





Diagnostics & Speciality Centre

NAME : **Mrs. ANUSHA KONCHADA** MR NO. : 19030561 AGE/SEX : 34 Yrs / Female VISIT NO. : 161570

REFERRED BY: DATE OF COLLECTION: 03-09-2022 at 08:38 AM

DATE OF REPORT : 03-09-2022 at 02:39 PM

REF CENTER : MEDIWHEEL

TEST PARAMETER RESULT REFERENCE RANGE SPECIMEN

MEDIWHEEL HEALTH CHECKUP FEMALE

HAEMATOLOGY

COMPLETE BLOOD COUNT (CBC) WITH ESR

HAEMOGLOBIN 13.3 gm/dL 12 - 16 gm/dL Colorimetric Method

HEMATOCRIT (PCV) 39.4 % 36 - 47 %

RED BLOOD CELL (RBC) COUNT 4.6 million/cu.mm 4 - 5.2 million/cu.mm

PLATELET COUNT 3.4 Lakhs/cumm 1.5 - 4.5 Lakhs/cumm

Electrical Impedance

MEAN CELL VOLUME (MCV) 85.4 fl 80 - 100 fl Calculated

MEAN CORPUSCULAR HEMOGLOBIN (MCH) 28.8 pg 26 - 34 pg

MEAN CORPUSCULAR HEMOGLOBIN 33.8 % 31 - 35 %

CONCENTRATION (MCHC)

Calculated

TOTAL WBC COUNT (TC) 6200 cells/cumm 4000 - 11000 cells/cumm Electrical Impedance

NEUTROPHILS 57 % 40 - 75 %

VCS Technology/Microscopic
LYMPHOCYTES 35 % 25 - 40 %

DIFFERENTIAL COUNT

VCS Technology/Microscopic

Electrical Impedance

EOSINOPHILS 03 % 0 - 7 %

VCS Technology/Microscopic

MONOCYTES 05 % 1 - 8 % VCS Technology/Microscopic

BASOPHILS 00 %

ESR 08 mm/hr 0 - 20 mm/hr

Westergren Method

BLOOD GROUP & Rh TYPING "O" Positive

Tube Agglutination (Forward and Reverse)

Collegn. u.

BIOCHEMIST



A. Hurudhay

Dr. KRISHNA MURTHY Lab Seal

Dr. VAMSEEDHAR.A D.C.P. M.D







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GLYCATED HAEMOGLOBIN (HbA1C) 4.9 % American Diabetic Association (ADA)

recommendations:

Non diabetic adults : <5.7 %

At risk (Pre diabetic): 5.7 – 6.4%

Diabetic: >/= 6.5%

Therapeutic goal for glycemic control:

Goal for therapy: < 7.0% Action suggested: > 8.0%

ESTIMATED AVERAGE GLUCOSE (eAG) 93.93 mg/dL

Calculation

Comments:

This assay is useful for diagnosing Diabetes and evaluating long term control of blood glucose concentrations in diabetic patients. It reflects the mean glucose concentration over the previous period of 8 to 12 weeks and is a better indicator of long term glycemic control as compared with blood and urine glucose measurements. This provides a additional criterion for assessing glucose control because glycated hemoglobin values are free of day-to-day glucose fluctuation and are unaffected by exercise or food ingestion.

After a sudden alteration in blood glucose concentration, the rate of change of HbA1c is rapid during initial 2 months, followed by more gradual change approaching steady state 3 months later.

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CLINICAL BIOCHEMISTRY

LIVER FUNCTION TEST (LFT)

