




Reg. ID : 233558
Name of Patient : MR. DALCHAND KUMAR MANDAL
Age/Gender : 32 years / Male
Refd by Dr. : MEDIWHEEL
Mobile No. : 7488350850
Sample Type : EDTA

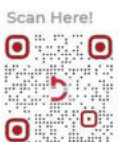
Panel Company : MEDIWHEEL
Lab Request ID : 222810014
Sample Collection Date : Oct 08, 2022, 08:56 a.m.
Sample Acknowledgment Date : Oct 08, 2022, 08:56 a.m.
Test Reported On : Oct 08, 2022, 04:10 p.m.

| Test Description | Value | Unit | Biological Ref Interval |
|--|-----------------|--------------|-------------------------|
| Complete Blood Count (CBC) | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| HAEMOGLOBIN (Hb) | 14.1 | gm/dl | 13.00 - 17.00 |
| Method : SLS | | | |
| TLC (Total Leucocyte Count) | 6600 | /cumm | 4000.00 - 10000.00 |
| Method : ELECTRIC IMPEDENCE | | | |
| DIFFERENTIAL COUNT | | | |
| NEUTROPHIL | 55 | % | 40.00 - 70.00 |
| LYMPHOCYTE | 37 | % | 20.00 - 40.00 |
| EOSINOPHIL | 03 | % | 1.00 - 6.00 |
| MONOCYTE | 05 | % | 2.00 - 10.00 |
| BASOPHIL | 0 | % | 0.00 - 2.00 |
| E.S.R. | 15 | mm/Ist hr. | 0.00 - 15.00 |
| Method : Westergen | | | |
| R B C (Red Blood Cell Count) | 4.6 | Millions/cmm | 4.50 - 5.50 |
| Method : Impedence | | | |
| PCV (Hematocrit) | 42.1 | % | 40.00 - 50.00 |
| M C V (Mean Corp Volume) | 91.52 | fL | 83.00 - 101.00 |
| Method : CALCULATED | | | |
| M C H (Mean Corp Hb) | 30.65 | pg | 27.00 - 32.00 |
| Method : CALCULATED | | | |
| M C H C (Mean Corp Hb Conc) | 33.49 | % | 31.50 - 34.50 |
| Method : CALCULATED | | | |
| MPV | 13.1 ▲ | fL | 6.5-12 |
| Method : Calculated | | | |
| PLATELET COUNT | 135000 ▼ | /cumm | 150000.00 - 410000.00 |
| Method : Impedence | | | |
| ABSOLUTE EOSINOPHIL COUNT | 198 | /cumm | 40.00 - 440.00 |
| ABSOLUTE LYMPHOCYTES COUNT | 2442 | /cumm | 1000.00 - 3000.00 |
| ABSOLUTE NEUTROPHIL COUNT | 3630 | /cumm | 2000.00 - 7000.00 |
| Method : MICROSCOPY | | | |
| RDW -CV | 13.5 | % | 11.60 - 14.00 |
| RDW -SD | 44.7 | fL | 39.00 - 46.00 |
| PDW | 25.3 ▲ | | 8.3 - 25 |

END OF REPORT

If tests results are alarming/unexpected,client is advised to contact the Lab immediately for possible remedial actions.


Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 233558 **Panel Company** : MEDIWHEEL
Name of Patient : MR. DALCHAND KUMAR MANDAL **Lab Request ID** : 222810014
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Refd by Dr. : MEDIWHEEL **Sample Acknowledgment Date** : Oct 08, 2022, 08:56 a.m.
Mobile No. : 7488350850 **Test Reported On** : Oct 08, 2022, 05:28 p.m.
Sample Type : EDTA

| Test Description | Value | Unit | Biological Ref Interval |
|--|----------|------|-------------------------|
| <u>Blood Group ABO & RH TYPING*</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| BLOOD GROUP ABO | O | | |
| RH Typing | Positive | | |

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 233558
Name of Patient : MR. DALCHAND KUMAR MANDAL
Age/Gender : 32 years / Male
Refd by Dr. : MEDIWHEEL
Mobile No. : 7488350850
Sample Type : FLUORIDE-F

Panel Company : MEDIWHEEL
Lab Request ID : 01222810014
Sample Collection Date : Oct 08, 2022, 08:56 a.m.
Sample Acknowledgment Date : Oct 08, 2022, 08:56 a.m.
Test Reported On : Oct 08, 2022, 05:37 p.m.

| Test Description | Value | Unit | Biological Ref Interval |
|--|-------|-------|-------------------------|
| <u>BLOOD GLUCOSE FASTING</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| BLOOD GLUCOSE FASTING | 99 | mg/dl | 70 - 99 |
| Method : Hexokinase | | | |
| Comments | | | |
| Fasting Blood Sugar: 70-99 mg/dl : Non Diabetic 100-125 mg/dl : Impaired Fasting Glucose >125 mg/dl : Diabetic | | | |

