

- COMPU. PATHOLOGY • ALLERGY TESTING
- DIGITAL WHOLE BODY X-RAYS
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- DIGITAL WHOLE BODY COLOUR DOPPLER
- DIGITAL 2-D ECHO WITH COLOUR DOPPLER
- E.C.G. • LUNG FUNCTION TEST
- MAMMOGRAPHY & BONE MINERAL DENSITOMETRY

- COMPUTERISED STRESS TEST
- DENTAL
- ADVANCED DENTISTRY
- PHYSIOTHERAPY
- AUDIOMETRY & SPEECH THERAPY
- FULL BODY HEALTH CHECK-UPS
- CORPORATE HEALTH CHECKUPS



HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MR MANGESH SHIRSEKAR
Referred By Dr : MEDIWHEEL
Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
Reg. Date : 16-Feb-2024 9:06 am
Report Date : 16-Feb-2024 4:41 pm
Print Date : 19-Feb-2024 8:09 pm

BIOCHEMISTRY

TEST	RESULT		NORMAL VALUES
Blood Urea Nitrogen (BUN)	13.00		5 - 20 mg/dl
CREATININE	1.06	mg/dl	0.7 - 1.3 mg/dl
Serum Uric Acid	6.30	mg%	Male 3.5 - 7.2 mg%
Age of the Patient	54		
eGFR	77.38	ml/min	

eGFR calculation based on MDRD guideline 2012

More than 90 ml / min / 1.73 Sqm - Normal eGFR

60-89 ml / min / 1.73 Sqm - Mild decrease in eGFR is common in 30% healthy adults .

Suggest reapt testing in 6 to 12 months.

Exclude kidney disease in those at high risk (Diabetes & Hypertension

30-59 ml / min / 1.73 Sqm - consistent with modrate chronic kidney disease if confirmed over three month .

Consider nephrology referral if progressive deterioration of more than 20 % for Egfr or creatinine.

15 - 29 ml / min / 1.73 Sqm - Consistent with severe chronic kidney disease . Consider nephrology referral

----- End of Report -----

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BLOOD GROUP

TEST	RESULT
Blood Group	'A'
Rh Factor	Positive

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BLOOD SUGAR REPORT

TEST	RESULT	UNITS	NORMAL VALUES
BLOOD SUGAR FASTING	130	mg/dL	Normal: 70-110 mg/dL Impaired Fasting Glucose(IFG): 110 -125 Diabetes mellitus: \geq 126 (on more than one occasion)
BLOOD SUGAR (Post prandial)	201.7	mg/dl	Normal: 70-140 mg/dL Impaired Tolerance: 140-199 Diabetes mellitus: \geq 200 (on more than one occasion)
URINE SUGAR (Post prandial)	Trace		

Method: GOD - POD Enzymatic on Erba EM 200 Random access analyser

Comment:

Blood suagr values are known to be affected by several factors like food, stress and medication. So all discrepant results should be confirmed with repeat sample collection.

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COMPLETE BLOOD COUNT

TEST	RESULT	UNITS	NORMAL VALUES
Haemoglobin	16.6	gm %	Male : 13 - 17.0 gm%
Erythrocytes (Total RBCs)	5.45	mill. / cmm	Male : 4.2 - 5.8mill. / cmm
PCV	50.8	%	Male : 37 - 51 %
MCV	93.30	fl	80- 96 fl
MCH	30.50	pg	27 - 32 pg
MCHC	32.70	gm%	32 - 37 gm%
RDW	13.7	%	12 - 14.5
<u>TOTAL WBC COUNT</u>			
TOTAL WBC COUNT	8450	/ cumm	4,000 - 11,000
<u>DIFFERENTIAL COUNT</u>			
Neutrophils	60	%	40 - 75
Lymphocytes	35	%	20 - 40
Eosinophils	03	%	0 - 6
Monocytes	02	%	2 - 8
Platelet count	255000	Lacs/cmm	150000-450000
<u>PERIPHERAL SMEAR</u>			
RBC Morphology	Normocytic Normochromic		
WBC Morphology	Normal		
Platelets Morphology	Adequate		
ESR (westergren's method)	15	mm/hr	Male: 0 - 10 mm Female: 0 - 20 mm

