



CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi
Ph: 9235447795, 0542-2223232
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SHUBHAM KUMAR-PKG1000238	Registered On	: 26/Jun/2021 10:11:13
Age/Gender	: 26 Y 0 M 0 D /M	Collected	: 26/Jun/2021 11:17:59
UHID/MR NO	: CVAR.0000019832	Received	: 26/Jun/2021 11:24:39
Visit ID	: CVAR0038092122	Reported	: 26/Jun/2021 14:40:23
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
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HAEMOGRAM * , Blood

Haemoglobin	13.90	g/dl	13.5-17.5	PHOTOMETRIC
Blood Group (ABO & Rh typing)	AB POSITIVE			
TLC (WBC)	7,500	/Cu mm	4000-10000	MICROSCOPIC EXAMINATION

DLC

Polymorphs (Neutrophils)	62.00	%	55-70	MICROSCOPIC EXAMINATION
Lymphocytes	29.00	%	25-40	MICROSCOPIC EXAMINATION
Monocytes	6.00	%	3-5	MICROSCOPIC EXAMINATION
Eosinophils	3.00	%	1-6	MICROSCOPIC EXAMINATION
Basophils	0.00	%	< 1	MICROSCOPIC EXAMINATION

ESR

Observed	10.00	Mm for 1st hr.		
Corrected	6.00	Mm for 1st hr.	< 9	
PCV (HCT)	36.90	cc %	40-54	

GBP

General Blood Picture (G.B.P. / P.B.S.)

1. RBCs are Normocytic and normochromic.
2. Leucocytes are adequate in numbers and reveal normal distribution.
3. Platelets are within normal limits.
4. Smears are Negative for Malarial and Microfilarial Parasite.
5. There are no blasts (precursor cells).

Platelet count

Platelet Count	1.72	LACS/cu mm	1.5-4.0	MICROSCOPIC EXAMINATION
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RBC Count

RBC Count	3.66	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
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Blood Indices (MCV, MCH, MCHC)

M.C.V.	100.80	fl	80-100	CALCULATED PARAMETER
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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
M.C.H.	38.10	pg	28-35	CALCULATED PARAMETER
M.C.H.C.	37.80	%	30-38	CALCULATED PARAMETER



S.N. Sinha
Dr.S.N. Sinha (MD Path)





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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Glucose Fasting Sample: Plasma	94.80	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

Glucose PP Sample: Plasma After Meal	115.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) * , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.00	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	31.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	97	mg/dl	

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.





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Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

**Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

Clinical Implications:

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy
c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) *	15.00	mg/dL	7.0-23.0	CALCULATED
Sample:Serum				





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Creatinine <i>Sample:Serum</i>	0.80	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) <i>Sample:Serum</i>	92.00	ml/min/1.73m ²	90-120 Normal - 60-89 Near Normal	CALCULATED
Protein <i>Sample:Serum</i>	7.00	gm/dl	6.2-8.0	BIRUET
Uric Acid <i>Sample:Serum</i>	6.20	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	28.80	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	30.00	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	16.80	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.00	gm/dl	6.2-8.0	BIRUET
Albumin	4.40	gm/dl	3.8-5.4	B.C.G.
Globulin	2.60	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.69		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	63.40	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.90	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.30	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.60	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	161.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	31.70	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	105	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	24.24	mg/dl	10-33	CALCULATED
Triglycerides	121.20	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP

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DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.5)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT			DIPSTICK
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	2-3/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	ABSENT	gms%
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Interpretation:

- (+) < 0.5
- (++) 0.5-1.0
- (+++) 1-2
- (++++) > 2





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DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
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SUGAR, PP STAGE * , Urine

Sugar, PP Stage ABSENT

Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



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Visit ID	: CVAR0038092122	Reported	: 26/Jun/2021 17:29:23
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DEPARTMENT OF IMMUNOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
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THYROID PROFILE - TOTAL * , Serum

T3, Total (tri-iodothyronine)	102.00	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.40	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.76	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.4-4.2	μIU/mL	Adults 21-54 Years
0.5-4.6	μIU/mL	Second Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
0.7-27	μIU/mL	Premature 28-36 Week
0.8-5.2	μIU/mL	Third Trimester
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

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Patient Name	: Mr.SHUBHAM KUMAR-PKG10000238	Registered On	: 26/Jun/2021 10:11:13
Age/Gender	: 26 Y 0 M 0 D /M	Collected	: N/A
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DEPARTMENT OF X-RAY

X-RAY DIGITAL CHEST PA *

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

IMPRESSION : N O R M A L S K I A G R A M

Dr. Raveesh Chandra Roy (MD-Radio)





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DEPARTMENT OF ULTRASOUND

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

The liver measures 13.3 cm in mid clavicular line. It is normal in shape and echogenicity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.