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 233558
Name of Patient : MR. DALCHAND KUMAR MANDAL
Age/Gender : 32 years / Male
Refd by Dr. : MEDIWHEEL
Mobile No. : 7488350850
Sample Type : URINE

Panel Company : MEDIWHEEL
Lab Request ID : 222810014
Sample Collection Date : Oct 08, 2022, 08:56 a.m.
Sample Acknowledgment Date : Oct 08, 2022, 08:56 a.m.
Test Reported On : Oct 08, 2022, 04:51 p.m.

| Test Description | Value | Unit | Biological Ref Interval |
|------------------|-------|------|-------------------------|
|------------------|-------|------|-------------------------|

URINE Examination R/M*

Arogya_Bank of Baroda_Health Check_ Male

Physical examination

| | | | |
|------------|-------------|---|-------------|
| Quantity | 20ml | | |
| Colour | Pale Yellow | . | Pale yellow |
| Appearance | Clear | | |

Chemical Examination

| | | | |
|-----------------------------------|----------|--|---------------|
| Ph | 6.5 | | 5.0-8.0 |
| Method : Method : Dipstick Manual | | | |
| Specific Gravity | 1.015 | | 1.005 - 1.030 |
| Method : Method : Dipstick Manual | | | |
| Protein | Negative | | Negative |
| Method : Method : Dipstick Manual | | | |
| Glucose | Negative | | Negative |
| Method : Dipstick/Manual | | | |
| Bilirubin | Negative | | Negative |
| Method : Dipstick/Manual | | | |
| Ketones | Negative | | Negative |
| Method : Dipstick/Manual | | | |
| Nitrite | Negative | | Negative |
| Method : Dipstick/Manual | | | |
| Urobilinogen | Normal | | Normal |
| Method : Dipstick/Manual | | | |

Microscopic Examination - Method "Microscopy"

| | | | |
|-------------------|--------|------|-----------|
| Pus cells | 1 - 2 | /hpf | 0 - 4/hpf |
| Red Blood Cells | NIL | /hpf | Nil |
| Epiethelial Cells | 1 - 2 | /hpf | 1 - 2/hpf |
| Crystals | Absent | . | Absent |
| Casts | Absent | . | Absent |
| Yeast | Absent | . | Absent |
| Bacteria | Absent | . | Absent |

Note

Pus Cells are significant only in midstream sample. Important for interpretation in female patient as local contamination may occur.

A urine analysis alone usually doesn't provide a definite diagnosis. Depending on the reason your doctor recommended this test, you might need follow-up for unusual results. Evaluation of the urine analysis results with other tests can help your provider determine next steps. Getting standard test results from a urine analysis doesn't guarantee that you're not ill. It might be too early to detect disease or your urine could be too diluted. Tell your doctor if you still have signs and symptoms.



Dr. A. LALCHANDANI
M.D. (Pathology)



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Sample Type : URINE

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| Test Description | Value | Unit | Biological Ref Interval |
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****END OF REPORT****

If tests results are alarming/unexpected,client is advised to contact the Lab immediately for possible remedial actions.


Dr. A. LALCHANDANI
M.D. (Pathology)




Reg. ID : 233558
Name of Patient : MR. DALCHAND KUMAR MANDAL
Age/Gender : 32 years / Male
Refd by Dr. : MEDIWHEEL
Mobile No. : 7488350850
Sample Type : FLOURIDE PP

Panel Company : MEDIWHEEL
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Test Reported On : Oct 08, 2022, 05:37 p.m.

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|--|-------|-------|-------------------------|
| <u>BLOOD GLUCOSE PP</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| BLOOD GLUCOSE PP | 101 | mg/dl | 70 - 139 |
| Method : Hexokinase | | | |
| Comments | | | |
| PP Blood Sugar: 70-139 mg/dl : Non Diabetic 140-199 mg/dl : Impaired Glucose >200 mg/dl : Diabetic | | | |

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





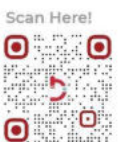
Reg. ID : 233558
Name of Patient : MR. DALCHAND KUMAR MANDAL
Age/Gender : 32 years / Male
Refd by Dr. : MEDIWHEEL
Mobile No. : 7488350850
Sample Type : SERUM

Panel Company : MEDIWHEEL
Lab Request ID : 00222810014
Sample Collection Date : Oct 08, 2022, 08:56 a.m.
Sample Acknowledgment Date : Oct 08, 2022, 08:56 a.m.
Test Reported On : Oct 08, 2022, 04:40 p.m.

