


## Diagnosics & Speciality Centre

NAME : <b>Mrs. NALINI R</b>	MR NO. : 23030655
AGE/SEX : 31 Yrs / Female	VISIT NO. : 171747
REFERRED BY :	DATE OF COLLECTION : 25-03-2023 at 08:35 AM
	DATE OF REPORT : 25-03-2023 at 02:13 PM
REF CENTER : MEDIWHEEL	

TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
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MEDIWHEEL HEALTH CHECKUP FEMALE

### HAEMATOLOGY

#### COMPLETE BLOOD COUNT (CBC) WITH ESR

*Automated Cell Counter*

HAEMOGLOBIN <i>Colorimetric Method</i>	13.9 gm/dL	12 - 16 gm/dL
HEMATOCRIT (PCV) <i>Calculated</i>	40.4 %	36 - 47 %
RED BLOOD CELL (RBC) COUNT <i>Electrical Impedance</i>	4.8 million/cu.mm	4 - 5.2 million/cu.mm
PLATELET COUNT <i>Electrical Impedance</i>	3.7 Lakhs/cumm	1.5 - 4.5 Lakhs/cumm
MEAN CELL VOLUME (MCV) <i>Calculated</i>	85.4 fl	80 - 100 fl
Note : All normal and abnormal platelet counts are cross checked on peripheral smear.		
MEAN CORPUSCULAR HEMOGLOBIN (MCH) <i>Calculated</i>	29.5 pg	26 - 34 pg
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION (MCHC) <i>Calculated</i>	34.5 %	31 - 35 %
TOTAL WBC COUNT (TC) <i>Electrical Impedance</i>	<b>12000.0</b> cells/cumm	4000 - 11000 cells/cumm
NEUTROPHILS <i>VCS Technology/Microscopic</i>	66 %	40 - 75 %
LYMPHOCYTES <i>VCS Technology/Microscopic</i>	25 %	25 - 40 %
<b>DIFFERENTIAL COUNT</b>		
EOSINOPHILS <i>VCS Technology/Microscopic</i>	03 %	0 - 7 %
MONOCYTES <i>VCS Technology/Microscopic</i>	06 %	1 - 8 %
BASOPHILS <i>Electrical Impedance</i>	00 %	
ESR <i>Westergren Method</i>	18 mm/hr	0 - 20 mm/hr
BLOOD GROUP & Rh TYPING <i>Tube Agglutination (Forward and Reverse)</i>	"O" Positive	

*Krishna M.*



*A. Vamseedhar*

**Dr. KRISHNA MURTHY**  
MD  
BIOCHEMIST

**Lab Seal**

**Dr. VAMSEEDHAR.A**  
D.C.P, M.D  
CONSULTANT PATHOLOGIST

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GLYCATED HAEMOGLOBIN (HbA1C)  
*HPLC*

5.2 %

**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)  
*Calculation*

102.54 mg/dL

**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.

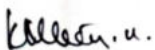
After a sudden alteration in blood glucose concentration, the rate of change of HbA1c is rapid during initial 2 months, followed by more gradual change approaching steady state 3 months later.

### CLINICAL BIOCHEMISTRY

POST PRANDIAL BLOOD SUGAR  
*Hexokinase*

110 mg/dl

80 - 150 mg/dl



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<b>LIVER FUNCTION TEST (LFT)</b>			
<i>Spectrometry</i>			
TOTAL BILIRUBIN <i>Colorimetric Diazo Method</i>	0.40 mg/dL	0.2 - 1.2 mg/dL	
DIRECT BILIRUBIN <i>Colorimetric Diazo Method</i>	0.17 mg/dL	0 - 0.4 mg/dL	
INDIRECT BILIRUBIN <i>Calculation</i>	0.23 mg/dl	0.2 - 0.8 mg/dl	
S G O T (AST) <i>IFCC Without Pyridoxal Phosphates</i>	16 U/L	up to 31 U/L	
S G P T (ALT) <i>IFCC Without Pyridoxal Phosphates</i>	12.6 U/L	up to 46 U/L	
ALKALINE PHOSPHATASE <i>p-Nitrophenyl Phosphate</i>	94 U/L	36 - 113 U/L	
SERUM GAMMA GLUTAMYLTRANSFERASE (GGT) <i>GCNA-IFCC</i>	14.4 U/L	5 - 55 U/L	
TOTAL PROTEIN <i>Biuret Colorimetric</i>	6.39 g/dl	6.2 - 8 g/dl	
S.ALBUMIN <i>Bromocresol Green (BCG)</i>	3.98 g/dl	3.5 - 5.2 g/dl	
S.GLOBULIN <i>Calculation</i>	2.4 g/dl	2.5 - 3.8 g/dl	
A/G RATIO <i>Calculation</i>	1.7	1 - 1.5	

