

Name	Mr. K AJITH VIKRAM	ID	MED122474448
Age & Gender	36Y/M	Visit Date	Feb 24 2024 9:18AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: No significant abnormality detected.

DR. TRISHUL SHETTY CONSULTANT RADIOLOGIST

Name:Mr. K AJITH VIKRAMPID No.:MED122474448SID No.:522403087Age / Sex:36 Year(s) / MaleType:OPRef. Dr:MediWheel	Collection On : 24/ Report On : 24/	02/2024 9:18 AM 02/2024 10:10 AM /02/2024 6:25 PM 02/2024 5:01 PM	MEDALL
Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
BLOOD GROUPING AND Rh TYPING (EDTA Blood/Agglutination) INTERPRETATION: Note: Slide method is Complete Blood Count With - ESR	'O' 'Positive'	confirm with Tube metho	
Haemoglobin (EDTA Blood/Spectrophotometry)	13.7	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	t 41.0	%	42 - 52
RBC Count (EDTA Blood)	4.68	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood)	87.6	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	29.3	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	33.4	g/dL	32 - 36
RDW-CV	13.9	%	11.5 - 16.0
RDW-SD	42.9	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	5600	cells/cu.mm	4000 - 11000
Neutrophils (Blood)	54.6	%	40 - 75
Lymphocytes (Blood)	33.9	%	20 - 45
Eosinophils (Blood)	1.5	%	01 - 06
Monocytes (Blood)	9.3	%	01 - 10



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Name	: Mr. K AJITH VIKRAM			
PID No.	: MED122474448	Register On : 2	4/02/2024 9:18 AM	M
SID No.	: 522403087	Collection On : 2	24/02/2024 10:10 AM	
Age / Sex	: 36 Year(s) / Male	Report On : 2	24/02/2024 6:25 PM	MEDALL
Туре	: OP	Printed On : 2	27/02/2024 5:01 PM	
Ref. Dr	: MediWheel	-		
Investiga	ation	Observed Value	Unit	Biological Reference Interval
Basophil (Blood)	ls	0.7	%	00 - 02
INTERPI	RETATION: Tests done on Automa	ated Five Part cell count	er. All abnormal results a	re reviewed and confirmed microscopically.
Absolute (EDTA Bl	e Neutrophil count ood)	3.0	10^3 / µl	1.5 - 6.6
Absolute (EDTA Bl	e Lymphocyte Count ood)	1.9	10^3 / µl	1.5 - 3.5
Absolute (EDTA Bl	e Eosinophil Count (AEC)	0.1	10^3 / µl	0.04 - 0.44
Absolute (EDTA Bl	e Monocyte Count ^{ood)}	0.5	10^3 / µl	< 1.0
Absolute (EDTA Bl	e Basophil count	0.0	10^3 / µl	< 0.2
Platelet ((EDTA Bl		228	10^3 / µl	150 - 450
MPV (Blood)		8.9	fL	7.9 - 13.7
PCT (Automated	d Blood cell Counter)	0.203	%	0.18 - 0.28
	ythrocyte Sedimentation Rate)	6	mm/hr	< 15
	Fasting (FBS) F/GOD-PAP)	77.49	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	89.48	mg/dL	70 - 140







The results pertain to sample tested.

