ,Plasma F <i>Method : GOD POD</i>	86.8	mg/dl	70.0 - 110.0
Blood Sugar (PP) ,Plasma PP <i>Method : GOD POD</i>	128.9	mg/dl	70.0 - 140.0
Serum Phosphorus ,Serum Plain <i>Method : Phosphomolybdate UV</i>	3.66	mg/dl	2.50 - 4.50





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Collected At	DCKC	Printed Date/Time	23/06/2024 17:06:05

Test Name	Value	Unit	Biological Ref Interval
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### IMMUNOASSAY

#### TOTAL THYROID PROFILE

Total T3 ,Serum Plain	1.24	ng/mL	0.69 - 2.15
Total T4 ,Serum Plain	8.78	ug/dl	5.20 - 12.70
TSH	1.07	uIU/ml	0.30 - 4.50

**Comment :**

Age Group	Biological Reference Range
1-2 Days	3.2-3.43 uIU/ml
3-4 Days	0.7-15.4 uIU/ml
15 Days - 5 Months	1.7-9.1 uIU/ml
5 Months - 2 Years	0.7-6.4 uIU/ml
2 Years - 12 Years	0.64-6.27 uIU/ml
12 Years - 18 Years	0.51-4.94 uIU/ml
> 18 Years	0.35-5.50 uIU/ml

**Adults**

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates + 50 %, hence time of the day has influence on the measured serum TSH concentration. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

**Newborn**

In a very low birth weight baby (particularly premature neonates) immaturity of the hypothalamic-pituitary - thyroid axis may mask primary congenital hypothyroidism. It is recommended that the test be repeated two weeks after birth in babies 1000-1500 gm and at four weeks in those <1000 gm. Specimen collection prior to 24 hours of age, after blood transfusion and prematurity can affect this screening.

Nearly 90% of CH cases are detected by newborn screening. A small number of children may test normal on the newborn screen but later develop hypothyroidism.





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Age / Sex	46 Yrs Female	Sample Collected Date/Time	23/06/2024 11:28:57
Ref By / Hospital	Others MEDI WHEEL	Report Date/Time	23/06/2024 16:51:05
Collected At	DCKC	Printed Date/Time	23/06/2024 17:06:05

Test Name	Value	Unit	Biological Ref Interval
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Vitamin B12 (Cynocobalamin) ,Serum Plain 250.0 pg/mL 200.0 - 1100.0  
Method : CLIA

**Comments:-**

Vitamin B12 along with folate is essential for DNA synthesis and myelin formation. Vitamin B12 deficiency can be because of nutritional deficiency, malabsorption and other gastrointestinal causes. The test is ordered primarily to help diagnose the cause of macrocytic/megaloblastic anemia .

**Decreased levels are seen in:**

Anaemia, normal near term pregnancy, vegetarianism,partial gastrectomy/ileal damage, celiac disease, with oral contraceptive use, parasitic competition, pancreatic deficiency, treated epilepsy, smoking, hemodialysis andadvancing age.

**Increased levels are seen in:**

Renal failure, hepatocellular disorders, myeloproliferative disorders and at times with excess supplementation of vitamins pills.

Vitamin D (25 Hydroxy) ,Serum Plain 33.20 ng/mL 30.00 - 100.00

**Normal Range**

Deficiency < 10 ng/ml  
Insufficiency 10 - 29 ng/ml  
Sufficiency 30 - 100 ng/ml  
Toxicity >100 ng/ml

**Comments**

Cholecalciferol (Vitamin D3) is synthesized in the skin from 7 dehydrocholesterol in response to sunlight; some part also comes from diet and supplements. Ergocalciferol(vitamin D2) comes essentially from diet and supplements. Both cholecalciferol and ergocalciferol are converted in liver to 25 OH Vitamin D which is considered the best indicator of Vitamin D nutritional status. Vitamin D toxicity is recognized, but is a rare occurrence.





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Test Name	Value	Unit	Biological Ref Interval
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## CLINICAL PATHOLOGY

### URINE ROUTINE EXAMINATION

#### URE PHYSICAL EXAMINATION

Colour ,URINE	Pale Yellow	Pale Yellow
Volume ,URINE	20 mL	
Appearance ,URINE	Clear	Clear

#### URE CHEMICAL EXAMINATION

Reaction ,URINE	Acidic	Acidic
Ph (Strip Method) ,URINE	5.0	5.0
Specific Gravity ,URINE	1.015	1.000
Protein (Strip Method) ,URINE	Nil	Nil
Glucose (Strip Method) ,URINE	Nil	Nil

#### URE MICROSCOPY EXAMINATION

Pus Cells ,URINE	0 - 2 /HPF	0 - 1
Epithelial Cells ,URINE	1 - 2 /HPF	0 - 1
RBC's ,URINE	Nil /HPF	Nil
Casts ,URINE	Nil	
Crystals ,URINE	Nil	
Bacteria ,URINE	Absent	Absent
Mucus Thread ,URINE	Nil	Nil
Other ,URINE	Nil	

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Test Name	Value	Unit	Biological Ref Interval
URINE SPOT SUGAR (FASTING) ,URINE	Nil		Nil
URE SUGAR PP ,URINE	NIL		

\*\*\* End of Report \*\*\*