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<b>LIPID PROFILE TEST</b> <i>Spectrometry</i>			
<b>TOTAL CHOLESTEROL</b> <i>Cholesterol Oxidase-Peroxidase (CHOD-POD)</i>	121 mg/dL	up to 200 mg/dL Border Line: 200 – 240 mg/dL High: > 240 mg/dL	
<b>TRIGLYCERIDES</b> <i>Glycerol Peroxidase-Peroxidase (GPO-POD)</i>	83.1 mg/dL	up to 150 mg/dL Desirable: <150 mg/dL Border Line: 150 – 200 mg/dL High: >200 – 500 mg/dL Very High: > 500 mg/dL	
<b>HDL CHOLESTEROL - DIRECT</b> <i>PEG-Cholesterol Esterase</i>	52.2 mg/dl	40 - 60 mg/dl >= 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)	
<b>LDL CHOLESTEROL - DIRECT</b> <i>Cholesterol Esterase-Cholesterol Oxidase</i>	52.2 mg/dL	up to 100 mg/dL 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	
<b>VLDL CHOLESTEROL</b> <i>Calculation</i>	16.6 mg/dL	2 - 30 mg/dL	
<b>TOTAL CHOLESTROL/HDL RATIO</b> <i>Calculation</i>	2.3	up to 3 3.0-4.4 - Moderate >4.4 - High	
<b>LDL/HDL RATIO</b> <i>Calculation</i>	1.0	up to 2.5 2.5-3.3 - Moderate >3.3 - High	

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<b>BLOOD UREA</b> <i>UREASE-GLUTAMATE DEHYDROGENASE (GLDH)</i>	15.3 mg/dL	15 - 50 mg/dL	
<b>CREATININE</b> <i>Jaffe Kinetic</i>	0.71 mg/dL	0.4 - 1.4 mg/dL	
<b>URIC ACID</b> <i>Uricase-Peroxidase</i>	4.7 mg/dL	2.5 - 6 mg/dL	
<b>SERUM ELECTROLYTES</b>			
<b>SODIUM</b> <i>Ion Selective Electrode (ISE)</i>	140 mmol/L	136 - 145 mmol/L	
<b>POTASSIUM</b> <i>Ion Selective Electrode (ISE)</i>	4.30 mmol/L	3.5 - 5.2 mmol/L	
<b>CHLORIDE</b> <i>Ion Selective Electrode (ISE)</i>	106 mmol/L	97 - 111 mmol/L	
<b>FASTING BLOOD SUGAR</b> <i>Hexokinase</i>	93 mg/dl	70 - 110 mg/dl	

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### CLINICAL PATHOLOGY

#### URINE ROUTINE & MICROSCOPIC

*Strips & Microscopy*

#### PHYSICAL EXAMINATION

Colour <i>Visual Method</i>	Pale Yellow	Pale yellow- yellow
Appearance <i>Visual Method</i>	Slightly Turbid	Clear/Transparent
Specific Gravity <i>Strips Method</i>	1.020	1.005-1.035
pH	6.0	4.6-8.5

#### CHEMICAL EXAMINATION (DIPSTICK)

Protein <i>Strips Method</i>	Nil	Nil -Trace
Glucose <i>Strips Method</i>	Nil	Nil
Blood <i>Strips Method</i>	Negative	Negative
Ketone Bodies <i>Strips Method</i>	Absent	Negative
Urobilinogen <i>Strips Method</i>	Normal	Normal
Bile Salt <i>Strips Method</i>	Negative	Negative
Bilirubin <i>Strips Method</i>	Negative	Negative
Bile Pigments	Negative	NIL

#### MICROSCOPY

Pus Cells (WBC) <i>Light Microscopic</i>	6 - 8 /hpf	0-5/hpf
Epithelial Cells <i>Light Microscopic</i>	12-14 /hpf	0-4/hpf
RBC <i>Light Microscopic</i>	Not Seen /hpf	0-2/hpf
Cast <i>Light Microscopic</i>	NIL	NIL
Crystal <i>Light Microscopic</i>	NIL	Nil

FASTING URINE SUGAR (FUS)	NIL	NIL
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POSTPRANDIAL URINE SUGAR	NIL	NIL	

### IMMUNOASSAY

#### THYROID PROFILE

TOTAL TRIIODOTHYRONINE (T3) <small>CMIA</small>	1.28 ng/mL	0.87 - 1.78 ng/mL
TOTAL THYROXINE (T4) <small>CMIA</small>	9.41 µg/dL	6.09 - 12.23 µg/dL
THYROID STIMULATING HORMONE (TSH) <small>CMIA</small>	2.530 µIU/mL	0.38 - 5.33 µIU/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: KIRAN

\*\*\*\* End of Report \*\*\*\*

Printed by: Kiran kumar H P on 25-03-2023 at 02:13 PM



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BILL NO : 203658  
DATE OF REPORT : 25-03-2023 at 09:10 PM

MEDIWHEEL HEALTH CHECKUP FEMALE

RADIOLOGY

### **SONO MAMMOGRAPHY OF BILATERAL BREASTS**

#### **OBSERVATION:**

#### **RIGHT BREAST:**

No evidence of any cystic changes in the breast parenchyma.