TOTAL BILIRUBIN Colorimetric Diazo Method	1.10 mg/dL	0.2 - 1.2 mg/dL
DIRECT BILIRUBIN Colorimetric Diazo Method	0.52 mg/dL	0 - 0.4 mg/dL
INDIRECT BILIRUBIN Calculation	0.58 mg/dl	0.2 - 0.8 mg/dl
S G O T (AST) IFCC Without Pyridoxal Phosphates	22.7 U/L	up to 31 U/L
S G P T (ALT) IFCC Without Pyridoxal Phosphates	19.6 U/L	up to 46 U/L
ALKALINE PHOSPHATASE p-Nitrophenyl Phosphate	71 U/L	36 - 113 U/L
SERUM GAMMA GLUTAMYLTRANSFERASE	9.4 U/L	5 - 55 U/L
(GGT) GCNA-IFCC		
TOTAL PROTEIN Biuret Colorimetric	6.51 g/dl	6.2 - 8 g/dl
S.ALBUMIN Bromocresol Green (BCG)	3.98 g/dl	3.5 - 5.2 g/dl
S.GLOBULIN Calculation	2.5 g/dl	2.5 - 3.8 g/dl
A/G RATIO Calculation	1.6	1 - 1.5
FASTING BLOOD SUGAR Hexokinase	95.7 mg/dl	70 - 110 mg/dl
POST PRANDIAL BLOOD SUGAR Hexokinase	106.2 mg/dl	80 - 150 mg/dl

Collegy. u.



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TEST PARAMETER RESULT REFERENCE RANGE **SPECIMEN**

LIPID PROFILE TEST

TOTAL CHOLESTEROL 136 mg/dL up to 200 mg/dL

Cholesterol Oxidase-Peroxidase (CHOD-POD) Border Line: 200 - 240 mg/dL

High: > 240 mg/dL

TRIGLYCERIDES 87.2 mg/dL up to 150 mg/dL

Glycerol Peroxidase-Peroxidase (GPO-POD) Desirable: <150 mg/dL Border Line: 150 - 200 mg/dL High: >200 - 500 mg/dL Very High: > 500 mg/dL

40 - 60 mg/dl HDL CHOLESTEROL - DIRECT 55.7 mg/dl

PEG-Cholesterol Esterase >/= 60mg/dL - Excellent (protects

against heart disease) 40-59 mg/dL - Higher the better <40 mg/dL - Lower than desired (major risk for heart disease)

LDL CHOLESTEROL - DIRECT 62.9 mg/dL up to 100 mg/dL

Cholesterol Esterase-Cholesterol Oxidase 100-129 mg/dL- Near optimal/above

optimal

. 130-159 mg/dL- Borderline High 160-189 mg/dL- High 190->190 mg/dL - Very High

VLDL CHOLESTEROL 17.4 mg/dL 2 - 30 mg/dL

Calculation

TOTAL CHOLESTROL/HDL RATIO 2.4 up to 3 Calculation

3.0-4.4 - Moderate >4.4 - High

LDL/HDL RATIO 1.1 up to 2.5

2.5-3.3 - Moderate >3.3 - High

Mladu. u.



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TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN	
BLOOD UREA UREASE-GLUTAMATE DEHYDROGENASE (GLDH)	20.5 mg/dL	15 - 50 mg/dL		
CREATININE Jaffe Kinetic	0.93 mg/dL	0.4 - 1.4 mg/dL		
URIC ACID Uricase-Peroxidase	5.1 mg/dL	2.5 - 6 mg/dL		
SERUM ELECTROLYTES				
SODIUM Ion Selective Electrode (ISE)	414 mmol/L	136 - 145 mmol/L		
POTASSIUM Ion Selective Electrode (ISE)	4.3 mmol/L	3.5 - 5.2 mmol/L		
CHLORIDE Ion Selective Electrode (ISE)	102 mmol/L	97 - 111 mmol/L		

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TEST PARAMETER RESULT REFERENCE RANGE SPECIMEN

CLINICAL PATHOLOGY

URINE ROUTINE & MICROSCOPIC PHYSICAL EXAMINATION

Colour Visual Method	Pale Yellow	Pale yellow- yellow
Appearance Visual Method	Clear	Clear/Transparent
Specific Gravity Strips Method	1.010	1.005-1.035
pH	6.0	4.6-8.5

CHEMICAL EXAMINATION (DIPSTICK)

Protein	Nil	Nil -Trace
Strips Method		

Glucose	Nil	Nil
Glucose	INII	1 111

Strips Method	1411	1411
Blood Strips Method	Negative	Negative
Ketone Bodies Strips Method	Absent	Negative
Urobilinogen Strips Method	Normal	Normal
Bile Salt Strips Method	Negative	Negative
Bilirubin Strips Method	Negative	Negative