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PN No.: MED122474448Register On: 24/02/2024 9:18 AMSD No.: 522403087Collection On: 24/02/2024 10:10 AMAge / Sex: 36 Year(s)/MaleReport On: 24/02/2024 6:25 PMPype: OPPrinted On: 27/02/2024 5:01 PMRet. Dr: MediWheelInvestigationObserved.UnitEiological. Reference IntervalNERPRETATION:Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological stress, and drugs can influence blood glucose level. Fasting blood glucose (INUN)7.4mg/dL7.0 - 21(Greatmine with a time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose (INUN)7.4mg/dL7.0 - 21(Great/Drane (INUT)0.76mg/dI.0.9 - 1.3(Great/Drane WV/derived)0.9 - 1.3(Great/Drane MARC)(Great/Drane, Colstin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetyleyteine , chemotherapeutic agent such as flucytosine etc.(Great/Drane, MACS)0.20mg/dI.0.1 - 1.2(Great/MARC)0.37mg/dI.0.1 - 1.1(Great/MARC)0.37mg/dI.0.1 - 1.0(Secur/MARC)0.37mg/dI.0.1 - 1.0(Secur/MARC) <t< th=""><th>Name</th><th>: Mr. K AJITH VIKRAM</th><th></th><th></th><th></th></t<>	Name	: Mr. K AJITH VIKRAM			
Age / Ser. 36 Year(s) / Male Report On : 24/02/2024 6:25 PM Type : OP Printed On : 27/02/2024 5:01 PM Ref. Dr : McCALL Reforence influence Investigation Observed Yalue Unit Biological Reference influence blood glucose level. NTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological stress, and program dluming transmert for Diabetes. Biodo Urea Nitrogen (BUN) 7.4 mg/dL 7.0 - 21 Creatinine 0.76 mg/dL 0.9 - 1.3 (Serum/Mutraise UV / derived) 0.9 - 1.3 Creatinine 0.35 mg/dL 3.5 - 7.2 Uric Acid 5.39 mg/dL 0.1 - 1.2 (Serum/Menzine) 0.57 mg/dL 0.1 - 1.2 Billrubin(Total) 0.57 mg/dL 0.1 - 1.0 (Serum/Davide Mithare Acid) 0.37 mg/dL 0.1 - 1.0 Billrubin(Indirect) 0.37 mg/dL 0.1 - 1.0 0.1 - 1.0 (Serum/Davide Mith Arcol)	PID No.	: MED122474448	Register On : 2	4/02/2024 9:18 AM	C
Age real Corr (Corr (Cor (Co	SID No.	: 522403087	Collection On : 2	24/02/2024 10:10 AM	
Ref. Dr : MediWheel Investigation Observed Value Unit Biological Reference Interval FRED. Tr : MediWheel Provide the stype, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin sceretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes. Blood Urea Nitrogen (BUN) 7.4 mg/dL 7.0 - 21 (Serum/Modified Jagfie) 0.76 mg/dL 0.9 - 1.3 INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as ecfoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetyleyteine , chemotherapeutic agent such as flucytosin etc. 3.5 - 7.2 Uric Acid 5.39 mg/dL 0.1 - 1.2 (Serum/Dezymatic) 0.20 mg/dL 0.0 - 0.3 Bilirubin(Total) 0.57 mg/dL 0.0 - 0.3 (Serum/Davited Muffied IACid) 0.37 mg/dL 0.1 - 1.0 (Serum/Davited Staffunite Acid) Bilirubin(Indirect) 0.37	Age / Sex	: 36 Year(s) / Male	Report On : ;	24/02/2024 6:25 PM	MEDALL
Investigation Observed Value Unit Biological Reference Interval NTERPRETATION: Fasting blood glucose level, and the higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyl Phenomenon, Anti-diabetic medication during treatment for Diabetes. Blood Urea Nitrogen (BUN) 7.4 mg/dL 7.0 - 21 (Semul/Vease UV / derived) Creatinine 0.76 mg/dL 0.9 - 1.3 (Semul/Vease UV / derived) Creatinine 0.76 mg/dL 0.9 - 1.3 (Semul/Vease UV / derived) Creatinine 0.76 mg/dL 0.9 - 1.3 (Semul/Vease UV / derived) Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxilin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetyleyteine , chemotherapeutic agent such as flucytosine etc. 3.5 - 7.2 (Grean/Daymatic) 0.37 mg/dL 0.1 - 1.2 (Serum/Daymatic) 0.37 mg/dL 0.1 - 1.0 (Serum/Daymatic) 0.37 mg/dL 0.1 - 1.0 (Serum/Daymatic) 1.32 </th <th>Туре</th> <th>: OP</th> <th>Printed On : 2</th> <th>27/02/2024 5:01 PM</th> <th></th>	Туре	: OP	Printed On : 2	27/02/2024 5:01 PM	
ValueReference IntervalNTERPRETATION: Factors such as type, quanity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as type, quanity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as type, quanity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as type, quanity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as the control of the physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as the control of the physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as the control of the physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as the control of the physical activity, Psychological stress, and drugs can influence blood glucose level, Factors such as flucytosical supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as celoxitin , cefazolin, ACE inhibitors, angiotensin II receptor attrasse and the such as flucytosical such as flucytosical such as flucytosical such as flucytosical such as f	Ref. Dr	: MediWheel			