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GLYCOSYLATED HAEMOGLOBIN (HbA1c)

TEST	RESULT	UNITS	NORMAL VALUES
HBA1C	7.4	%	4 - 5.7 %
ESTIMATED AVERAGE GLUCOSE	165.68		
METHOD : NEPHELOMETRY			

DIAGNOSTIC CRITERIA FOR DIABETES:

Normal: Less than 5.7%
 Impaired glucose tolerance: 5.8% to 6.4%
 Diabetes: 6.5% or more

CONTROL CRITERIA IN DIABETICS:

Optimal control: 7.0% or less
 Fair control: 7.0% to 8.0%
 Poor control: More than 8.0%

Comment :

HbA1c values should not used in diagnosis of Diabetes Mellitus and are marker of glycaemic control in known cases of Diabetes Mellitus.

----- End of Report -----

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LIPID PROFILE

TEST	RESULT	UNITS	NORMAL VALUES
SR. CHOLESTEROL	221	mg / dl	Desirable: < 200 mg/dl Borderline High: 200-239 mg/dl High: >= 240 mg/dl
SR. TRIGLYCERIDES	200	mg / dl	Normal: < 150 mg/dl Borderline High: 150-199 mg/dl High: 200-499 mg/dl Very High: >= 500 mg/dl
HDL CHOLESTEROL	46	mg / dl	35.3 - 79.5 mg / dl
VLDL	40.00	mg / dl	6 - 38 mg / dl
LDL CHOLESTEROL	135.00	mg / dl	Optimal: < 100 mg/dl Near Optimal: 100-129 mg/dl Borderline high: 130-159 mg/dl High: 160-189 mg/dl Very High: >= 190 mg/dl
CHOLESTEROL / HDL	4.80		< 5
LDL / HDL	2.93		< 3.5

NOTE: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.
 Lower HDL values are associated with increased risk of atherosclerosis. Cholesterol/HDL Ratio below 5.1 is statistically associated with decreased incidence of heart disease.

----- End of Report -----

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LIVER FUNCTION TEST

TEST	RESULT	UNITS	NORMAL VALUES
Bilirubin Total	0.6	mg / dl	0 - 1.0 mg / dl
Bilirubin Direct	0.29	mg / dl	0 - 0.4 mg / dl
Bilirubin Indirect	0.31	mg/dl	UPTO 0.8 mg / dl
S.G.P.T.	23.10	U / L	Up to 45 U / L
S.G.O.T.	17.50	U / L	Up to 46 U / L
Alkaline Phosphatase	80.00	U/l	1 - 12 Years: 54 - 369 U/l 20 - 59 Years: 53 - 128 U/l > 60 Years: 56 - 119 U/l
Total Proteins	7.36	gm / dl	6.4 - 8.3 gm / dl
Albumin	4.17	gm / dl	3.5 - 5.2 gm / dl
Globulin	3.19	mg/dl	2 - 3.5 mg / dl
A / G Ratio	1.31		1.0- 2.3
GGT	25	IU/L	55 IU/L

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PSA

TEST	RESULT	UNITS	NORMAL VALUES
Prostate Specific Antigen	1.028	ng/ml	< = 4.03 ng/ml
Method	CLIA		

Interpretation :

PSA exists in serum mainly in two forms, complexed to alpha- 1 -anti-chymotrypsin and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MR MANGESH SHIRSEKAR
Referred By Dr : MEDIWHEEL
Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
Reg. Date : 16-Feb-2024 9:06 am
Report Date : 16-Feb-2024 4:58 pm
Print Date : 19-Feb-2024 8:09 pm