Gall bladder is well distended and is normal.

Portal vein measures 9.9 mm in caliber. CBD measures 3.5 mm in caliber.

Pancreas is normal in size, shape and echogenicity.

Spleen is normal in size (8.9 cm in its long axis), shape and echogenicity.

Right kidney is normal in size, shape and echogenicity. No focal lesion or calculus seen. Right pelvicalyceal system is not dilated. Right kidney measures : 9.5 x 3.7 cm.

Left kidney is normal in size, shape and echogenicity. No focal lesion or calculus seen. Left pelvicalyceal system is not dilated. Left kidney measures : 11.0 x 4.3 cm.

Urinary bladder is normal in shape, outline and distension. Lumen is anechoic and no wall thickening seen. Prevoid urine volume 217 cc.

The prostate is normal in size (36 x 26 x 28 mm/13 gms), shape and echopattern.

No free fluid is seen in the abdomen/pelvis.

IMPRESSION : No significant abnormality seen.

Please correlate clinically

*** End Of Report ***

Result/s to Follow:

STOOL R/M, ECG / EKG, GENERAL PHYSICAL EXAM



Dr. Raveesh Chandra Roy (MD-Radio)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Conduction Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *

365 Days Open

*Facilities Available at Select Location

Page 10 of 10



Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection
1800-419-0002

Mar. 2018



Since 1991



CHANDAN DIAGNOSTIC CENTRE

Name of Company: Mediwheel-BSB

Name of Executive: Shubham Kumar

Date of Birth: 12/08/94

Sex: Male

Height: 172

Weight: 70

BMI (Body Mass Index): 23.7

Chest (Expiration / Inspiration) 90/95

Abdomen: 84

Blood Pressure: 128/86

Pulse: 78 Bpm regular

RR: 16

Ident Mark: Mark on Right Chest

Any Allergies: NP

Vertigo: NU

Any Medications: NO

Any Surgical History: Eye Surgery Squint

Habits of alcoholism/smoking/tobacco: 10 Years. Monthly

Chief Complaints if any: NO

Lab Investigation Reports: Report NA.

Eye Check up vision & Color vision: Normal, color vision. wear power glass.

Left eye: -6

Right eye: -5

Near vision: Normal





Since 1991



CHANDAN DIAGNOSTIC CENTRE

Far vision : *Normal*
 ENT consultation : *Normal*
 Dental Checkup : *Normal*
 Eye Checkup : *Normal*

Final impression:

Certified that I examined *Shubham pr.* S/o or D/o
 is presently in good health and free from any cardio-respiratory/communicable
 ailment, he/she is **Fit / Unfit to join any organization.**

Shubham pr.