| Test Description | Value | Unit | Biological Ref Interval |
|--|---------------|-------|--|
| <u>Lipid-Profile*</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| CHOLESTROL TOTAL | 215 | mg/dL | Desirable : < 200 Borderline: 200 - 239 High : > 240 |
| Method : CHOD-POD | | | |
| T.G | 209 | mg/dL | Desirable < 150 Borderline High 150 - 199 High 200 - 499 Very High > 500 |
| Method : ENZYMATYIC (E.P) | | | |
| HDL | 45 | mg/dL | 40-60 |
| Method : Enzymatic immunoinhibition | | | |
| V L D I | 41.8 ▲ | mg/dl | 07 - 35 |
| Method : Calculated | | | |
| LDL CHOLESTEROI | 128.2 | mg/dl | Desirable :- < 100 Border line: 130 - 159 High Risk : 160 - 189 Very High : > 190 |
| Method : Calculated | | | |
| LDL / HDL CHOLESTEROL Ratio | 2.85 | | 2.5 - 3.5 High : > 3.5 |
| Method : Calculated | | | |
| TOTAL / HDL CHOLESTEROL Ratio | 4.78 | | Moderate Risk : 3.5 - 5.0 High Risk : > 5.0 |
| Method : Calculated | | | |

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 233558
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Age/Gender : 32 years / Male
Refd by Dr. : MEDIWHEEL
Mobile No. : 7488350850
Sample Type : SERUM

Panel Company : MEDIWHEEL
Lab Request ID : 00222810014
Sample Collection Date : Oct 08, 2022, 08:56 a.m.
Sample Acknowledgment Date : Oct 08, 2022, 08:56 a.m.
Test Reported On : Oct 08, 2022, 04:41 p.m.

Liver Function Test (LFT)*

Arogya_Bank of Baroda_Health Check_ Male

| | | | |
|--|-------|-------|-----------|
| BILIRUBIN TOTAL | 1.5 ▲ | mg/dL | 0.3 - 1.2 |
| Method : DIAZO | | | |
| BIL DIRECT | 0.3 ▲ | mg/dL | < 0.2 |
| Method : DIAZO | | | |
| BIL INDIRECT | 1.2 | | 0.4-1.1 |
| Method : CALCULATED | | | |
| AST/SGOT | 47 | μ/L | < 50 |
| Method : UV WITHOUT P5P | | | |
| ALT/SGPT | 62 ▲ | μ/L | < 50 |
| Method : UV WITHOUT P5P | | | |
| ALKALINE PHOSPHATE | 80 | IU/L | 30-120 |
| Method : PNPP, AMP BUFFER | | | |
| TOTAL PROTEIN | 8.2 | g/dL | 6.6 - 8.3 |
| Method : BIURET | | | |
| ALBUMIN | 4.7 | g/DL | 3.5 - 5.2 |
| Method : BCG | | | |
| GLOBULIN | 3.5 | g/dl | 2.0-3.5 |
| Method : Calculated | | | |
| A/G RATIO | 1.34 | | 0.9-2.5 |
| Method : Calculated | | | |
| GGT | 25 | μ/L | < 55 |
| Method : Glutamyl carboxy nitroanilide Glycylglycine | | | |

****END OF REPORT****

If tests results are alarming/unexpected,client is advised to contact the Lab immediately for possible remedial actions


Dr. A. LALCHANDANI
M.D. (Pathology)





| | |
|--|--|
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| Name of Patient : MR. DALCHAND KUMAR MANDAL | Lab Request ID : 222810014 |
| Age/Gender : 32 years / Male | Sample Collection Date : Oct 08, 2022, 08:56 a.m. |
| Refd by Dr. : MEDIWHEEL | Sample Acknowledgment Date : Oct 08, 2022, 08:56 a.m. |
| Mobile No. : 7488350850 | Test Reported On : Oct 08, 2022, 05:39 p.m. |
| Sample Type : EDTA | |

GLYCOSYLATED HAEMOGLOBIN HbA1c*

Arogya_Bank of Baroda_Health Check_ Male

HBA1C* 5.3 % 4.00 - 5.70

Method : HPLC - Ion Exchange

MEAN BLOOD GLUCOSE LEVEL Mean Blood 105 mg/dL 68 - 117

Glucose Level over past 60 days period

INTERPRETATION**According to recommendations of the American Diabetes Association (ADA)**

| Group | HbA1c in % |
|---------------------------------|----------------|
| Non-Diabetic adults 18 year | 4.5 - 5.6 |
| At risk of developing diabetes | > 5.7 to < 6.4 |
| Diagnosing of Diabetes mellitus | >= 6.5 |

Comments

- Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have q high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.
- Diabetes patients with HbA1c levels below 7%(DCCT/NGSP) meet the goal of the ADA.
- HbA1c levels below the established reference interval may indicate recent episodes of hypoglycemia, the presence of Hb variants or shortened lifetime of erythrocytes.
- HbA1c Provides an index of average blood glucose levels over the past 8 -12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

FACTORS THAT INTERFERE WITH HbA1C Measurement- Hemoglobin variants,elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the with renal failure) can affect the accuracy of HbA1c measurements.