T3 T4 TSH

TEST	RESULT	UNITS	NORMAL VALUES
T3 [Tri - iodothyronine]	173.928	ng/dl	91.14 - 237.61 ng/dl
T4 [Thyroxine]	6.893	ug/dl	4.71 - 13.20 ug/dl
TSH [Thyroid Stimulating Hormone]	2.007	uIU/mL	0.3 - 4.3 uIU/mL

METHOD: CLIA

Interpretation :

1. TSH results between 4.5 to 15 show considerable physiologic & seasonal variation, suggest clinical correlation or repeat testing with fresh sample.
2. TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure , severe burns , trauma and surgery etc.
3. Drugs that decrease TSH values e.g:L dropa, Glucocorticoid Drugs that increase TSH values e.g Iodine,Lithium,Amiodarone.
- 4.Total T3 & T4 Values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy. Drugs (Androgens,Estrogens. O C Pills,Phenytoin). Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

----- End of Report -----

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MR MANGESH SHIRSEKAR
Referred By Dr : MEDIWHEEL
Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
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URINE ROUTINE & MICROSCOPY

TEST	RESULT
<u>PHYSICAL EXAMINATION</u>	
Quantity	15 ml
Colour	Pale yellow
Appearance	Slightly Hazy
Deposit	Absent
pH	Acidic (5.0)
Specific Gravity	1.015
<u>CHEMICAL EXAMINATION</u>	
Proteins	Absent
Sugar	Absent
Ketone	Absent
Occult Blood	Absent
Bile Pigment	Absent
Bile Salts	Absent
Urobilinogen	Normal
<u>MICROSCOPIC EXAMINATION OF CENTRIFUGED DEPOSIT</u>	
Red Blood Cells	Absent
Pus Cells	1-2/ hpf
Epithelial Cells	1-2/ hpf
Casts	Not seen
Crystals	Not seen
Yeast	Not seen
Bacteria	Absent

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MR MANGESH SHIRSEKAR
Referred By Dr : MEDIWHEEL
Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
Reg. Date : 16-Feb-2024 9:06 am
Report Date : 16-Feb-2024 4:41 pm
Print Date : 19-Feb-2024 8:09 pm

BIOCHEMISTRY

TEST	RESULT		NORMAL VALUES
Blood Urea Nitrogen (BUN)	13.00		5 - 20 mg/dl
CREATININE	1.06	mg/dl	0.7 - 1.3 mg/dl
Serum Uric Acid	6.30	mg%	Male 3.5 - 7.2 mg%
Age of the Patient	54		
eGFR	77.38	ml/min	

eGFR calculation based on MDRD guideline 2012

More than 90 ml / min / 1.73 Sqm - Normal eGFR

60-89 ml / min / 1.73 Sqm - Mild decrease in eGFR is common in 30% healthy adults .

Suggest reapt testing in 6 to 12 months.

Exclude kidney disease in those at high risk (Diabetes & Hypertension

30-59 ml / min / 1.73 Sqm - consistent with modrate chronic kidney disease if confirmed over three month .

Consider nephrology referral if progressive deterioration of more than 20 % for Egfr or creatinine.

15 - 29 ml / min / 1.73 Sqm - Consistent with severe chronic kidney disease . Consider nephrology referral

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MR MANGESH SHIRSEKAR
Referred By Dr : MEDIWHEEL
Sex : MALE Age : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
Reg. Date : 16-Feb-2024 9:06 am
Report Date : 16-Feb-2024 5:37 pm
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BLOOD GROUP

TEST	RESULT
Blood Group	'A'
Rh Factor	Positive

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

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Referred By Dr : MEDIWHEEL
Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

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Reg. Date : 16-Feb-2024 9:06 am
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BLOOD SUGAR REPORT

TEST	RESULT	UNITS	NORMAL VALUES
BLOOD SUGAR FASTING	130	mg/dL	Normal: 70-110 mg/dL Impaired Fasting Glucose(IFG): 110 -125 Diabetes mellitus: \geq 126 (on more than one occasion)
BLOOD SUGAR (Post prandial)	201.7	mg/dl	Normal: 70-140 mg/dL Impaired Tolerance: 140-199 Diabetes mellitus: \geq 200 (on more than one occasion)
URINE SUGAR (Post prandial)	Trace		

Method: GOD - POD Enzymatic on Erba EM 200 Random access analyser

Comment:

Blood suagr values are known to be affected by several factors like food, stress and medication. So all discrepant results should be confirmed with repeat sample collection.

