



		Interim Laboratory Report		PID :	
Name	: Mr. SHANMUGANATHAN .K	Sex/Age	: Male / 34 Years	Lab ID	: 40734600061
Ref. By	: SELF	SRF ID	:	Ref. ID	:
Corporate	: NDPL - Mediwheel	UHID	:		
Col Dt. Time	: 02-Jul-2024 09:50	Recv Dt. Time	: 02-Jul-2024 09:50	Sample Type	:
Reg Dt. Time	: 02-Jul-2024 10:59	Report Released @	:	Report Printed	: 04-Jul-2024 13:15

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Bilirubin level Total			
Bilirubin Total	1.40	mg/dL	0.2-1.2

Abnormal Result(s) Summary End



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 F,Serum,Urine

TEST RESULTS UNIT BIOLOGICAL REF RANGE TEST REMARK

Complete Blood Counts

RBC Count	5.4	millions/cumm	4.50 - 5.50
Haemoglobin <i>SLS</i>	15.3	G%	14.0-18.0
PCV	46.9	%	40 - 54
Mean Corpuscular Volume	85.7	fL	83.00 - 101.00
Mean Corpuscular Hemoglobin	28.0	pg	27.00 - 32.00
Mean Corpuscular Hb Concentration	32.6	gm/dL	31.50 - 34.50
Red Cell Distribution Width (RDW)	13.2	%	11.00 - 16.00
Total Leucocyte Count(TLC) <i>Fluorescent Flowcytometry</i>	7690	Cells/cmm	4500-11500
<u>Differential Counts</u>			
Neutrophils <i>Fluorescent Flowcytometry</i>	63	%	50-70
Lymphocytes <i>Fluorescent Flowcytometry</i>	30	%	18-42
Monocytes <i>Fluorescent Flowcytometry</i>	04	%	2-11
Eosinophils <i>Fluorescent Flowcytometry</i>	03	%	1-3
<u>Absolute Counts</u>			
Absolute Neutrophil Count <i>Calculated</i>	4530	/µL	2000.00 - 7000.00
Absolute Lymphocyte Count <i>Calculated</i>	2220	/µL	1000.00 - 3000.00
Absolute Monocyte Count <i>Calculated</i>	680	/µL	200.00 - 1000.00
Absolute Eosinophil Count <i>Calculated</i>	220	/µL	20.00 - 500.00
Platelet Count <i>Electrical Impedance</i>	344000	Cells/cmm	150000-450000
Mean Platelet Volume (MPV)	10.7	fL	6.5 - 12

According to ICSH guideline (international Council for Standardisation in Hematology), the differential counts should be reported in absolute numbers.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

Mohanapriya.S

Mohanapriya.S

Verified by

DR.S.P.ARIVARASAN

**DR.S.P.ARIVARASAN,MD.,
(PATH).,**

தெற்குத் தனியா எடுக்காதீங்க டெஸ்ட் தனியா எடுங்க



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BIOCHEMICAL INVESTIGATIONS

Plasma Glucose - F **86** mg/dL Normal: 70 – 100;
HEXOKINASE/G-6-PDH Impaired Fasting Glucose (IFG): 100-125;
 Diabetes mellitus: => 126

S.G.P.T. **16.00** U/L 0 - 45
IFCCwithP5P(Kinetic)

BUN (Blood Urea Nitrogen) **12.0** mg/dL 9-20
Calculated

Urea **25.68** mg/dL 12.8-42.8
Urease

Creatinine **1.09** mg/dL 0.72-1.25
Kinetic Alkaline Picrate

Glycated Haemoglobin Estimation

HbA1C **6.40** % Normal : 4 - 6 %
HPLC Good control : 6 - 7 %
 Fair Control : 7 - 8 %
 Poor Control : > 8.

Estimated Avg Glucose (3 Mths) **136.98** mg/dL Not available
Calculated

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycaemic control.
 Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
 Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
 Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.
 In such circumstances glycaemic control can be monitored using plasma glucose levels or serum Fructosamine.
 The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes,
 risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

HB A1C %	MEAN BLOOD GLUCOSE	DEGREE OF CONTROL
4 - 6	61 - 124 mg/dl	NORMAL
6 - 7	124 - 156 mg/dl	GOOD CONTROL
7 - 8	156 - 188 mg/dl	FAIR CONTROL
MORE THAN 8	MORE THAN 188 mg/dl	POOR CONTROL

