

ID	: 15445	Collection	: May 25, 2024, 09:18 a.m.
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:58 a.m.
DOB/Age	: 22 years	Reported	: May 25, 2024, 02:10 p.m.
Gender	: Male	Ref. Doctor	: SELF

Client Name : Arcofemi Healthcare Pvt. Ltd - PANI017 Client Address : GHATKOPAR



Test Description	Value(s)	Reference Range

### Complete Blood Count; CBC (EDTA whole blood)

Erythrocytes (Whole Blood)			
Hemoglobin (Hb)*	14.4	gm/dL	13.5 - 18.0
(NonCyanmethemoglobin Photometric Measurement)			
Erythrocyte (RBC) Count*	4.86	mil/cu.mm	4.7 - 6.0
(Electrical Impedence)			
Packed Cell Volume (PCV)*	43.2	%	42 - 52
(Calculated)			
Mean Cell Volume (MCV)*	88.9	fL	78 - 100
(Electrical Impedence)			
Mean Cell Haemoglobin (MCH)*	29.5	pg	27 - 31
(Calculated)			
Mean Corpuscular Hb Concn. (MCHC)*	33.2	gm/dL	32 - 36
(Calculated)			
Red Cell Distribution Width (RDW)-CV*	13.6	%	11.5 - 14.0
(Electrical Impedence)			
Red Cell Distribution Width (RDW)-SD	42.0	fL	40.0 - 55.0
RBC Morphology			
	Normocytic normoc		
RBC Morphology	-		
RBC Morphology Remarks	-		4000-10000
RBC Morphology Remarks Leucocytes (Whole, Blood)	Normocytic normoc	hromic	
Remarks Leucocytes (Whole, Blood) Total Leucocytes (WBC) Count*	Normocytic normoc	hromic	
RBC Morphology Remarks Leucocytes (Whole, Blood) Total Leucocytes (WBC) Count* (Electrical Impedence)	Normocytic normoc	hromic cell/cu.mm	4000-10000
RBC Morphology Remarks Leucocytes (Whole, Blood) Total Leucocytes (WBC) Count* (Electrical Impedence) Neutrophils*	Normocytic normoc	hromic cell/cu.mm	4000-10000
RBC Morphology Remarks Leucocytes (Whole, Blood) Total Leucocytes (WBC) Count* (Electrical Impedence) Neutrophils* (VCSn Technology)	Normocytic normoc 5600 43	hromic cell/cu.mm %	4000-10000 40 - 80
RBC Morphology         Remarks         Leucocytes (Whole, Blood)         Total Leucocytes (WBC) Count*         (Electrical Impedence)         Neutrophils*         (VCSn Technology)         Lymphocytes*	Normocytic normoc 5600 43	hromic cell/cu.mm %	4000-10000 40 - 80
RBC Morphology         Remarks         Leucocytes (Whole, Blood)         Total Leucocytes (WBC) Count*         (Electrical Impedence)         Neutrophils*         (VCSn Technology)         Lymphocytes*         (VCSn Technology)	Normocytic normoc 5600 43 <b>41</b>	hromic cell/cu.mm %	4000-10000 40 - 80 20 - 40
RBC Morphology         Remarks         Leucocytes (Whole, Blood)         Total Leucocytes (WBC) Count*         (Electrical Impedence)         Neutrophils*         (VCSn Technology)         Lymphocytes*         (VCSn Technology)         Monocytes*	Normocytic normoc 5600 43 <b>41</b>	hromic cell/cu.mm %	4000-10000 40 - 80 20 - 40
RBC Morphology         Remarks         Leucocytes (Whole, Blood)         Total Leucocytes (WBC) Count*         (Electrical Impedence)         Neutrophils*         (VCSn Technology)         Lymphocytes*         (VCSn Technology)         Monocytes*         (VCSn Technology)	Normocytic normoc 5600 43 <b>41</b> 10	hromic cell/cu.mm % %	4000-10000 40 - 80 20 - 40 2 - 10
RBC Morphology         Remarks         Leucocytes (Whole, Blood)         Total Leucocytes (WBC) Count*         (Electrical Impedence)         Neutrophils*         (VCSn Technology)         Lymphocytes*         (VCSn Technology)         Monocytes*         (VCSn Technology)         Eosinophils*	Normocytic normoc 5600 43 <b>41</b> 10	hromic cell/cu.mm % %	4000-10000 40 - 80 20 - 40 2 - 10

#### Absolute Count

awkita Mayale

**Dr.Ankita Nayak** (M.D. Pathology

Ground Floor, Chetan A Building, Rajawadi Road No. 1, Navratri Chowk, Ghatkoper East, Mumbai -400077.