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(Serum/Urease UV / derived)0.76mg/dL0.9 - 1.3(Serum/Modified Jaffe)NTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists, N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.0.9 - 1.3Uric Acid5.39mg/dL3.5 - 7.2(Serum/Enzymatic)1.123.5 - 7.2Liver Function Test1.120.1 - 1.2Bilirubin(Total)0.57mg/dL0.1 - 1.2(Serum/DCA with ATCS)0.20mg/dL0.0 - 0.3Bilirubin(Indirect)0.37mg/dL0.1 - 1.0(Serum/Dazorized Sulfamilic Acid)0.37mg/dL0.1 - 1.0Bilirubin(Indirect)0.37mg/dL0.1 - 1.0(Serum/Modified IFCC)SGOT/AST (Aspartate15.23U/L5 - 40Aminotransferase)11.32U/L5 - 41(Serum/Modified IFCC)1.32U/L5 - 41Gertun/Modified IFCC)60.55U/L5.5Gertun/Modified IFCC)1.32U/L5.3 - 128Gertun/Modified IFCC)7.27gm/dl6.0 - 8.0	Factors suc Fasting blo	ch as type, quantity and time of food od glucose level may be higher that	n Postprandial glucose,	because of physiological	surge in Postprandial Insulin secretion, Insulin
(Serum/Modified Jaffe) INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin , cefazolin, ACE inhibitors , angiotensin II receptor antagonists, N-acetylcyteine , chemotherapeutic agent such as flucytosine etc. Uric Acid 5.39 mg/dL 3.5 - 7.2 (Serum/Enzymatic) Liver Function Test NTERPRETATION: Elevated Creating, renal dysfunction and drugs agent agent such as flucytosine etc. Bilirubin(Total) 0.57 mg/dL 0.1 - 1.2 (Serum/DCA with ATCS) 0.20 mg/dL 0.0 - 0.3 Bilirubin(Direct) 0.37 mg/dL 0.1 - 1.0 (Serum/Dazotized Sulfanilic Acid) Bilirubin(Indirect) 0.37 mg/dL 0.1 - 1.0 SGOT/AST (Aspartate 15.23 U/L 5 - 40 Aminotransferase) (Serum/Modified IFCC) SGPT/ALT (Alanine Aminotransferase) 11.32 U/L 5 - 41 (Serum/Modified IFCC) GGT(Gamma Glutamyl Transpeptidase) 16.55 U/L 55 (Serum/Modified IFCC) Alkaline Phosphatase (SAP) 49.1 U/L 53 - 128 (Serum/Modified IFCC)			7.4	mg/dL	7.0 - 21
INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetyleyteine , chemotherapeutic agent such as flucytosine etc.Uric Acid5.39mg/dL3.5 - 7.2(Serum/Enzymatic)Liver Function TestBilirubin(Total)0.57mg/dL0.1 - 1.2(Serum/DCA with ATCS)0.20mg/dL0.0 - 0.3Bilirubin(Indirect)0.37mg/dL0.1 - 1.0(Serum/Drazotized Sulfanilic Acid)0.37mg/dL0.1 - 1.0Bilirubin(Indirect)0.37mg/dL0.1 - 1.0(Serum/Modified IFCC)0.37mg/dL0.1 - 1.0SGOT/AST (Aspartate15.23U/L5 - 40Aminotransferase) (Serum/Modified IFCC)11.32U/L5 - 41GST(Gamma Glutamyl Transpeptidase)16.55U/L<55			0.76	mg/dL	0.9 - 1.3
Security Security EncrymaticsLiver Function TestBilirubin(Total)0.57mg/dL0.1 - 1.2(Serum/DCA with ATCS)0.20mg/dL0.0 - 0.3Bilirubin(Direct)0.20mg/dL0.1 - 1.0(Serum/Diazotized Sulfanilic Acid)0.37mg/dL0.1 - 1.0Bilirubin(Indirect)0.37mg/dL0.1 - 1.0(Serum/Derived)0.37mg/dL5 - 40SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)11.32U/L5 - 41SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)16.55U/L<55	INTERPE ingestion of such as cel	RETATION: Elevated Creatinine va of cooked meat, consuming Protein/	Creatine supplements,	Diabetic Ketoacidosis, pro	olonged fasting, renal dysfunction and drugs
Bilirubin(Total) (Serum/DCA with ATCS)0.57mg/dL0.1 - 1.2Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)0.20mg/dL0.0 - 0.3Bilirubin(Indirect) (Serum/Derived)0.37mg/dL0.1 - 1.0SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)15.23U/L5 - 40SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)11.32U/L5 - 41GGT(Gamma Glutamyl Transpeptidase) 			5.39	mg/dL	3.5 - 7.2
(Serum/DCA with ATCS)Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)0.20 mg/dLmg/dL0.0 - 0.3Bilirubin(Indirect) (Serum/Derived)0.37 mg/dLmg/dL0.1 - 1.0SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)15.23 V/LU/L5 - 40SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)11.32 V/L5 - 41GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)16.55 V/LV/L<55	<u>Liver Fu</u>	nction Test			
C(Serum/Diazotized Sulfanilic Acid)Bilirubin(Indirect)0.37mg/dL0.1 - 1.0(Serum/Derived)SGOT/AST (Aspartate15.23U/L5 - 40SGOT/AST (Aspartate)15.23U/L5 - 40Aminotransferase) (Serum/Modified IFCC)11.32U/L5 - 41SGPT/ALT (Alanine Aminotransferase)11.32U/L5 - 41(Serum/Modified IFCC)6GT(Gamma Glutamyl Transpeptidase)16.55U/L< 55			0.57	mg/dL	0.1 - 1.2
(Serum/Derived)SGOT/AST (Aspartate15.23U/L5 - 40Aminotransferase) (Serum/Modified IFCC)11.32U/L5 - 41SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)11.32U/L5 - 41GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)16.55U/L< 55			0.20	mg/dL	0.0 - 0.3
Aminotransferase) (Serum/Modified IFCC)11.32U/L5 - 41SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)11.32U/L5 - 41GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)16.55U/L< 55			0.37	mg/dL	0.1 - 1.0
(Serum/Modified IFCC)16.55U/L< 55GGT(Gamma Glutamyl Transpeptidase)16.55U/L< 55	Aminotra	insferase)	15.23	U/L	5 - 40
(Serum/IFCC / Kinetic)49.1U/L53 - 128Alkaline Phosphatase (SAP) (Serum/Modified IFCC)7.27gm/dl6.0 - 8.0			11.32	U/L	5 - 41
(Serum/Modified IFCC)Total Protein7.27gm/dl6.0 - 8.0) 16.55	U/L	< 55
e		-	49.1	U/L	53 - 128
			7.27	gm/dl	6.0 - 8.0