Client Signature



Dr. R.C. ROY
 MBBS., MD. (Radio Diagnosis)
 Reg. No.-26918

Signature of Medical Examiner

Name & Qualification *Dr R C Roy, MBBS MD*

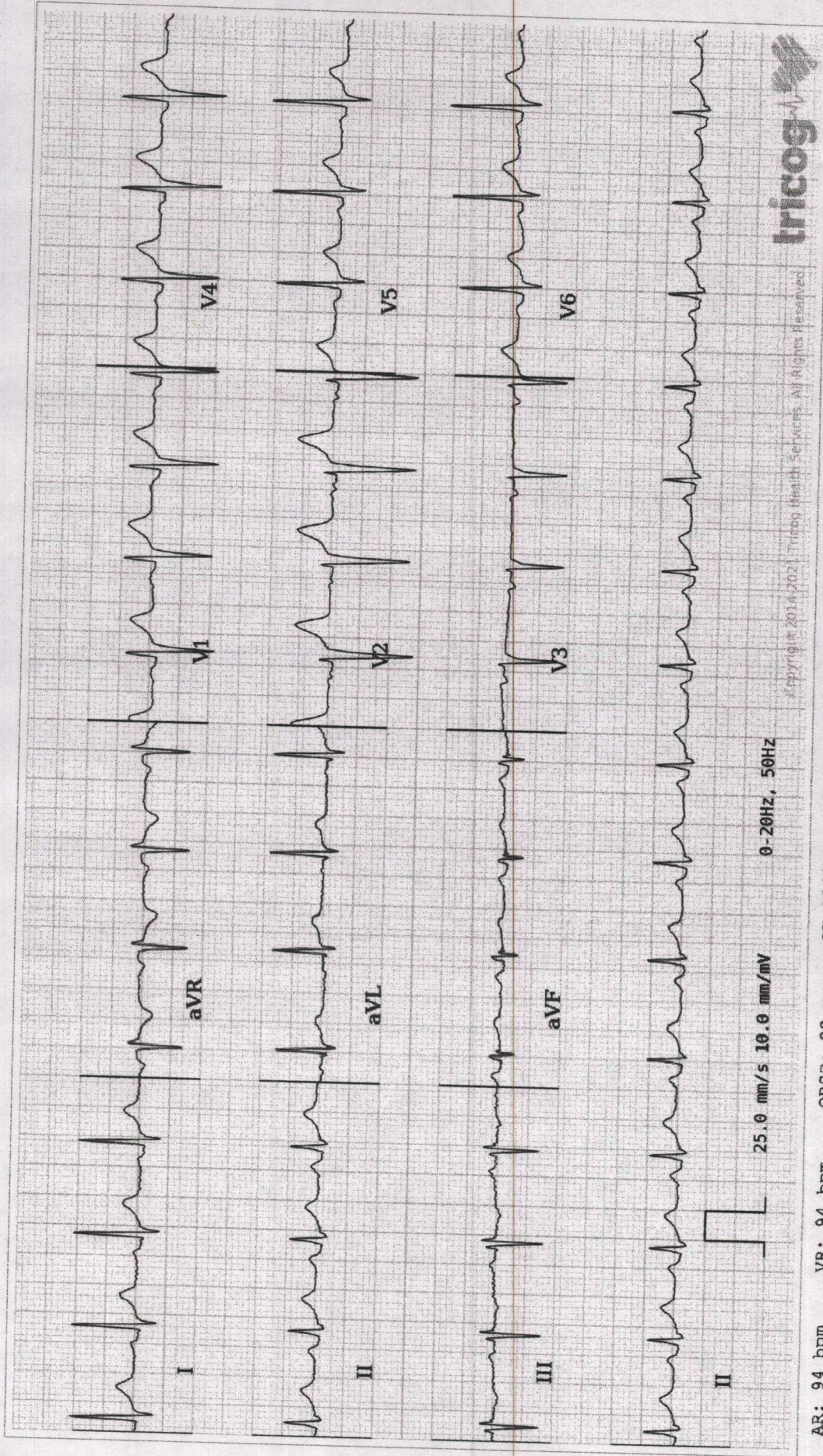
Date *26/06/21* **Place** *VARANASI*





Age / Gender: 26/Male
Patient ID: CVAR0038092122
Patient Name: Mr.SHUBHAM KUMAR-PKG10000238

Date and Time: 26th Jun 21 11:13 AM



ECG Within Normal Limits: Sinus Rhythm, Normal Axis, lead V1-V3 interchanged. Please correlate clinically.

99, Shivaji Nagar, Mahmoodganj
Varanasi-221010 (U.P.)
Phone No.: 0542-2223232

AUTHORIZED BY

Dr. Chari
MD, DM: Cardiology
63382

REPORTED BY

Dr. Kavitha A

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.



भारत सरकार



आधार

भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार

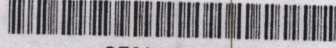
Unique Identification Authority of India

Government of India

नामांकन क्रम / Enrollment No 2029/64501/03308

To,
शुभम कुमार
Shubham Kumar
S/O: Manoj Kumar
golghar
bank road
Phulwari
Patna G.p Phulwari Patna
Bihar 800001
8507213542

Ref: 2482 / 26Y / 497193 / 498073 / P



SE364499278FT



आपका आधार क्रमांक / Your Aadhaar No. :

5978 1710 1751

आधार - आम आदमी का अधिकार



भारत सरकार

Government of India



शुभम कुमार
Shubham Kumar
पिता : मनोज कुमार
Father : Manoj Kumar
जन्म तिथि / DOB : 12/08/1994
पुरुष / Male



5978 1710 1751

आधार - आम आदमी का अधिकार

Shubham Kumar

Chandan Diagnostic Center
99, Shivaji Nagar, Mahmoorganj
Varanasi-221010 (U.P.)
Phone No.:0542-2223232

गाउन गदा
नेजर अथवा
र सम्पर्क करें।
undan Healthcare Ltd.



P- 93, Shivaji Nagar Colony, Mahmoorganj,
Varanasi, Uttar Pradesh 221010, India

Latitude

25.305425°

Longitude

82.979135°

LOCAL 13:28:45

GMT 07:58:45

SATURDAY 06.26.2021

ALTITUDE 16 METER