







> E-mail: reportsgpx@gmail.com arunguptagpx@gmail.com

Gian Pathology and X-Ray	Pathology
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Gian Life Line - Health Checkup

Lab No.

: 012306240016

Reg No/BarcodeNo

y . Radiology

: 600387/01528742

Patient Name

Mrs..PUSHPANJALI

: 24/Jun/2023 08:52AM

VAISH

Reg. Date

Age/Sex

32 Y / Female

Sample Taken Date

: 24/Jun/2023 10:10AM

Client Code/Name

MEDIWHEEL FULL BODY CHECKUP

Report Date

: 24/Jun/2023 11:43AM

Referred By Doctor

: Dr. BANK OF BARODA

BIOCHEMISTRY

Blood Sugar (Fasting)

Blood Sugar Fasting Hexokinase

81

mg/dl

70 - 100

Sample Type:Plasma

Blood Sugar (PP)

Blood Sugar PP (2 Hr.) Hexokinase

110

mg/dL

70 - 140

Sample Type:Plasma

GAMMA GT/GGT

GAMMA GT / GGT

15

IU/I

9 - 36

Not in NABL Scope Sample Type:Serum

BUN/BLOOD UREA NITROGEN BLOOD UREA NITROGEN

Urease

11

mg/dl

7.0 - 18.7

Sample Type:Serum

CREATININE SERUM

CREATININE, Serum Kinetic Alkaline Picrate Sample Type:Serum

0.68

mg/dl

0.50 - 1.20

URIC ACID

URIC ACID, Serum Uricase Sample Type:Serum 3.6

mg/dl

2.5 - 6.2









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BODY CHECKUP

Referred By Doctor

: Dr. BANK OF BARODA

BIOCHEMISTRY

LFT/LIVER FUNCTION TESTS			
BILIRUBIN TOTAL Diazonium Salt	0.70	mg/dl	0.10 - 1.20
BILIRUBIN DIRECT Diazo Reaction	0.23	mg/dl	0.0 - 0.5
BILIRUBIN INDIRECT Calculated	0.47	mg/dl	0.10 - 0.8
SGOT /AST Enzymatic (NADH(Without P-5-P)	16	U/L	5 - 34
SGPT /ALT Enzymatic (NADH(Without P-5-P)	12	U/L	0.0 - 55
Alk. Phosphatase, Serum PNPP AMP Kinetic	69	U/L	40 - 150
PROTEIN TOTAL Biuret	7.2	g/dl	6.4 - 8.3
ALBUMIN BCG	4.4	g/dl	3.5 - 5.0
GLOBULIN Calculated	2.8	g/dl	2.3 - 3.5
A/G RATIO Calculated	1.57	Ratio	1.5 - 2.5
Sample Type:Serum			











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BIOCHEMISTRY

Lipid Profile			
CHOLESTEROL TOTAL Enzymetic	148	mg/dl	Desirable: <200 Boderline High: 200 – 239 High : ≥240
TRIGLYCERIDES GPO	72	mg/dl	Normal <150 Boderline High: 150 – 199 High : 200 – 499 Very High: ≥500
HDL CHOLESTEROL Accelerator Selective Detergent	37	mg/dl	40 - 60
LDL CHOLESTEROL Calculated	96.6	mg/dl	100 - 130
VLDL CALCULATED Calculated	14.4	mg/dl	13 - 36
CHOL/ HDL RATIO Calculated	4.0	Ratio	Less than 4.0
LDL / HDL RATIO	2.61		3.3 - 4.4 (Low Risk) 4.4-7.1 (Average Risk) 7.1-11.0 (Moderate Risk)

	Ratio of	LDL to HDL
Risk	Men	Women
Very low (1/2 average)	1	1.5
Average risk	3.6	3.2
Moderate risk (2x average)	6.3	5.0
High risk (3x risk)	8	6.1

HDL levels have an inverse relationship with coronary heart disease. The ability of HDL to predict the development of coronary atherosclerosis has been estimated to be four times greater than LDL and eight times greater than TC. Treatment is recommended for those with a HDL level below 40 mg/dL. An HDL of 60 mg/dL is considered protection against heart disease.

Preparation:

Blood should be collected after a 12-hour fast (no food or drink, except water). For the most accurate results, wait at least 2 months after a heart attack, surgery, infection, injury or pregnancy to check Lipid Profile.