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Name	: Mr. K AJITH VIKRAM		
PID No.	: MED122474448	Register On : 24/02/2024 9:18 AM	\mathbf{C}
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Age / Sex	: 36 Year(s) / Male	Report On : 24/02/2024 6:25 PM	MEDALL
Туре	: OP	Printed On : 27/02/2024 5:01 PM	
Ref. Dr	: MediWheel		

Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	Biological Reference Interval
Albumin (Serum/Bromocresol green)	4.70	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.57	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.83		1.1 - 2.2
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	140.35	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	57.91	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the `usual_ circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	36.88	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	91.9	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >=190
VLDL Cholesterol (Serum/Calculated)	11.6	mg/dL	< 30
	A REAL PROPERTY OF THE PROPERT		Dr.Arjun C.P

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MC-5606

The results pertain to sample tested.

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Reg No:KMC \$9655

APPROVED BY

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Ref. Dr	: MediWheel			
Investiga	ation	<u>Observed</u> <u>Value</u>	Unit	<u>Biological</u> Reference Interval
Non HD (Serum/Ca	L Cholesterol	103.5	mg/dL	Optimal: < 130 Above Optimal: 130 - 159

Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol. 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3.8		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/ <i>Calculated</i>)	1.6		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	2.5		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/ <i>HPLC</i>)	5.1	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 %, Fair control : 7.1 - 8.0 %, Poor control >= 8.1 %Estimated Average Glucose 99.67 mg/dL

Estimated Average Glucose	99.07	mg/a
(Whole Blood)		







The results pertain to sample tested.