Contact : 77770 25835

S Toll Free : 1800 210 1616

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ID	: 15445	C
Name	: AKSHAAN AGRAWAL	F
DOB/Age	: 22 years	F
Gender	: Male	F

Collection : May 25, 2024, 09:18 a.m. : May 25, 2024, 09:58 a.m. Received : May 25, 2024, 02:10 p.m. Reported Ref. Doctor : SELF

Client Name : Arcofemi Healthcare Pvt. Ltd - PANI017 Client Address : GHATKOPAR



Test Description	Value(s)	Reference F	lange	
Absolute Neutrophil Count* (Calculated)	2.41	* 10^9/L	2.0 - 7.0	
Absolute Lymphocyte Count* (Calculated)	2.30	* 10^9/L	1-3	
Absolute Monocyte Count* (Calculated)	0.56	* 10^9/L	0.2-1.0	
Absolute Eosinophil Count* (Calculated)	0.34	* 10^9/L	0.0-0.5	
Absolute Basophils Count* (Calculated)	0	* 10^9/L	0.1-0.2	
WBC	Within normal I	imits		
Platelets (Whole, Blood)				
Platelet Count* (Electrical Impedence)	259	10^3/ul	150 - 450	
Mean Platelet Volume (MPV)* (Electrical Impedence)	7.4	fL	7.2 - 11.7	
Platelet Morphology	Adequate on si	mear		
PCT* (Calculated)	0.191	%	0.2 - 0.5	
PDW* (Calculated)	16.4	%	9.0 - 17.0	

Tests done on Automated Five Part Cell Counter. (WBC, RBC, Platelet count by impedance method, colorimetric method for Hemoglobin, WBC differential by flow cytometry using laser technology other parameters are calculated). All Abnormal Haemograms are reviewed confirmed microscopically.



\*\*END OF REPORT\*\*

ankita Mayale

**Dr.Ankita Nayak** (M.D. Pathology

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ID	: 15445	Collection	: May 25, 2024, 09:18	3 a.m.	Client Name : Arcofemi
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:58	3 a.m.	Healthcare Pvt. Ltd - PANI017
DOB/Age	: 22 years	Reported	: May 25, 2024, 02:51	l p.m.	Client Address : GHATKOPAR
Gender	: Male	Ref. Doctor	: SELF		
Test Des	cription		Value(s)	Referen	ce Range
		ESR;	Erythrocyte Sedime	entation F	Rate .
Erythrocy	te Sedimentation Rate		3	mm/hr	<15

(EDTA Whole blood, modified westerngren)

#### Interpretation:

It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.



\*\*END OF REPORT\*\*



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ID	: 15445	Collection	: May 25, 2024, 09:18 a.m.	Client Name
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 10:54 a.m.	Healthcare Pv
DOB/Age	: 22 years	Reported	: May 25, 2024, 05:02 p.m.	Client Address
Gender	: Male	Ref. Doctor	: SELF	

: Arcofemi vt. Ltd - PANI017 s : GHATKOPAR

70-140



### **Test Description**

**Reference Range** 

mg/dL

## Glucose, Post Prandial (PP), 2 hours

Value(s)

72

Blood Glucose-Post Prandial\* (Plasma - P, Hexokinase)

\*\*END OF REPORT\*\*



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ID	: 15445	Collection	: May 25, 2024, 09:18 a.m.	Clien
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:57 a.m.	Healt
DOB/Age	: 22 years	Reported	: May 25, 2024, 02:41 p.m.	Clien
Gender	: Male	Ref. Doctor	: SELF	





Test Description	Value(s)	Reference	Range	
	SG	<u>PT</u>		
SGPT* (UV with P5P, IFCC 37 Degree)	12.93	U/L	<50	
	darunta Adverta			