FACTORS THAT AFFECT INTERPRETATION OF HBA1C RESULTS- Any condition that shortens erythrocyte survival or decreases mean erythrocyte age (e.g.,recovery from acute blood loss, hemolytic anemia, HbSS, HbCC, and HbSC) will falsely lower HbA1c test results regardless of the assay method used. Iron deficiency anemia is associated with higher HbA1c

END OF REPORT

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| | | | |
|------------------------|-----------------------------|-----------------------------------|----------------------------|
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| Name of Patient | : MR. DALCHAND KUMAR MANDAL | Lab Request ID | : 222810014 |
| Age/Gender | : 32 years / Male | Sample Collection Date | : Oct 08, 2022, 08:56 a.m. |
| Refd by Dr. | : MEDIWHEEL | Sample Acknowledgment Date | : Oct 08, 2022, 08:56 a.m. |
| Mobile No. | : 7488350850 | Test Reported On | : Oct 08, 2022, 05:39 p.m. |
| Sample Type | : EDTA | | |



Dr. A. LALCHANDANI
M.D. (Pathology)

| Value | Unit | Biological Ref Interval |
|-------|------|-------------------------|
|-------|------|-------------------------|





| | | | |
|------------------------|-----------------------------|-----------------------------------|----------------------------|
| Reg. ID | : 233558 | Panel Company | : MEDIWHEEL |
| Name of Patient | : MR. DALCHAND KUMAR MANDAL | Lab Request ID | : R222810014 |
| Age/Gender | : 32 years / Male | Sample Collection Date | : Oct 08, 2022, 08:56 a.m. |
| Refd by Dr. | : MEDIWHEEL | Sample Acknowledgment Date | : Oct 08, 2022, 08:56 a.m. |
| Mobile No. | : 7488350850 | Test Reported On | : Oct 10, 2022, 11:49 a.m. |
| Sample Type | : RADIO | | |

Male Ultrasound Whole Abdomen*

Arogya_Bank of Baroda_Health Check_ Male

Liver measures 13.5- cm in the craniocaudal axis , outline smooth with homogenous **echotexture is reflective suggestive of fatty change grade I.** No obvious focal parenchymal lesion seen no extra or intra hepatic biliary dilatation is noted . Hepatic veins drain normally in to IVC . Portal vein is normal and in course and caliber.

Gall bladder is distended. No intra luminal calculus is seen. Gall bladder wall is normal in thickness Common bile duct is normal in caliber and lumen is clear.

Pancreas is normal in size & outline Echotexture is homogenous. No evidence of any focal lesion or calcification is seen. Pancreatic duct is not dilated.

Spleen measures 10.0 cm normal in outline and echotexture. No focal lesion calcification is seen.

Right **kidney** measures 100 X 41 mm , corticomedullary differentiation is maintained. cortical echotexture is homogenous No mass lesion, or hydronephrosis is seen .**Concretion measuring 2.0 mm is seen at the lower pole.**

Left **kidney** measures 98 x 40 mm , corticomedullary differentiation is maintained. cortical echotexture is homogenous No mass lesion, calculus or hydronephrosis is seen .

Urinary bladder is distended. wall thickness is normal ,no calculus or mass seen.

Prostate measures 22.4 x 32.3 x 29.1 mm Volume is 11.0 ml. Echotexture is heterogenous and show a dense calcification is seen in the periurethral region.

Stomach is full of food residue (Patient fasting).

No significant retroperitoneal lymph adenopathy . No peritoneal fluid seen.

Impression: Fatty Liver



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Sample Type : RADIO

Panel Company : MEDIWHEEL
Lab Request ID : R222810014
Sample Collection Date : Oct 08, 2022, 08:56 a.m.
Sample Acknowledgment Date : Oct 08, 2022, 08:56 a.m.
Test Reported On : Oct 10, 2022, 11:49 a.m.

***Delayed gastric emptying
Concretion in right kidney as described.
Please correlate clinically with se uric acid and se calcuim levels.***

Please correlate clinically & with other investigations. This report is for diagnostic use only and is not valid for medicolegal purposes. We are open for reconsideration of the report if required/suggested by treating doctor.

END OF REPORT

Dr. SARABJEET
Sr. Radiologist M.D.





Reg. ID : 233558 **Panel Company** : MEDIWHEEL
Name of Patient : MR. DALCHAND KUMAR MANDAL **Lab Request ID** : 00222810014
Age/Gender : 32 years / Male **Sample Collection Date** : Oct 08, 2022, 08:56 a.m.
Refd by Dr. : MEDIWHEEL **Sample Acknowledgment Date** : Oct 08, 2022, 08:56 a.m.
Mobile No. : 7488350850 **Test Reported On** : Oct 08, 2022, 08:16 p.m.
Sample Type : SERUM

| Test Description | Value | Unit | Biological Ref Interval |
|--|---------|-------|-------------------------|
| Thyroid Function Test (T3,T4,TSH) | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| TOTAL T3 | 0.93 | ng/mL | 0.60 - 1.83 |
| Method : CLIA | | | |
| TOTAL T4 | 4.47 ▼ | ug/dl | 5.48 - 14.28 |
| Method : CLIA | | | |
| Thyroid Stimulating Hormone - TSH | 148.3 ▲ | uU/ml | 0.35 - 5.50 |
| Method : CLIA | | | |

COMMENTS:-

A high TSH result often means an underactive thyroid gland caused by failure of the gland (Hypothrodism). Very rarely,a high TSH result can indicate a problem with the pituitary gland , such as a tumour , in what is known as secondary hyperthrodism . A high TSH value can also occur in people with underactive thyroid gland who have been receiving too little thyroid hormone medication.

