



23354 080824

Registration ID : 23354

Sample Collection : 08/08/2024 10:41:14

Name : MR. ATUL R KESARWANI

Sample Received : 08/08/2024 10:41:14

Age/Sex : 39 Yrs. / M

Printed : 09/08/2024 15:23:45

Report Released : 09/08/2024 14:37:54

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd

COMPLETE BLOOD COUNT

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 15.0	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	: 5.24	10 ⁶ /μL	3.0-6.0 10 ⁶ /μL
Hematocrit (PCV) (Calculated)	: 46.6	%	36-54 %
Mean Corpuscular Volume (MCV) (calulated)	: 88.9	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 28.6	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 32.2	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 14.20	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 6600	/cumm	4000-11000 /cumm
Neutrophils (Calculated)	: 70	%	40-75 %
Eosinophils Percentage (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 22	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 06	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 267000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 31	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

*All Samples Processed At Excellas Clinics Mulund Centre .

*ESR NOT IN NABL scope.

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 09/08/2024 14:37:54)



Signature
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-2000/08/2926





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Santosh Khairnar
Dr. Santosh Khairnar
M.D. (Pathologist)
Reg. No.-2000/08/2926





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Age/Sex	: 39 Yrs. / M	Printed	: 09/08/2024 15:23:45
Ref. By	: Mediwheel	Report Released	: 08/08/2024 19:44:15
	Sent By	: Arcofemi Healthcare Pvt Ltd	

HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	: 5.20	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10

EDTA Whole Blood, Method: HPLC

Estimated Average Glucose (eAG)	: 102.54	mg/dl	65.1-136.3 mg/dL mg/dl
---------------------------------	----------	-------	------------------------

EDTA Whole Blood, Method: Calculated

Interpretation:

- 1.The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- 2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- 3.To estimate the eAG from the HbA1c value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- 4.Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 08/08/2024 19:44:15)

Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 87	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: \geq 126 mg/dl
<i>Method: GOD-POD</i>			
Fasting Urine Glucose	: Absent		Absent
GLUCOSE (SUGAR) PP, (Fluoride Plasma Used)	: 64	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: \geq 200 mg/dl
PP Urine Glucose	: Absent		Absent

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 08/08/2024 17:49:21)



Santosh Khairnar
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-2000/08/2926





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BLOOD GROUP

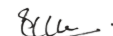
Test	Result	Unit	Biological Ref. Range
Blood Group	: 'O' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 08/08/2024 19:44:23)

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Dr. Santosh Khairnar
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Age/Sex : 39 Yrs. / M	Printed : 09/08/2024 15:23:45
Ref. By : Mediwheel	Report Released : 09/08/2024 14:32:48
Sent By : Arcofemi Healthcare Pvt Ltd	

LIPID PROFILE

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 152	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 96	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 42	mg/dl	35.3-79.5 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 90.80	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 19.2	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 2.2		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 3.6		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

Test Done on - Automated Biochemistry Analyzer (EM 200).

Interpretation

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

**All Samples Processed At Excellas Clinics Mulund Centre*

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 09/08/2024 14:32:48)

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



Dr. Santosh Khairnar
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Report Released : 09/08/2024 14:34:11

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd


LIVER FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.72	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.12	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.60	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 17.3	IU/L	0-35 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 14.0	IU/L	0-45 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 66	IU/L	53-128 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 7.3	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.0	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 3.3	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.21		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 22	U/L	0-55 U/L

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 09/08/2024 14:34:11)

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Dr. Santosh Khairnar
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Sample Received : 08/08/2024 10:41:14

Age/Sex : 39 Yrs. / M

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Report Released : 09/08/2024 14:34:43

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd

BLOOD UREA NITROGEN (BUN)

Test	Result	Unit	Biological Ref. Range
Urea	: 28.13	mg/dl	19-45 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 13.14 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 09/08/2024 14:34:43)

SERUM CREATININE

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.92	mg/dl	0.7-1.3 mg/dl

Serum, Method: Enzymatic

Test Done on - Automated Biochemistry Analyzer (EM 200).

*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 09/08/2024 14:34:22)

SERUM URIC ACID


Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 6.50	mg/dl	3.5-7.2 mg/dl

Serum, Method: Uricase - POD

Test Done on - Automated Biochemistry Analyzer (EM 200).