\*\*END OF REPORT\*\*



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### LABORATORY TEST REPORT



ID	: 15445
Name	: AKSHAAN AGRAWAL
DOB/Age	: 22 years
Gender	: Male

Collection : May 25, 2024, 09:18 a.m. Received : May 25, 2024, 09:58 a.m. : May 25, 2024, 02:41 p.m. Reported Ref. Doctor : SELF

Value(s)

Client Name : Arcofemi Healthcare Pvt. Ltd - PANI017 Client Address : GHATKOPAR



**Test Description** 

**Reference Range** 

### **Glucose Fasting (F)**

**Glucose Fasting\*** (Plasma, Hexokinase)

82 mg/dL Normal: 70-100 Impaired Fasting Glucose (IFG): 100-125 Diabetes Mellitus: >= 126 (On more than one occasion) (American Diabetes Association guidelines 2017)



\*\*END OF REPORT\*\*

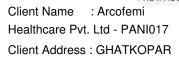
Dr. Preeti Jain (Consultant Pathologist)

Ground Floor, Chetan A Building, Rajawadi Road No. 1, Navratri Chowk, Ghatkoper East, Mumbai -400077.

Contact : 77770 25835 S Toll Free : 1800 210 1616 Support.ghatkopar@healthmapdiagnostics.com Page 6 of 12 www.manipaltrutest.com



ID	: 15445	Collection	: May 25, 2024, 09:18 a.m.
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:57 a.m.
DOB/Age	: 22 years	Reported	: May 25, 2024, 02:43 p.m.
Gender	: Male	Ref. Doctor	: SELF





0.67 - 1.17

**Test Description** Value(s) **Reference Range** Creatinine, Serum 0.98 mg/dL

Creatinine\* (Jaffe IDMS)



\*\*END OF REPORT\*\*



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Test Description		Value(s)	Reference Range
Gender : Male	Ref. Doctor	: SELF	III III IIIIIIIIIIIIIIIIIIIIIIIIIIIIII
DOB/Age : 22 years	Reported	: May 25, 2024, 03:29	p.m. Client Address : GHATKOPAR
Name : AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:58	a.m. Healthcare Pvt. Ltd - PANI017
ID : 15445	Collection	: May 25, 2024, 09:18	
			FAST, AUDUHATE, BELIABLE

### **Blood Group ABO & RH Factor**

Blood Group

(EDTA whole blood & Serum, Forward and Reverse By Tube Method)

**RH** Factor

Positive

"A"

#### Methodology

This is done by forward and reverse grouping by tube Agglutination method.

#### Interpretation

Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required.Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2-4 years).



\*\*END OF REPORT\*\*

. Preeti Jain onsultant Pathologist)

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ID	: 15445	Collection	: May 25, 2024, 09:18 a.m.	
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:57 a.m.	
DOB/Age	: 22 years	Reported	: May 25, 2024, 02:43 p.m.	
Gender	: Male	Ref. Doctor	: SELF	





Test Description	Value(s)	Reference	Range	
	<u>Bun; Blood l</u>	Jrea Nitrogen		
UREA*	31.42	mg/dL	17 - 43	
(Serum,Urease)				
BUN*	14.68	mg/dL	7 - 18	
(Serum,Calculated)				



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ID	: 15445	Collection	: May 25, 2024, 09:18 a.m.	Clie
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:57 a.m.	Hea
DOB/Age	: 22 years	Reported	: May 25, 2024, 02:43 p.m.	Clie
Gender	: Male	Ref. Doctor	: SELF	





Test Description	Value(s)	Reference	Range
	Bilirubir	n, Total	
Bilirubin-Total (DPD)	1.3	mg/dL	0.3 - 1.2
Note Kindly Correlate Clinically.		e Clinically.	