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 Reg Dt. Time : 02-Jul-2024 10:59 Report Released @ : EDTA,Plasma Fluoride F,Serum,Urine
 02 Jul 2024 14:44 Report Printed : 04 Jul 2024 10:45

BIOCHEMICAL INVESTIGATIONS

Bilirubin,Serum

Bilirubin Total <i>Diazonium Salt</i>	H 1.40	mg/dL	0.2-1.2
Bilirubin Conjugated <i>Spectrophotometry</i>	1.0	mg/dL	Adult : 0.0- 0.3 Neonates : 0.0-0.6
Bilirubin Unconjugated <i>Spectrophotometry</i>	0.40	mg/dL	Adult : 0.0 - 1.1 Neonates : 0.6 - 10.5

Clinical Pathology

Urine Routine Examination

Appearance	Slightly Turbid	Clear
Colour	Straw Yellow	Straw to Yellow
Reaction (pH) <i>Ion concentration</i>	5.5	4.6 - 8
Specific gravity <i>pKa change</i>	1.025	1.003 - 1.035

Chemical Examination

Protein <i>Tetrabromophenol blue</i>	Absent	Negative
Glucose <i>GOD-POD</i>	Absent	Negative
Bile Pigments <i>Biochemical</i>	Negative	Negative
Urobilinogen <i>Diazotization reaction</i>	Normal	Negative
Ketones <i>Nitroprusside</i>	Absent	Negative
Nitrites <i>N-(1-naphthyl)-ethylenediamine</i>	Negative	Negative
Blood <i>Peroxidase</i>	Absent	Negative

Microscopic Examination

Red Blood Cells	Nil	/HPF	Nil
Pus Cells	1-3	/HPF	0-2.7 cells/hpf
Epithelial Cells	2-4	/HPF	Present(+)
Bacteria	Nil	/µL	Nil
Yeast	Nil	/µL	Nil

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Clinical Pathology

Amorphous Deposits Nil /HPF 0-29.5 p/hpf
Phase Contrast Microscopy

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Col Dt. Time :	02-Jul-2024 09:50	Recv Dt. Time :	02-Jul-2024 09:50	Sample Type : Whole Blood EDTA,Serum
Reg Dt. Time :	02-Jul-2024 10:59	Report Released @ :	02-Jul-2024 14:02	Report Printed : 04-Jul-2024 13:15

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Blood Group & Rh Type <i>Column agglutination</i>	O Positive			
BIOCHEMICAL INVESTIGATIONS				
Cholesterol <i>Enzymatic</i>	155	mg/dL	Desirable - Upto 200; Borderline high - 200-239; High - Equal to or greater than 240	

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N. Vimala

Vimala.N

Verified by

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Reg Dt. Time	: 02-Jul-2024 10:59	Report Released @	: 02-Jul-2024 15:01	Report Printed	: 04-Jul-2024 13:15

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	13		0-15	

Pending Services

- ECG
- Body Mass Index
- EYE Test (Near,Far and Color)
- Glucose - Post Prandial
- Physician Examination
- TMT OR ECHO
- X-Ray Chest PA View

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

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<i>Patient Name</i>	MR.K.SHANMUGANATHAN 34M	<i>Patient ID</i>	0258
<i>Age/D.O.B</i>	34 Y	<i>Gender</i>	*
<i>Referring Doctor</i>	SELF	<i>Date</i>	2 Jul 24

XRAY RADIOGRAPH CHEST - PA

History

HEALTH CHECKUP

Observations

Both lung fields are clear.
Visualized thoracic vertebral is normal.
Cardiothoracic ratio is normal.
Soft tissues of the chest wall are normal.
Sternum appears normal.
Both costophrenic angles appear normal.

Impression

The study is within normal limits.