Bile Pigments Negative NIL

MICROSCOPY

Pus Cells (WBC) Light Microscopic	3 - 4 /hpf	0-5/hpf
Epithelial Cells Light Microscopic	1 - 2 /hpf	0-4/hpf
RBC Light Microscopic	Not Seen /hpf	0-2/hpf
Cast Light Microscopic	NIL	NIL
Crystal Light Microscopic	NIL	Nil

FASTING URINE SUGAR (FUS) NIL NIL

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POSTPRANDIAL URINE SUGAR NIL NIL

IMMUNOASSAY

THYROID PROFILE

 TOTAL TRIIODOTHYRONINE (T3)
 1.13 ng/mL
 0.87 - 1.78 ng/mL

 TOTAL THYROXINE (T4)
 9.74 μg/dL
 6.09 - 12.23 μg/dL

 THYROID STIMULATING HORMONE (TSH)
 1.220 μlU/mL
 0.38 - 5.33 μlU/mL

1st Trimester: 0.05 - 3.70

2nd Trimester: 0.31 – 4.35 3rd Trimester: 0.41 – 5.18

Note:

- TSH levels are subject to circadian variation, reaching peak levels between 2 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.
- Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use:

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

Dispatched by: Sumalatha

**** End of Report ****

Printed by: Sumalatha on 03-09-2022 at 02:39 PM







Lab Seal









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KONCHADA

AGE/SEX : 34 Yrs / Female BILLED TIME : 03-09-2022 at 08:32 AM

REFERRED BY: BILL NO: 193025

REF CENTER : MEDIWHEEL DATE OF REPORT : 03-09-2022 at 10:57 AM

MEDIWHEEL HEALTH CHECKUP FEMALE

RADIOLOGY

X-RAY CHEST PA VIEW

OBSERVATIONS:

The lung fields are clear bilaterally.

CP angles are clear.

Both the hila appear normal.

Cardiac diameter is within normal limits.

Tracheal is mid line.

Visible bony thoracic cage is normal.

Adjacent soft tissues appear normal.

IMPRESSION:

No significant abnormality in the visualized lung fields.

Dispatched by: Bindu

**** End of Report ****

Printed by: Bindu on 03-09-2022 at 10:57 AM



Dr. MOHAN S

MDRD

CONSULTANT RADIOLOGIST







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MEDIWHEEL HEALTH CHECKUP FEMALE

RADIOLOGY

USG REPORT - ABDOMEN AND PELVIS

OBSERVATION:

LIVER:

Liver is normal in size (13.4 cm) and normal homogenous echotexture. No obvious focal lesion is seen. Intrahepatic biliary radicles not dilated. Hepatic & portal veins are normal. CBD is normal.

GALL BLADDER:

Normal in distension. Lumen echo free. Wall thickness is normal.

PANCREAS:

Head and body visualized and appears normal. No obvious focal lesion is seen. Pancreatic duct not dilated. Tail not visualized.

SPLEEN:

Normal in size (8.6 cm) with normal echotexture. No focal lesion is seen.

RIGHT KIDNEY:

Right kidney measures $10.4 \times 1.1 \text{ cm}$ (Length x parenchymal thickness) with normal echo pattern and cortical thickness.

The shape, size and contour of the right kidney appear normal.

Cortical medullary differentiation is maintained.

No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

LEFT KIDNEY:

Left kidney measures $9.2 \times 1.1 \text{ cm}$ (Length x parenchymal thickness) with normal echo pattern and cortical thickness.

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The shape, size and contour of the left kidney appear normal.

Cortical medullary differentiation is maintained.

No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

URINARY BLADDER:

Is normal in contour. No intraluminal echoes are seen. No calculus or diverticulum is seen.

UTERUS:

Anteverted, normal in size measures 7.5 x 4.0 x 5.6 cm with normal echotexture.

No focal lesion seen within the myometrium.

Endometrial thickness measures 8.2 mm.

Minimal free fluid in the POD.

OVARIES:

Both ovaries are normal in size with normal echo pattern.

Right ovary measures 2.7 x 2.3 cm. **Dominant follicle seen.**

Left ovary measures 2.7 x 1.6 cm.

No adnexal mass lesion seen.

No evidence of free fluid in the abdomen.

IMPRESSION:

- · Minimal free fluid in the POD.
- No other significant sonographic abnormality detected.

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