A low TSH result can indicate an overactive thyroid gland (hyperthyroidism) or damage to the pituitary gland that prevents it from producing TSH . A low TSH result can also occur in people with an underactive thyroid gland who are receiving too much thyroid hormone medication .

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 233558 **Panel Company** : MEDIWHEEL
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Mobile No. : 7488350850 **Test Reported On** : Oct 08, 2022, 05:29 p.m.
Sample Type : SERUM

| Test Description | Value | Unit | Biological Ref Interval |
|--|-------|-------|-------------------------|
| <u>TOTAL PSA*</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| TOTAL PSA | 0.12 | ng/ml | < 4 |

Method : ENHANCED CHEMILUMINESCENCE

SUMMARY

PSA is localized in the cytoplasm of prostatic ductal epithelium and in secretions of the ductal lumina. Because PSA is a secretory protein of the prostate, it can be recovered and purified both from prostatic tissue and from seminal plasma. PSA has been found to be primarily associated with prostate tissue, and elevated serum PSA has been found in patients with prostate cancer, benign prostatic hypertrophy, and inflammatory conditions.

Serum PSA alone is not suitable as a screen for prostate cancer because elevated PSA concentrations are also observed in patients with benign prostatic hypertrophy (BPH), nor is it recommended as a guide in disease staging. The combination of PSA measurement and rectal examination with ultrasonography in the event of abnormal findings may provide a better method of detecting prostate cancer than rectal examination alone. PSA determinations can be useful in detecting metastatic or persistent disease in patients following surgical or medical treatment of prostate cancer.

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





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| Test Description | Value | Unit | Biological Ref Interval |
|--|-------|-------|-------------------------|
| <u>SERUM CREATININE</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| CREATNINE | 0.79 | mg/DL | 0.67 - 1.17 |
| Method : ALKALINE PICRATE KINETIC | | | |

END OF REPORT


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|--|-------|-------|-------------------------|
| <u>BUN*</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| BUN | 12.8 | mg/dL | 6.0 - 20.0 |

END OF REPORT


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| Test Description | Value | Unit | Biological Ref Interval |
|--|-------|-------|-------------------------|
| <u>SERUM URIC ACID</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| URIC ACID | 5.0 | mg/DL | 3.5 - 7.2 |
| Method : URICASE CALORIMETRIC | | | |

END OF REPORT


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Sample Type : URINE

| Test Description | Value | Unit | Biological Ref Interval |
|--|---------------------------------|------|-------------------------|
| | <u>URINE SUGAR (PP)*</u> | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| URINE SUGAR (PP) | Absent | | |

END OF REPORT

Dr. A. LALCHANDANI
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Sample Type : URINE

| Test Description | Value | Unit | Biological Ref Interval |
|--|--------|------|-------------------------|
| <u>URINE SUGAR (FASTING)*</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| Urine Sugar (Fasting) | Absent | | |

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 233558
Name of Patient : MR. DALCHAND KUMAR MANDAL
Age/Gender : 32 years / Male
Refd by Dr. : MEDIWHEEL
Mobile No. : 7488350850
Sample Type : SERUM

Panel Company : MEDIWHEEL
Lab Request ID : 00222810014
Sample Collection Date : Oct 08, 2022, 08:56 a.m.
Sample Acknowledgment Date : Oct 08, 2022, 08:56 a.m.
Test Reported On : Oct 08, 2022, 04:41 p.m.

| Test Description | Value | Unit | Biological Ref Interval |
|--|-------|-------|-------------------------|
| <u>CALCIUM</u> | | | |
| Arogya_Bank of Baroda_Health Check_ Male | | | |
| CALCIUM | 9.2 | mg/dL | 8.4 - 10.2 |
| Method : Arsenazo III | | | |

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





Dr. LALCHANDANI LABS
19C, PUNJABI CLUB ROAD,
WEST PUNJABI BAGH, NEW DELHI

Last Name: DALCHAND
 First Name: DALCHAND
 ID: 65653
 Date: 08/10/2022
 Predicted: FRS 93