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 09/08/2024 14:34:50)




Dr. Santosh Khairnar
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Report Released : 09/08/2024 14:34:43

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd

BUN CREAT RATIO (BCR)

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 14.28		5-20

Serum, Method: Calculated

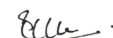
NOTE:

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 09/08/2024 14:35:27)

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




Dr. Santosh Khairnar
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Report Released : 09/08/2024 14:38:18

Ref. By : Mediwheel

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THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.1	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 11.85	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 4.44	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			


Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis, estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age, marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 09/08/2024 14:38:18)

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




Dr. Santosh Khairnar
M.D. (Pathologist)
Reg. No.-2000/08/2926





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Ref. By : Mediwheel	Report Released : 08/08/2024 17:49:58
Sent By : Arcofemi Healthcare Pvt Ltd	

EXAMINATION OF URINE

Test	Result	Unit	Biological Ref. Range
<u>PHYSICAL EXAMINATION</u>			
Quantity :	20	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	5.0		4.5 - 8.0
Specific Gravity :	1.020		1.010 - 1.030
<u>CHEMICAL EXAMINATION</u>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells :	1 - 2	/ hpf	
Pus cells :	1 - 2	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<u>OTHER FINDINGS</u>			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent


sample type:Urine

Method:Visual and Microscopic

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 08/08/2024 17:49:58)

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




Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-2000/08/2926





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Ref. By : Mediwheel

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X RAY CHEST PA VIEW

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

IMPRESSION:

No significant abnormality detected.



Dr. Reshma Gokran
MD (Radiologist)
Reg. No-2009/09/3296





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Name : MR. ATUL R KESARWANI

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Age/Sex : 39 Yrs. / M

Printed : 09/08/2024 15:23:45

Report Released : 08/08/2024 16:23:44

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd



ATUL KESARWANI.AGE;-39 MALE 080824R13 CHEST PA 08-Aug-24 10:20 AM
EXCELLAS CLINICS PVT LTD TEL:-022-25695661/71

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 08/08/2024 16:23:44)

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



Dr. Reshma Gokran
MD (Radiologist)
Reg. No-2009/09/3296





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Sample Received : 08/08/2024 10:41:14

Age/Sex : 39 Yrs. / M

Printed : 09/08/2024 15:23:45

Report Released : 08/08/2024 15:08:02

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd

OPHTHALMIC EVALUATION

Examination	Right Eye	Left Eye
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

(Collected At: 08/08/2024 10:41:14, Received At: 08/08/2024 10:41:14, Reported At: 08/08/2024 15:08:02)

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



MEDICAL EXAMINATION REPORT

Name <input checked="" type="checkbox"/> Mr./Mrs./ Miss	Atul Kesarwani	
Sex	<input checked="" type="checkbox"/> Male/ Female	
Age (yrs.) 39	UHID :	
Date	8 / 8 / 2024	Bill No. :
Marital Status	<input checked="" type="checkbox"/> Married/ No. of Children / Unmarried/ Widow :	
Present Complaints	—	
Past Medical : History Surgical :	—	
Personal History	Diet : Veg <input checked="" type="checkbox"/> / Mixed <input type="checkbox"/> : Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> / Any Other —	
Family History	Father = Mother = Siblings =	HT / DM / IHD / Stroke / Any Other Mother = HT / DM / IHD / Stroke / Any Other <u>CABG</u> Siblings = HT / DM / IHD / Stroke / Any Other
History of Allergies	Drug Allergy — Any Other	
History of Medication	For HT / DM / IHD / Hypothyroidism Any Other —	
On Examination (O/E)	G. E. : R. S. : C. V. S. : <u>NAD</u> C.N.S. : P/A : Any Other Positive Findings :	

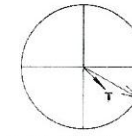
Height	168	cms	Weight	71	kg
BMI	25.2				
Pulse (per min.)	100/40		Blood Pressure (mm of Hg)	120/80 mm of Hg	
Gynaecology					
Examined by	Dr.				
Complaint & Duration					
Other symptoms (Mict, bowels etc)					
Menstrual History	Menarche _____ Cycle _____ Loss _____ Pain _____ I.M.B. _____ P.C.B. _____ L.M.P. _____ Vaginal Discharge _____ Cx. Smear _____ Contraception _____				
Obstetric History					
Examination :					
Breast					
Abdomen					
P.S.					
P.V.					
Gynaecology Impression & Recommendation					
Recommendation					
Physician Impression	EXCELLAS CLINICS PVT. LTD. B-1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Near Santoshi Mata Mandir, Mulund (West), Mumbai - 400080				
Examined by :	- Overweight = To Reduce Weight - Underweight = To Increase Weight				