Reported By,



Dr. Nikunj Patel

MBBS, MD
Consultant Radiologist
GMC-48048

Disclaimer

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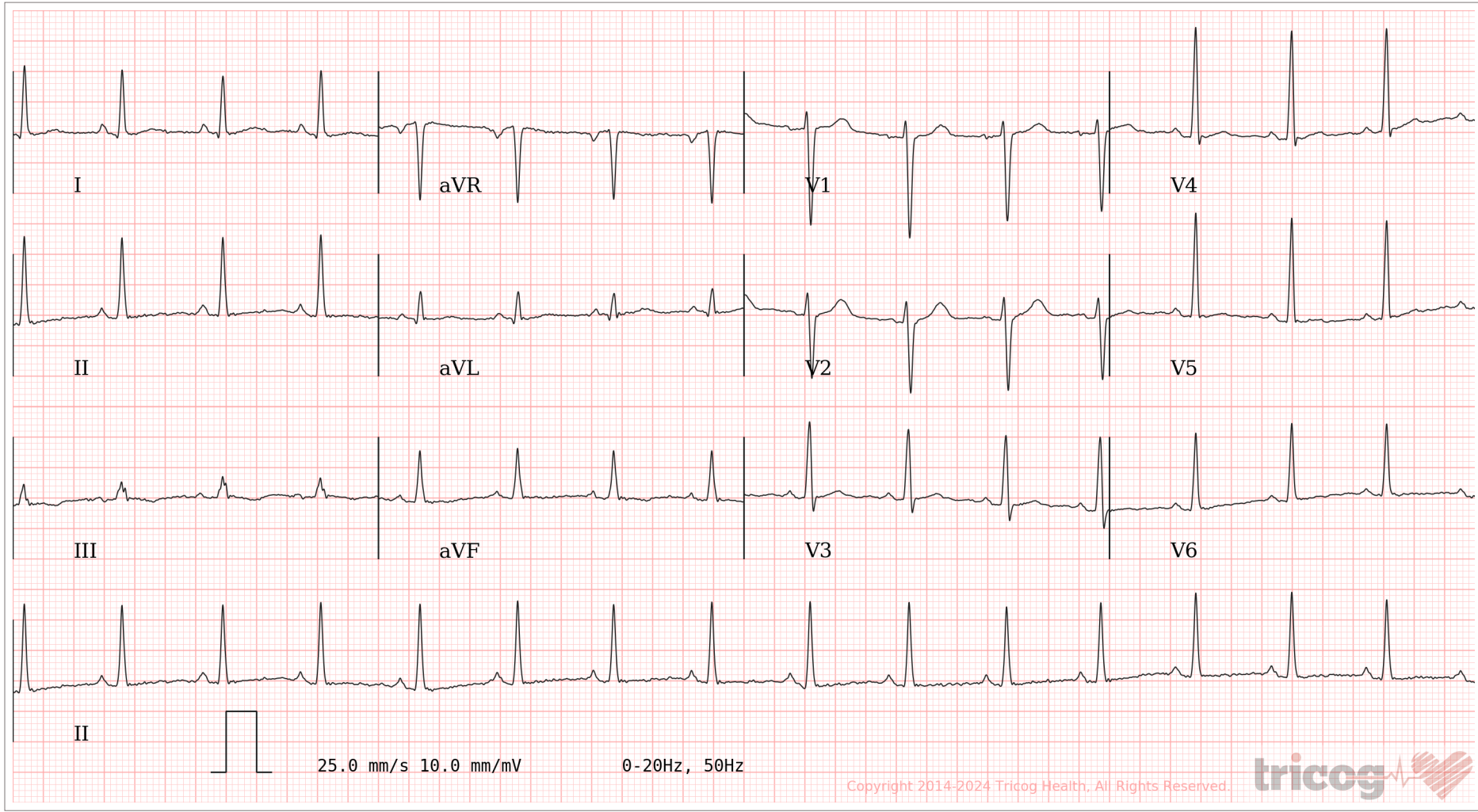
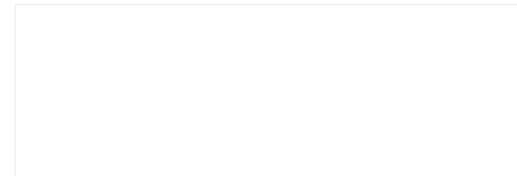
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Age / Gender: 34/Male
Patient ID: SHANMUGANATHAN

Date and Time: 2nd Jul 24 11:19 AM



AR: 94bpm VR: 94bpm QRSD: 78ms QT: 346ms QTcB: 432ms PRI: 138ms P-R-T: 36° 44° -5°

Sinus Rhythm, Non-specific ST/T Wave Changes. Please correlate clinically.

REPORTED BY
Arundhati Muragoji
ASSURED
Dr. Arundhati Muragoji
DIAGNOSIS

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.



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...Your wellness partner

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Tel: +91-11-41195959, Fax: +91-11-29523020

CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that **Mr. Shanmuganathan K** aged, **34yr**. Based on the examination, I certify that he is in good mental and physical health and it is free from any physical defects such as deafness, colour blindness, and any chronic or contagious diseases.

Place: **Madurai**

Date: 02/07/2024

Dr. Nitesh Kumar
M.D. (A) MBBS
BCMR 47093
Name & Signature of

Medical officer