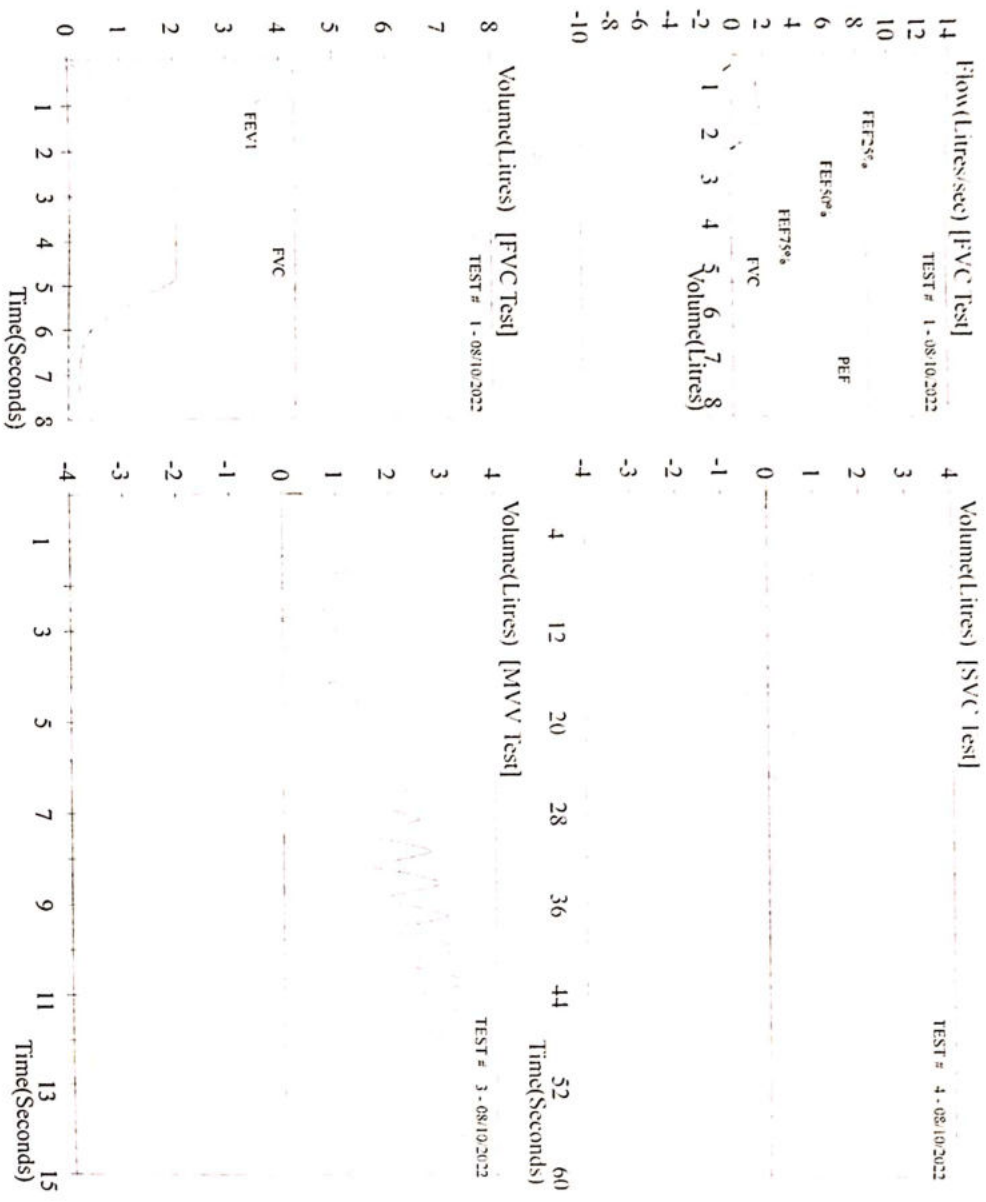
Date of Birth: 03/05/1990
 Sex: Male
 Ethnic Corr: 100%
 Description:
 Comments:

Age: 32
 Weight (kg): 64
 Height (cm): 164
 BSA (m2): 1.7
 Smoke: no

Spirometry Results

| Parameter | Post | Pre | %Pred |
|----------------|-------|-------|-------|
| FVC (L) | 4.27 | 2.15 | 50 |
| FEV1 (L) | 0.63 | 1.36 | 37 |
| PEFR (L/s) | 8.84 | 1.81 | 20 |
| PIFR (L/s) | 2.29 | 1.69 | 37 |
| FEF25-75 (L/s) | 7.50 | 1.57 | 21 |
| FEF50% (L/s) | 4.87 | 1.79 | 37 |
| FEF75% (L/s) | 2.11 | 1.58 | 75 |
| FEV1/FVC (%) | 81.45 | 63.26 | 78 |
| FVC Time (Sec) | 2.47 | 2.47 | --- |
| SVC (L) | 4.46 | 2.76 | 62 |
| ERV (L) | 0.28 | 0.24 | --- |
| IRV (L) | 0.24 | 0.24 | --- |
| VE (L/min) | 26.88 | 12 | --- |
| Rf (l/min) | 12 | 1.12 | --- |
| Ti (sec) | 3.88 | 2.24 | --- |
| Te (sec) | 2.24 | 2 | --- |
| Vi (L/s) | 0.22 | 2.48 | --- |
| Ti/Ttot (sec) | 2.48 | 21.9 | --- |
| IC (L) | 131.1 | 30 | --- |
| MVV (L/min) | 0.73 | 15.38 | --- |
| MRF (l) | 32 | 103 | --- |
| MVVi (sec) | --- | --- | --- |
| ELA (Years) | --- | --- | --- |