Excellas Clinics Private Ltd

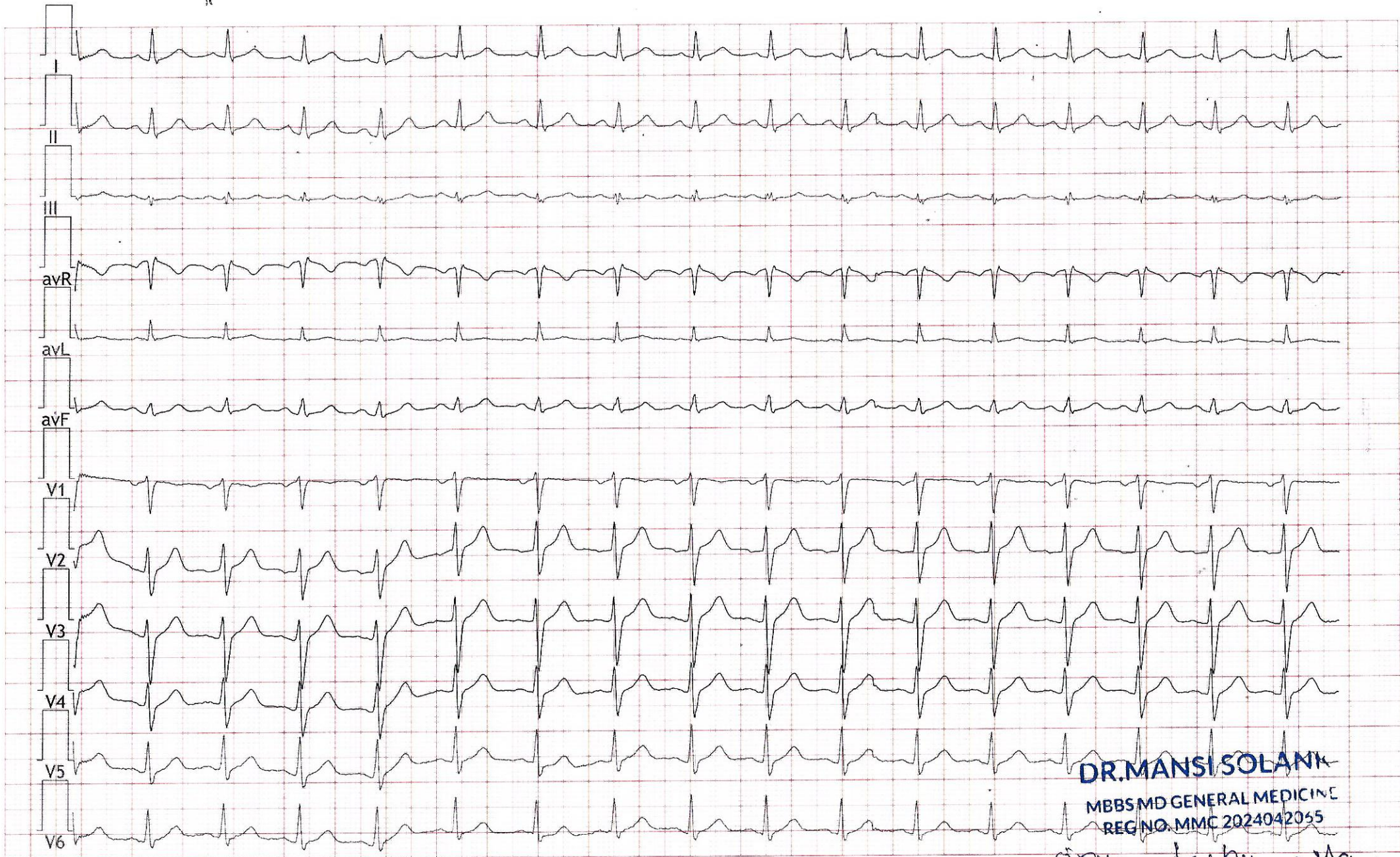
B1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Mulund (W),

8685/Atul Kesarwani 39Yrs-11Months/Male Kgs/ Cms BP: ___/___ mmHg HR: 100 bpm

Ref.: Test Date: 08-Aug-2024(10:02:35) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec



PR Interval: 166 ms
QRS Duration: 92 ms
QT/QTc: 373/482ms
P-QRS-T Axis: 54 - 29 - 46 (Deg)



DR. MANSI SOLANKI
MBBS MD GENERAL MEDICINE
REG NO. MMC 2024042055

*sinu tachy -> Mar
coron (etc clinically)*