Sample Type:Serum











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BIOCHEMISTRY

BUN/CREATININE RATIO

BLOOD UREA NITROGEN

11

mg/dl

7.0 - 18.7

Urease CREATININE, Serum

0.68

mg/dl

0.50 - 1.20

Kinetic Alkaline Picrate Ratio

16.17

mg/dl

5 - 20

Sample Type:Serum











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Patient Name : Mrs..PUSHPANJALI VAISH Reg. Date : 24/Jun/2023 08:52AM

Age/Sex : 32 Y / Female Sample Taken Date : 24/Jun/2023 01:11PM

Client Code/Name : MEDIWHEEL FULL Report Date : 24/Jun/2023 02:01PM

Referred By Doctor : Dr. BANK OF BARODA

CLINICAL PATHOLOGY

MEDIWHEEL FEMALE BELOW 40

URINE SUGAR (F)

URINE SUGAR (F) NIL

(*Not in NABL Scope*)

URINE ROUTINE EXAMINATION

Method -Dipstick And Microscopy

PHYSICAL EXAMINATION

SPECIFIC GRAVITY (Based on pka change)	1.010	1.001 - 1.030

pH (methylred/Bromothymol blue method) 6..0 4.6 - 8.0

STRAW

TURBIDITY PRESENT

Deposit (UR) PRESENT

Chemical

COLOUR

PROTEIN PRESENT (+) Nil

Dipstick/Tetra bromophenol blue/ Heat & Acid Test method).

GLUCOSE (Oxidase Peroxidase method) NIL Nil
KETONE (Nitroprusside Method) NEGATIVE Nil

BILL PIGMENT (Diazo Method)

NEGATIVE

NEGATIVE

NII

NEGATIVE

Negative

NEGATIVE

Negative

NEGATIVE

Negative

Nitrite (Based on presence of bacteria)

NEGATIVE

NEGATIVE

Negative

Leucocyte Esterase (Esterase Diazonium Method) NEGATIVE Negative

After Centrifugation at 2500 R.P.M. For 5 Minutes

MICROSCOPIC EXAMINATION

RBC (Microscopic)	OCCASIONAL	per HPF	
PUS CELLS (Microscopic)	FULL FIELD	Per HPF	0 - 5 WBC/hpf
EPITHELIAL CELLS (Microscopic)	NIL	Per HPF	

CASTS (Microscopic) NIL Per LPF

CRYSTALS (Microscopic)

Amorphous Material (Microscopic)

NIL

NII

BACTERIA (Microscopic)

NIL

Per HPF

0-0









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Report Date : 24/Jun/2023 02:01PM

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CLINICAL PATHOLOGY

URINE SUGAR (PP)

URINE SUGAR (PP)

NIL

(*Not in NABL Scope*)











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Age/Sex

32 Y / Female

Sample Taken Date

: 24/Jun/2023 09:47AM

Client Code/Name

MEDIWHEEL FULL BODY CHECKUP

Report Date : 24/Jun/2023 11:45AM

Referred By Doctor

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HAEMATOLOGY











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Sample Taken Date

: 24/Jun/2023 09:47AM

Severly High: >9.0

Client Code/Name

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Referred By Doctor

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HAEMATOLOGY MEDIWHEEL FEMALE BELOW 40