Breast shows normal fibro glandular pattern.

Retroareolar ducts appear normal.

No evidence of significant ductal dilation.

Adjacent skin & retro mammary areas are normal.

Subareolar region is normal.

No obvious solid focal lesion seen.

Nipple is normal.

Retro mammary space and subcutaneous planes are normal.

**Few subcentimetric axillary lymph nodes noted with maintained fatty hila, largest measuring 9.0 x 3.8 mm.**

#### **LEFT BREAST:**

No evidence of any cystic changes in the breast parenchyma.

Breast shows normal fibro glandular pattern.

Retroareolar ducts appear normal.



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No evidence of significant ductal dilation.

Adjacent skin & retro mammary areas are normal.

Subareolaer region is normal.

No obvious solid focal lesion seen.

Nipple is normal.

Retro mammary space and subcutaneous planes are normal.

**Few subcentimetric axillary lymph nodes noted with maintained fatty hila, largest measuring 11 x 4.8mm.**

### **IMPRESSION:**

**• No significant abnormality in bilateral sonomammography.**

**• Bilateral breast - BIRADS I.**

#### **NOTE: BI – RADS SCORING KEY**

- O – Needs additional evaluation;
- I – Negative
- II – Benign findings
- III – Probably benign
- IV – Suspicious abnormality – Biopsy to be considered
- V – Highly suggestive of malignancy,
- VI – Known biopsy proven malignancy

*Note: All abnormalities cannot be detected by Ultrasound scan due to technical limitation, obesity and other factors. Scan findings to be correlated with old reports or other investigations.*

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MEDIWHEEL HEALTH CHECKUP FEMALE

RADIOLOGY

### USG REPORT - ABDOMEN AND PELVIS

#### OBSERVATION:

#### LIVER:

**Liver is enlarged in size (17.0 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:

**Tiny hyperechoic focus measuring ~ 3.7 mm seen in the nondependent wall without posterior acoustic shadowing. No evidence of displacement on movement. No evidence of pericholecystic free fluid/ wall thickening**

#### 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 (9.3 cm) with normal echotexture. No focal lesion is seen.

#### RIGHT KIDNEY:

Right kidney measures ~ 8.8 x 1.1 cm (Length x parenchymal thickness) with normal echo pattern and cortical thickness.

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

Cortico-medullary differentiation is maintained.

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

#### LEFT KIDNEY:

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Left kidney measures ~ 10.2 x 1.4 cm (Length x parenchymal thickness) with normal echo pattern and cortical thickness.

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

Cortico-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 ~ 8.3 x 4.0 x 6.2cm with normal echotexture.

No focal lesion seen within the myometrium.

Endometrial thickness measures ~ 8.1 mm.

### **OVARIES:**

Both ovaries are normal in size with normal echo pattern.

Right ovary measures ~ 2.8 x 1.8 cm.

Left ovary measures ~ 3.4 x 2.5 cm. Shows a dominant follicle measuring ~ 1.5 x 1.8 cm

No adnexal mass lesion seen.

No evidence of free fluid in the abdomen or pelvis.

### **IMPRESSION:**

- **Tiny gall bladder polyps.**
- **Hepatomegaly.**

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factors. Scan findings to be correlated with old reports or other investigations.

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MEDIWHEEL HEALTH CHECKUP FEMALE

RADIOLOGY

### X-RAY REPORT- 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.

Trachea is midline.

Visible bony thoracic cage is normal.

Adjacent soft tissues appear normal.

#### IMPRESSION:

- **No significant abnormality in the visualized lung fields.**



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- VI – Known biopsy proven malignancy

*Note: All abnormalities cannot be detected by Ultrasound scan due to technical limitation, obesity and other factors. Scan findings to be correlated with old reports or other investigations.*

NAME : **Mrs. NALINI R**  
AGE/SEX : 31 Yrs / Female  
REFERRED BY :  
REF CENTER : MEDIWHEEL

MR/VISIT NO : 23030655 / 171747  
BILLED TIME : 25-03-2023 at 08:30 AM  
BILL NO : 203658  
DATE OF REPORT : 25-03-2023 at 09:10 PM

Dispatched by: Bindu

\*\*\*\* End of Report \*\*\*\*

Printed by: Bindu on 25-03-2023 at 09:10 PM