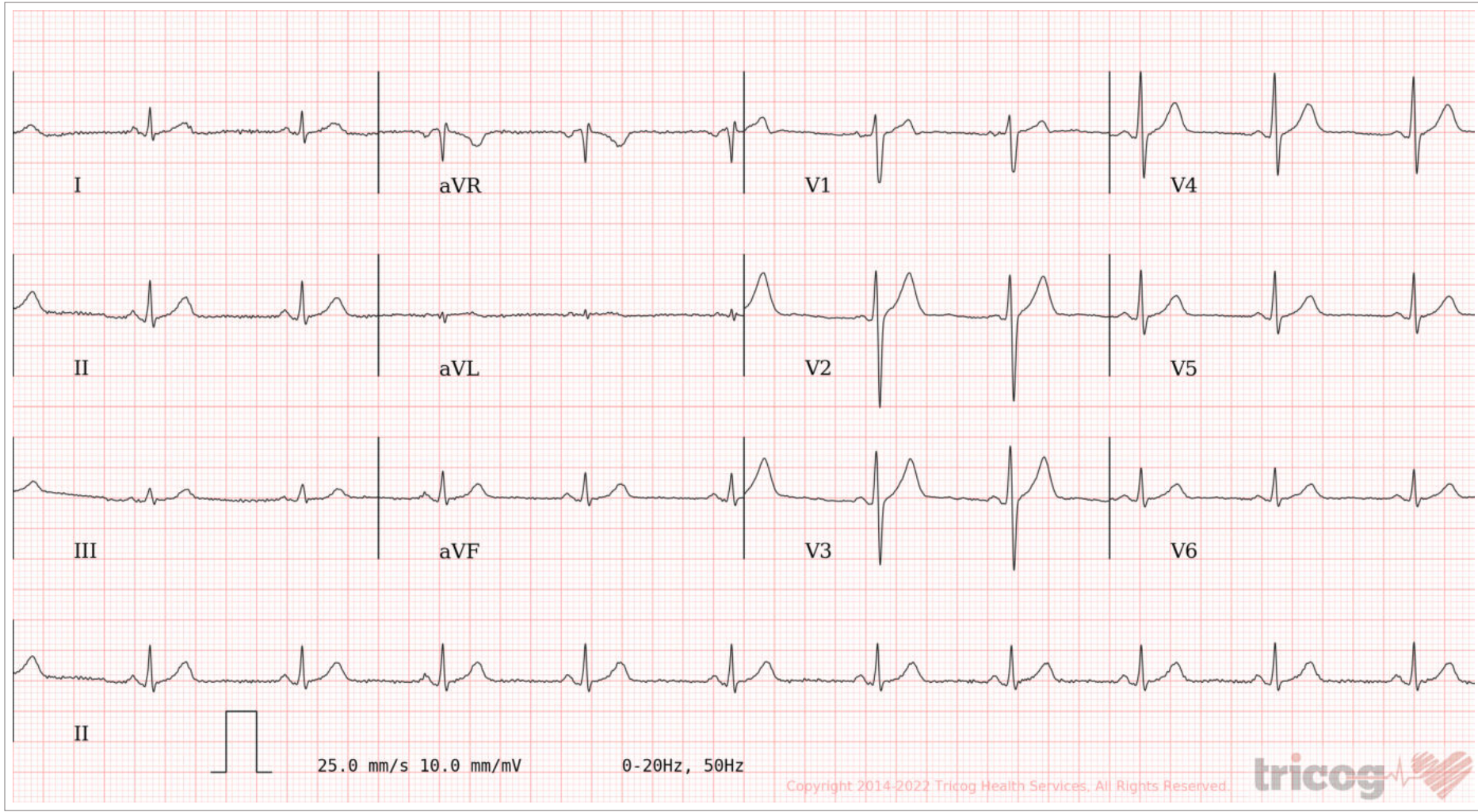
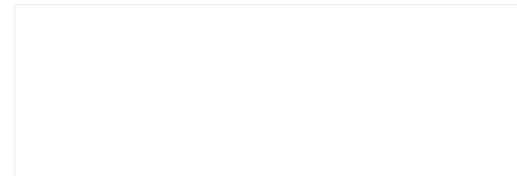
Pre Medication Report Indicates
 ESA Obstruction(PEF<70%PredPEF or FEF<70%PredFEF)



Dr.