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MR MANGESH SHIRSEKAR
Referred By Dr : MEDIWHEEL
Sex : MALE **Age** : 54 Years
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COMPLETE BLOOD COUNT

TEST	RESULT	UNITS	NORMAL VALUES
Haemoglobin	16.6	gm %	Male : 13 - 17.0 gm%
Erythrocytes (Total RBCs)	5.45	mill. / cmm	Male : 4.2 - 5.8mill. / cmm
PCV	50.8	%	Male : 37 - 51 %
MCV	93.30	fl	80- 96 fl
MCH	30.50	pg	27 - 32 pg
MCHC	32.70	gm%	32 - 37 gm%
RDW	13.7	%	12 - 14.5
<u>TOTAL WBC COUNT</u>			
TOTAL WBC COUNT	8450	/ cumm	4,000 - 11,000
<u>DIFFERENTIAL COUNT</u>			
Neutrophils	60	%	40 - 75
Lymphocytes	35	%	20 - 40
Eosinophils	03	%	0 - 6
Monocytes	02	%	2 - 8
Platelet count	255000	Lacs/cmm	150000-450000
<u>PERIPHERAL SMEAR</u>			
RBC Morphology	Normocytic Normochromic		
WBC Morphology	Normal		
Platelets Morphology	Adequate		
ESR (westergren's method)	15	mm/hr	Male: 0 - 10 mm Female: 0 - 20 mm

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MR MANGESH SHIRSEKAR
Referred By Dr : MEDIWHEEL
Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
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GLYCOSYLATED HAEMOGLOBIN (HbA1c)

TEST	RESULT	UNITS	NORMAL VALUES
HBA1C	7.4	%	4 - 5.7 %
ESTIMATED AVERAGE GLUCOSE	165.68		
METHOD : NEPHELOMETRY			

DIAGNOSTIC CRITERIA FOR DIABETES:

Normal: Less than 5.7%
 Impaired glucose tolerance: 5.8% to 6.4%
 Diabetes: 6.5% or more

CONTROL CRITERIA IN DIABETICS:

Optimal control: 7.0% or less
 Fair control: 7.0% to 8.0%
 Poor control: More than 8.0%

Comment :

HbA1c values should not used in diagnosis of Diabetes Mellitus and are marker of glycaemic control in known cases of Diabetes Mellitus.

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HEALTHCARE

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Patient's Name : MR MANGESH SHIRSEKAR
Referred By Dr : MEDIWHEEL
Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
Reg. Date : 16-Feb-2024 9:06 am
Report Date : 16-Feb-2024 4:40 pm
Print Date : 19-Feb-2024 8:09 pm

LIPID PROFILE

TEST	RESULT	UNITS	NORMAL VALUES
SR. CHOLESTEROL	221	mg / dl	Desirable: < 200 mg/dl Borderline High: 200-239 mg/dl High: >= 240 mg/dl
SR. TRIGLYCERIDES	200	mg / dl	Normal: < 150 mg/dl Borderline High: 150-199 mg/dl High: 200-499 mg/dl Very High: >= 500 mg/dl
HDL CHOLESTEROL	46	mg / dl	35.3 - 79.5 mg / dl
VLDL	40.00	mg / dl	6 - 38 mg / dl
LDL CHOLESTEROL	135.00	mg / dl	Optimal: < 100 mg/dl Near Optimal: 100-129 mg/dl Borderline high: 130-159 mg/dl High: 160-189 mg/dl Very High: >= 190 mg/dl
CHOLESTEROL / HDL	4.80		< 5
LDL / HDL	2.93		< 3.5

NOTE: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.
 Lower HDL values are associated with increased risk of atherosclerosis. Cholesterol/HDL
 Ratio below 5.1 is statistically associated with decreased incidence of heart disease.