CBC / COMPLETE BLOOD COUNT			
HEMOGLOBIN (Hb) Photometry Cyanide Free	11.90	g/dl	12.0 - 15.0
TLC	7300	/cumm	4000-10000
Impedence	7300	/cullilli	4000-10000
DLC (%)			
NEUTROPHIL	58	%	40-80
DHSS/Microscopic			
LYMPHOCYTE	33	%	24-44
DHSS/Microscopic			
EOSINOPHIL DHSS/Microscopic	2	%	01-06
MONOCYTE	7	%	3-6
DHSS/Microscopic			
Platelet	156	10^3/µL	150 - 410
Impedance/Microscopic			
RBC COUNT	4.50	10^6/μL	3.8 - 4.8
Impedance	00.0	0/	00.40
PCV (HCT) Numeric Integration	36.9	%	36-46
MCV	81.5	fL	83-91
Calculated	01.0	iL.	03-31
MCH	26.2	pg	27-32
Calculated		1.5	
MCHC	32.2	g/dL	31.5-34.5
Calculated			
RDW-CV	12.8	%	11.6 - 14.0
Calculated			
MPV	11.3	fL	8 - 12
ABSOLUTE NEUTROPHIL COUNT DHSS/Calculated	4.23	10^3/μL	2.00-7.00
ABSOLUTE LYMPHOCYTE COUNT DHSS/Calculated	2.41	10^3/μL	1.0-3.0
ABSOLUTE MONOCYTE COUNT DHSS/Calculated	0.51	.10^3/μL	0.0.20-1.0
ABSOULUTE EOSINOPHIL COUNT DHSS/Calculated	0.15	10^3/µL	0.02 - 0.50
N/L Ratio	1.76	Ratio	Normal: 1 - 3 Mildly High: 4 - 6
			Moderately High: 7 - 9

Sample Type Whole Blood EDTA











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HAEMATOLOGY

MEDIWHEEL FEMALE BELOW 40

ESR WESTERGREN (Automated)

ESR WESTERGREN (Automated) WESTERGREN

12

m m

0 - 14

Not in NABL Scope

Sample Type:EDTA Blood

ABO Rh / BLOOD GROUP Tube Agglutination (FORWARD & REVERSE Method)

BLOOD GROUP / ABO-RH

ABO

В

Reverse & Forward

POSITIVE

Reverse & Forward

Sample Type:EDTA Blood











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Pathology . Radiology

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HAEMATOLOGY

HbA1C/GLYCATED HEMOGLOBIN/GHB

HBA1C/GLYCATED HEMOGLOBIN

5.9

%

Average of Glucose Level

123

mg/dl

Test is done by HPLC method (Gold Standard) D-10 Analyzer.

Expected Values:

Test	Norm	al Range
	Non Diabetic:	4.0% - 6.0%
HbA1c	Good Control:	6.1% - 8.0%
1101110	Poor Control:	8.1% - 9.0 %
	Unsatisfactory:	> 9 %

To convert an A1c to the new average mean blood glucose, use this formula: eAG(mg/dl) = (28.7 X HbA1c) - 46.7

Not in NABL Scope

Sample Type:EDTA Blood











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Referred By Doctor : Dr. BANK OF BARODA

IMMUNOASSAY

MEDIWHEEL FEMALE BELOW 40

T3/TRIDOTHYRONINE TOTAL

T3 TOTAL 1.14 ng/mL 0.35 - 1.93 CMIA

Sample Type:Serum

T4/THYROXIN TOTAL

T4 TOTAL 9.98 μg/dl 4.50 - 10.9

Increased levels are seen in graves disease cancer of thyroid as symptoms of hyperthyroidism.Low levels are seen in hypothyroidism whose symptoms are myoxyedema hashmito disease and pituitary disorders











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IMMUNOASSAY

MEDIWHEEL FEMALE BELOW 40

TSH (Thyroid Stimulating Hormone)

TSH (ECLIA) CMIA 1.48

μIU/ml

0.35 - 5.50

NOTE:

Guidelines for interpretation of abnormal thyroid function test.

TSH

T4/FT4

T3/FT3

Interpretation

High High Normal Normal

Hypothyroidism. Hypothyroidism

High Low Low Normal Normal Low/Normal Mild (subclinical) High/Normal

Low/Normal

Mild(subclinical)

Hypothyroidism Hyperthyroidism. Hyperthyroidism

Low High/Normal Low Low/Normal

Hyperthyroic

Rare pituitary(secondary)Hypothyroidism

Sample Type:Serum











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MEDIWHEEL FULL BODY CHECKUP

Report Date

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Referred By Doctor

: Dr. BANK OF BARODA

X-RAY

MEDIWHEEL FEMALE BELOW 40

X RAY CHEST PA VIEW

Diaphragms are normal.

C.P. angles are clear.

Cardiac shadow is normal.

Trachea is in midline.

Hilar shadow are heavy.

Broncho-vascular markings are prominent ----- Bronchitis.

No parenchymal lesion is seen.

Advise: - Correlate Clinicaly.

DR. S. KHURANA M.B.B.S.,D.M.R.E.

*** End Of Report ***