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Ref. Dr	: MediWheel					
<u>Investiga</u>		<u>Observed</u> <u>Value</u>	Unit	Biological Reference Interval		
HbA1c pro control as Conditions hypertrigly Conditions ingestion, 1	compared to blood and urinary gluc s that prolong RBC life span like Iro vceridemia,hyperbilirubinemia,Drug s that shorten RBC survival like acu Pregnancy, End stage Renal disease	ose determinations. n deficiency anemia, s, Alcohol, Lead Poi te or chronic blood lo	Vitamin B12 & Folate def soning, Asplenia can give oss, hemolytic anemia, Her			
<u>THYROI</u>	<u>'D PROFILE / TFT</u>					
T3 (Triio (Serum/EC	dothyronine) - Total LIA)	1.34	ng/ml	0.7 - 2.04		
Comment	ariation can be seen in other condition	on like pregnancy, dr	rugs, nephrosis etc. In such	cases, Free T3 is recommended as it is		
T4 (Tyro (Serum/EC	xine) - Total <i>LIA</i>)	9.27	µg/dl	4.2 - 12.0		
Comment	ariation can be seen in other condition	on like pregnancy, dr	ugs, nephrosis etc. In such	cases, Free T4 is recommended as it is		
TSH (Th) (Serum/EC	yroid Stimulating Hormone) LIA)	1.39	µIU/mL	0.35 - 5.50		
 INTERPRETATION: Reference range for cord blood - upto 20 1 st trimester: 0.1-2.5 2 nd trimester 0.2-3.0 3 rd trimester : 0.3-3.0 (Indian Thyroid Society Guidelines) Comment: 1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI. 2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations. 3.Values&amplt0.03 μIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals. 						
<u>PHYSIC</u> COMPL	<u>AL EXAMINATION (URINE ETE)</u>	, 				





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Туре	: OP	Printed On : 27/02/2024 5:01 PM

MEDALL

Investigation	<u>Observed</u> <u>Unit</u> <u>Value</u>	<u>Biological</u> Reference Interval
Colour (Urine)	Amber	Yellow to Amber
Appearance (Urine)	Clear	Clear
Volume(CLU) (Urine)	30	
<u>CHEMICAL EXAMINATION (URINE</u> <u>COMPLETE)</u>		
pH (Urine)	5.5	4.5 - 8.0
Specific Gravity (Urine)	1.026	1.002 - 1.035
Ketone (Urine)	Negative	Negative
Urobilinogen (Urine)	Normal	Normal
Blood (Urine)	Negative	Negative
Nitrite (Urine)	Negative	Negative
Bilirubin (Urine)	Negative	Negative
Protein (Urine)	Negative	Negative
Glucose (Urine/GOD - POD)	Negative	Negative
Leukocytes(CP) (Urine)	Negative	
MICROSCOPIC EXAMINATION		

(URINE COMPLETE)

Ref. Dr

: MediWheel







The results pertain to sample tested.

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Lab Address: BANGALORE REFERENCE LABORATORY-CLUMAX DIAGNOSTIC AND RESEARCH CENTRE PVT LTD. (A UNIT OF MEDALL HEALTHCARE PVT. LTD.).Old No66 & New No 1. 2nd Main Road. Bashvam Circle

Name PID No. SID No. Age / Sex Type Ref. Dr	 Mr. K AJITH VIKRAM MED122474448 522403087 36 Year(s) / Male OP MediWheel 	Collection On : Report On :	24/02/2024 9:18 AM 24/02/2024 10:10 AM 24/02/2024 6:25 PM 27/02/2024 5:01 PM	MEDALL
Investiga	ation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	<u>Biological</u> Reference Interval
Pus Cella (Urine)	s	0-1	/hpf	NIL
Epithelia (Urine)	al Cells	0-1	/hpf	NIL
RBCs				

Others (Urine)

(Urine)

INTERPRETATION: Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

Casts	NIL	/hpf	NIL
(Urine)			
Crystals	NIL	/hpf	NIL
(Urine)			

NIL







The results pertain to sample tested.

Name	: Mr. K AJITH VIKRAM			
PID No.	: MED122474448	Register On	: 24/02/2024 9:18 AM	m
SID No.	: 522403087	Collection On	: 24/02/2024 10:10 AM	
Age / Sex	: 36 Year(s) / Male	Report On	: 24/02/2024 6:25 PM	MEDALL
Туре	: OP	Printed On	: 27/02/2024 5:01 PM	
Ref. Dr	: MediWheel			
<u>Investig</u>	<u>lation</u>	<u>Observe</u> <u>Value</u>		<u>Biological</u> <u>Reference Interval</u>
BUN/O	Creatinine Ratio	9.7		6.0 - 22.0





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Name	: Mr. K AJITH VIKRAM			
PID No.	: MED122474448	Register On	: 24/02/2024 9:18 AM	m
SID No.	: 522403087	Collection On	: 24/02/2024 10:10 AM	
Age / Sex	: 36 Year(s) / Male	Report On	: 24/02/2024 6:25 PM	MEDALL
Туре	: OP	Printed On	: 27/02/2024 5:01 PM	
Ref. Dr	: MediWheel			
Investiga	ation	Observe	<u>d Unit</u>	Biological

URINE ROUTINE

Value

Reference Interval





-- End of Report --

The results pertain to sample tested.