----- End of Report -----

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HEALTHCARE

MEDICAL CENTRE & DIAGNOSTICS

Patient's Name : MR MANGESH SHIRSEKAR
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Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
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LIVER FUNCTION TEST

TEST	RESULT	UNITS	NORMAL VALUES
Bilirubin Total	0.6	mg / dl	0 - 1.0 mg / dl
Bilirubin Direct	0.29	mg / dl	0 - 0.4 mg / dl
Bilirubin Indirect	0.31	mg/dl	UPTO 0.8 mg / dl
S.G.P.T.	23.10	U / L	Up to 45 U / L
S.G.O.T.	17.50	U / L	Up to 46 U / L
Alkaline Phosphatase	80.00	U/l	1 - 12 Years: 54 - 369 U/l 20 - 59 Years: 53 - 128 U/l > 60 Years: 56 - 119 U/l
Total Proteins	7.36	gm / dl	6.4 - 8.3 gm / dl
Albumin	4.17	gm / dl	3.5 - 5.2 gm / dl
Globulin	3.19	mg/dl	2 - 3.5 mg / dl
A / G Ratio	1.31		1.0- 2.3
GGT	25	IU/L	55 IU/L

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Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
Reg. Date : 16-Feb-2024 9:06 am
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Print Date : 19-Feb-2024 8:09 pm

PSA

TEST	RESULT	UNITS	NORMAL VALUES
Prostate Specific Antigen	1.028	ng/ml	< = 4.03 ng/ml
Method	CLIA		

Interpretation :

PSA exists in serum mainly in two forms, complexed to alpha- 1 -anti-chymotrypsin and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

----- End of Report -----

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Sex : MALE **Age** : 54 Years
Collected At : YOGI NAGAR MAIN BRANCH

Lab No. : LBA5164 *LBA5164*
Reg. Date : 16-Feb-2024 9:06 am
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Print Date : 19-Feb-2024 8:09 pm

T3 T4 TSH

TEST	RESULT	UNITS	NORMAL VALUES
T3 [Tri - iodothyronine]	173.928	ng/dl	91.14 - 237.61 ng/dl
T4 [Thyroxine]	6.893	ug/dl	4.71 - 13.20 ug/dl
TSH [Thyroid Stimulating Hormone]	2.007	uIU/mL	0.3 - 4.3 uIU/mL

METHOD: CLIA

Interpretation :

1. TSH results between 4.5 to 15 show considerable physiologic & seasonal variation, suggest clinical correlation or repeat testing with fresh sample.
2. TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure , severe burns , trauma and surgery etc.
3. Drugs that decrease TSH values e.g:L dropa, Glucocorticoid Drugs that increase TSH values e.g Iodine,Lithium,Amiodarone.
- 4.Total T3 & T4 Values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy. Drugs (Androgens,Estrogens. O C Pills,Phenytoin). Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

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URINE ROUTINE & MICROSCOPY

TEST	RESULT
<u>PHYSICAL EXAMINATION</u>	
Quantity	15 ml
Colour	Pale yellow
Appearance	Slightly Hazy
Deposit	Absent
pH	Acidic (5.0)
Specific Gravity	1.015
<u>CHEMICAL EXAMINATION</u>	
Proteins	Absent
Sugar	Absent
Ketone	Absent
Occult Blood	Absent
Bile Pigment	Absent
Bile Salts	Absent
Urobilinogen	Normal
<u>MICROSCOPIC EXAMINATION OF CENTRIFUGED DEPOSIT</u>	
Red Blood Cells	Absent
Pus Cells	1-2/ hpf
Epithelial Cells	1-2/ hpf
Casts	Not seen
Crystals	Not seen
Yeast	Not seen
Bacteria	Absent

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