\*\*END OF REPORT\*\*



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support.ghatkopar@healthmapdiagnostics.com Page 10 of 12 www.manipaltrutest.com **Test Description** 



ID	: 15445	Collection	: May 25, 2024, 09:18 a.m.
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:57 a.m.
DOB/Age	: 22 years	Reported	: May 25, 2024, 02:28 p.m.
Gender	: Male	Ref. Doctor	: SELF

Client Name : Arcofemi Healthcare Pvt. Ltd - PANI017 Client Address : GHATKOPAR

**Reference Range** 



	Urine Examination	n-Routine	
Volume*	50	ml	-
Colour*	Pale Yellow		Pale Yellow
Transparency (Appearance)*	Clear		Clear
Deposit*	Absent		Absent
Reaction (pH)*	6.5		4.5 - 8
(Double indicator)			
Specific Gravity*	1.025		1.010 - 1.030
(lonic concetration)			
Chemical Examination (Automated Dipstick Method	<b>d)</b> Urine		
Urine Glucose (sugar)*	Absent		Absent
(Glucose oxidase/peroxidase reaction)			
Urine Protein (Albumin)*	Absent		Absent
(Error of indicators)			
Urine Ketones (Acetone)*	Absent		Absent
(Acetic acid reacts with nitroprusside)			
Blood*	Absent		Absent
(Peroxidase activity of hemoglobin)			
Bilirubin*	Absent		Absent
(Coupling of bilirubin with diazotized dichloroaniline)			
Nitrite*	Absent		Absent
(Conversion of nitrate to nitrite)			
Urobilinogen*	Normal		Normal
(Ehrlich reaction)			
Microscopic Examination Urine			
Pus Cells (WBCs)*	2-3	/hpf	0 - 5
Epithelial Cells*	0-1	/hpf	0 - 4
Red blood Cells*	Absent	/hpf	Absent
Crystals*	Absent		Absent
Cast*	Absent		Absent
Trichomonas Vaginalis*	Absent		Absent
Yeast Cells*	Absent		Absent
Amorphous deposits*	Absent		Absent

Value(s)



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ID	: 15445	Collection	: May 25, 2024, 09:18 a.m.	Client Name : Arcofemi
Name	: AKSHAAN AGRAWAL	Received	: May 25, 2024, 09:57 a.m.	Healthcare Pvt. Ltd - PANI017
DOB/Age	: 22 years	Reported	: May 25, 2024, 02:28 p.m.	Client Address : GHATKOPAR
Gender	: Male	Ref. Doctor	: SELF	MT00085811

**Test Description** 

Value(s)

**Reference Range** 

Absent

Bacteria\*

Absent



\*\*END OF REPORT\*\*



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NAME:	AKSHAAN AGRAWAL	AGE/GENDER: 22Y/M
REF. : SELF		DATE: 25.05.2024

# **X-RAY CHEST PA VIEW**

Both lung fields show equal translucency and vasculature.

Pleural spaces are clear.

The cardiac size is normal.

The domes of diaphragm are normal in position & show smooth outline.

The bony parts are normal.

### Impression:

## • No obvious significant abnormality is seen.

Suggest: Clinical correlation.