Age / Gender: 32/Male
Patient ID: 554
Patient Name: Dalchand kumar

Date and Time: 8th Oct 22 9:23 AM



AR: 65.0bpm VR: 65.0bpm QRSD: 86.0ms QT: 352.0ms QTc: 366.0ms PRI: 126.0ms P-R-T: 50.0° 54.0° 59.0°

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY

Dr Prathima S.K

Name: Mr. DAL CHAND MANDAL
Ref:

Age/Sex : 32yrs/M
Date: 08/10/2022

Transthoracic Echo-Doppler Report

M-Mode/2-D Description:

Left Ventricle: It is Normal Size. There is no regional wall motion abnormality. Global LVEF is 60%.

Left Atrium: It is normal size.

Right Atrium: It is normal size.

Right Ventricle: It is normal size. RV systolic function is normal.

Aortic Valve: Aortic cusps are normal.

Mitral Valve: It opens normally. Subvalvular apparatus appears normal.

Tricuspid valve: It appears normal.

Pulmonary Valve: It appears normal.

Main Pulmonary artery & its branches: Appear normal.

No intracardiac clot/mass/veg.

Pericardium: There is no pericardial effusion.

IAS & IVS: Intact.

2-D/ M-Mode Measurements (mm):

| | Observed Values | Normal Values |
|----------------------|-----------------|----------------------------|
| Aortic root diameter | 27.6 | 20-36 (mm/M ²) |
| Aortic Valve Opening | | 15-26 |
| Left Atrium size | 29.4 | 19-40 |

| | End Diastole | End Systole | Normal Values |
|--------------------------|--------------|-------------|-----------------------|
| Left Ventricle Size | 43 | 26 | (ED= 37-56; ES=22-40) |
| Interventricular Septum | 09 | 10 | (ED= 6-12) |
| Posterior Wall Thickness | 09 | 10 | (ED= 5-10) |

| | | |
|--------------------------|-----|---------|
| LV Ejection Fraction (%) | 60% | 55%-80% |
|--------------------------|-----|---------|



Doppler Velocities:

Mr. DAL CHAND MAHJAL

| | | | |
|--------------------------------|-----------------------------|--------------------------------|-----|
| Pulmonary Valve (Cm / Sec.) | | Aortic Valve (Cm / Sec.) | |
| Max Velocity | 86 | Max Velocity | 114 |
| Max PG | 3.0 | Mean Velocity | |
| Mean PG | | Max PG | 5.2 |
| | | Mean PG | |
| Mitral Valve (Cm / Sec.) | Mitral Valve (Cm / Sec.) | Tricuspid Valve (Cm / Sec.) | |
| E -69 | Max Velocity | Max Velocity | |
| A -47 | Mean Velocity | Mean Velocity | |
| DT - | Max PG | Max PG | 21 |
| PHT - | Mean PG | Mean PG | |

Regurgitation

| | | | |
|---------------|------|--------------|------|
| | MR | | TR |
| Severity | Mild | Severity | Mild |
| Max Velocity | | Max Velocity | |
| Mean Velocity | | Max Gradient | |
| | AR | | PR |
| Severity | Nil | Severity | Nil |
| ED Velocity | | PADP | |
| PHT | | Mean PAP | |

Final Interpretation

Study done at heart rate 78 BPM
 No regional wall motion abnormality. Global LVEF= 60%.
 Normal cardiac chambers dimensions.
 Mild MR.
 Mild TR (RVSP=21+ RAP).
 RV systolic function is normal.
 No intra cardiac clot/mass/veg./pericardial effusion.
 IVC normal with >50% respiratory variation

Dr. Saurabh Bagga
 MD, DM (Cardiology)



Name: Mr . DAL CHAND MANDAL
Ref:

Age/Sex : 32yrs/M
Date: 08/10/2022

Transthoracic Echo-Doppler Report

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|--------------------------|-----|---------|



Doppler Velocities:

Mr. DAL CHAND MAHJAL

| | | | |
|--------------------------------|-----------------------------|--------------------------------|-----|
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| Mean PG | | Max PG | 5.2 |
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| Mitral Valve (Cm / Sec.) | Mitral Valve (Cm / Sec.) | Tricuspid Valve (Cm / Sec.) | |
| E -69 | Max Velocity | Max Velocity | |
| A -47 | Mean Velocity | Mean Velocity | |
| DT - | Max PG | Max PG | 21 |
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Regurgitation

| | | | |
|---------------|------|--------------|------|
| | MR | | TR |
| Severity | Mild | Severity | Mild |
| Max Velocity | | Max Velocity | |
| Mean Velocity | | Max Gradient | |
| | AR | | PR |
| Severity | Nil | Severity | Nil |
| ED Velocity | | PADP | |
| PHT | | Mean PAP | |

Final Interpretation

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Dr. Saurabh Bagga
 MD, DM (Cardiology)