Dr. Abhishek Yadav Consultant Radiologist

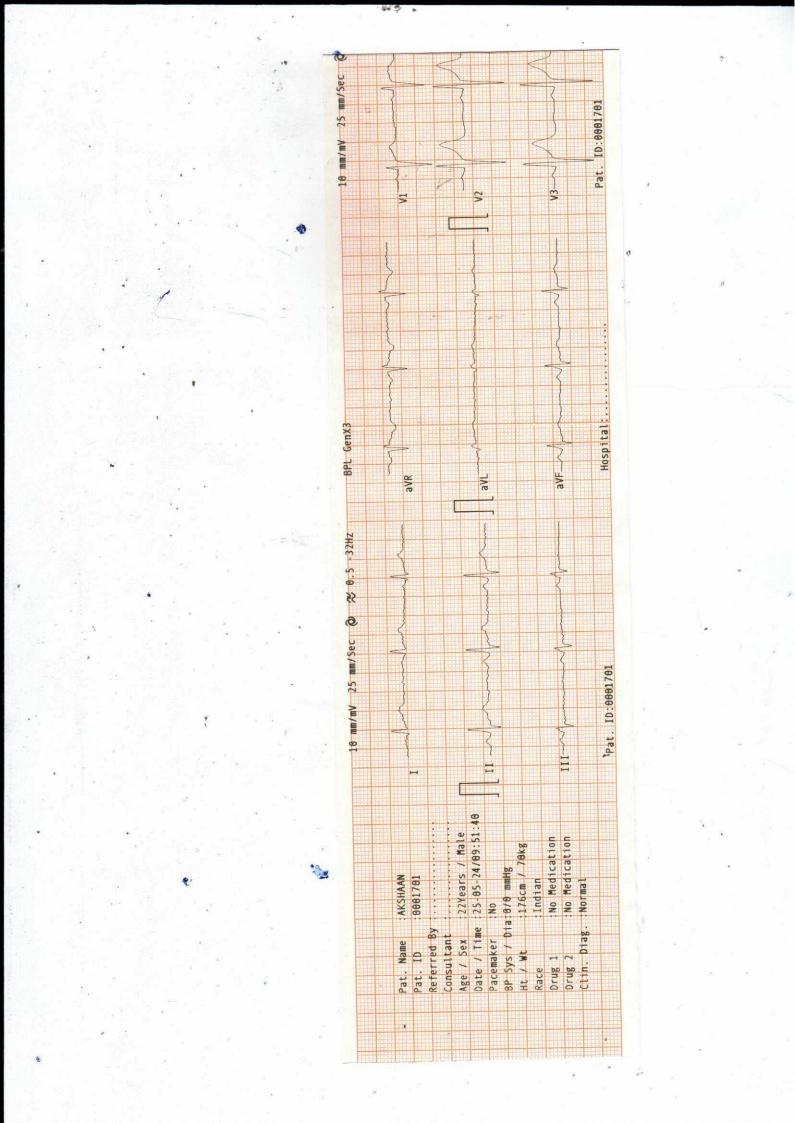
Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X-ray is known to have inter-observer variations. Further/ follow up imaging may be needed in some cases for confirmation/ exclusion of diagnosis. Not all fractures may be visible in given X-ray views; hence a clinical correlation is suggested in cases of injury with swelling and restricted movements. Please interpret accordingly.

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			Disclaimer: This report does not r of a trained physiciar	
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		CONSULTANT CARDIOL DGIST Reg. No. 2011 08 2674	report	
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Sinus rhythm	Normal ECG	SULTA Keg. N	liscla	
	· S S 68	NO T		
302	41 deg. 132 ms 380 ms	Duration(ms)	86 98 28	
		ratio	166 90 220	
	TFrontalAxis PR Interval QTC Hodges			
HRV	TFrontalAxi PR Interval QTC Hodges	Average beat fiducial point sample number Onset Termination	~ ~ ~	
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	deg. ms ms ms uv	oint		
70 bpm	66 deg. 52 ms 362 ms 34 ms	ial p et	0 00 00	
	9 9	fiducial Onset	428 570	
ate	STFrontalAxis ST Duration Q-T Interval QT Dispersion P Terminal Force	beat		
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LABORATORY TEST REPORT



**Medical Examination** Name: Akshaan Agrawal

Date:25/5124

Age/Gender: 221 PCT

Family History :

NO FILIO HTM/DM/cardiaciliness

Personal History: NO M/O SX ITrauma. NO Allergy to any known medication. No habit OF Smaking/Alcehol

Current complaints :

Mo current complaints

no comorbidities

General Examination : Fair

Height: 176 cms Sp02:98% Pulse-Rate: 78/min Heart Sounds: St S2 (D) MG Blood Pressure: 120180 mm Eye Colour Vision: NO2 mail HIP TO WAIST RATIO: 0-86 Investigations: ECG:

X-RAY :

Desai

Dr. Signature: Rupali Desai Dr. RUPALI DESAI M.B.B.S. Reg. No. 2005/04/2498

Ground Floor, Chetan A Building, Near Navratri Chowk, Rajawadi Road No. 1, Ghatkopar East, Mumbai - 400077
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 Toll Free : 1800 210 1616 # www.manipaltrutest.com



NAME:	AKSHAAN AGRAWAL	AGE/GENDER: 22Y/M
REF. : SELF		DATE: 25.05.2024

# **X-RAY CHEST PA VIEW**

Both lung fields show equal translucency and vasculature.

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Dr. Abhishek Yadav Consultant Radiologist

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X-ray is known to have inter-observer variations. Further/ follow up imaging may be needed in some cases for confirmation/ exclusion of diagnosis. Not all fractures may be visible in given X-ray views; hence a clinical correlation is suggested in cases of injury with swelling and restricted movements. Please interpret accordingly.

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