Ref. Dr : MediWheel Type : OP

<u>Investigation</u>	Observed Value	<u>Unit</u>	Biological Reference Interval
IMMUNOHAEMATOLOGY			
BLOOD GROUPING AND Rh TYPING (Blood /Agglutination)	'B' 'Positive'		
HAEMATOLOGY			
Complete Blood Count With - ESR			
Haemoglobin (Blood/Spectrophotometry)	14.61	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (Blood/Derived from Impedance)	44.59	%	42 - 52
RBC Count (Blood/Impedance Variation)	04.55	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (Blood/ Derived from Impedance)	98.10	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (Blood/Derived from Impedance)	32.14	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (Blood/Derived from Impedance)	32.76	g/dL	32 - 36
RDW-CV(Derived from Impedance)	11.9	%	11.5 - 16.0
RDW-SD(Derived from Impedance)	40.86	fL	39 - 46
Total Leukocyte Count (TC) (Blood/ Impedance Variation)	7940	cells/cu.mm	4000 - 11000
Neutrophils (Blood/Impedance Variation & Flow Cytometry)	51.10	%	40 - 75
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	37.00	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	06.50	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	05.00	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00.40	%	00 - 02
INTERPRETATION: Tests done on Automated microscopically.	Five Part cell counter.	All abnormal resu	ults are reviewed and confirmed
Absolute Neutrophil count (Blood/ Impedance Variation & Flow Cytometry)	4.06	10^3 / μl	1.5 - 6.6
Absolute Lymphocyte Count (Blood/ Impedance Variation & Flow Cytometry)	2.94	10^3 / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (Blood/ Impedance Variation & Flow Cytometry)	0.52	10^3 / µl	0.04 - 0.44
Absolute Monocyte Count (Blood/ Impedance Variation & Flow Cytometry)	0.40	10^3 / µl	< 1.0





Ref. Dr : MediWheel Type : OP

<u>Investigation</u>	Observed Value	<u>Unit</u>	Biological Reference Interval
Absolute Basophil count (Blood/Impedance Variation & Flow Cytometry)	0.03	10^3 / μΙ	< 0.2
Platelet Count (Blood/Impedance Variation)	285	10^3 / μl	150 - 450
MPV (Blood/Derived from Impedance)	08.06	fL	7.9 - 13.7
PCT(Automated Blood cell Counter)	0.23	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated ESR analyser)	11	mm/hr	< 15
BIOCHEMISTRY			
BUN / Creatinine Ratio	15.0		
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	77.8	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)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/	92.6	mg/dL	70 - 140

INTERPRETATION:

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 surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	14.6	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.97	mg/dL	0.9 - 1.3
Uric Acid (Serum/Enzymatic)	5.6	mg/dL	3.5 - 7.2
Liver Function Test			
Bilirubin(Total) (Serum)	1.30 (Rechecked)	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.29	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	1.01	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	27.2	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum)	21.3	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	11.8	U/L	< 55





Ref. Dr : MediWheel Type : OP

<u>Investigation</u>	Observed Value	<u>Unit</u>	Biological Reference Interval
Alkaline Phosphatase (SAP) (Serum/ Modified IFCC)	75.7	U/L	53 - 128
Total Protein (Serum/Biuret)	7.30	gm/dL	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.20	gm/dL	3.5 - 5.2
Globulin (Serum/Derived)	3.10	gm/dL	2.3 - 3.6
A: GRATIO (Serum/Derived)	1.35		1.1 - 2.2
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	174.3	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	89.3	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 husual+circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	39.2	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	117.2	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	17.9	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	135.1	mg/dL	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.





Ref. Dr : MediWheel Type : OP

Investigation Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	Observed Value 4.4	<u>Unit</u>	Biological Reference Interval 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/Calculated)	2.3		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/ Calculated)	3		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
Glycosylated Haemoglobin (HbA1c)			
HbA1C (Whole Blood/Ion exchange HPLC by D10)	6.6	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4

INTERPRETATION: If Diabetes - Good control: 6.1 - 7.0 %, Fair control: 7.1 - 8.0 %, Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood) 142.72 mg/dL

INTERPRETATION: Comments

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency,

hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/ 1.24 ng/ml 0.7 - 2.04 Chemiluminescent Immunometric Assay

(CLIA))

INTERPRETATION:

Comment:

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Tyroxine) - Total (Serum/ 11.38 µg/dl 4.2 - 12.0

Chemiluminescent Immunometric Assay

(CLIA))

INTERPRETATION:

Comment:

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.





Dr.R.Lavanya MD
Consultant - Pathologist
Reg No: 90632

Diabetic: >= 6.5

Ref. Dr : MediWheel Type : OP

<u>Investigation</u> <u>Observed Value</u> <u>Unit</u> <u>Biological Reference Interval</u>

TSH (Thyroid Stimulating Hormone) (Serum 6.23 µIU/mL 0.35 - 5.50

/Chemiluminescent Immunometric Assay

(CLIA))

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&lt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

CLINICAL PATHOLOGY

Urine Analysis - Routine

<u>Omio maryoto mounto</u>			
Colour (Urine)	Pale yellow		Yellow to Amber
Appearance (Urine)	Clear		Clear
Protein (Urine)	Negative		Negative
Glucose (Urine)	Negative		Negative
Pus Cells (Urine)	2-3	/hpf	NIL
Epithelial Cells (Urine)	1-2	/hpf	NIL
RBCs (Urine)	Nil	/hpf	NIL

-- End of Report --





Name	MR.RAVICHANDRAN P	ID	MED122093707
Age & Gender	38Y/MALE	Visit Date	25 Aug 2023
Ref Doctor Name	MediWheel	-	

Thanks for your reference

ECHOCARDIOGRAM WITH COLOUR DOPPLER:

LVID d ... 4.9cm LVID s ... 2.8cm FF ... 74% IVS d ...0.7cm IVS s ... 0.9cm LVPW d ... 0.2cm LVPW s ... 0.8cm LA ... 2.9cm ... 3.1cm ΑO ... 22mm TAPSE

Left ventricle, Left atrium normal.

Right ventricle, Right atrium normal.

No regional wall motion abnormality present.

Mitral valve, Aortic valve, Tricuspid valve & Pulmonary valve normal.

Aorta normal.

Inter atrial septum intact.

Inter ventricular septum intact.

No pericardial effusion .

Doppler:

Mitral valve: E: 0.78m/s A: 0.61m/s

E/A Ratio: 1.27 E/E: 9.83

Name	MR.RAVICHANDRAN P	ID	MED122093707
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Aortic valve: AV Jet velocity: 1.22m/s

Tricuspid valve: TV Jet velocity: 2.18 m/s TRPG: 19.04 mmHg.

Pulmonary valve: PV Jet velocity: 1.29m/s

IMPRESSION:

1. Normal chambers & Valves.

2. No regional wall motion abnormality present.

3. Normal LV systolic function.

4. Pericardial effusion - Nil.

5. No pulmonary artery hypertension.

Dr. S. MANIKANDAN. MD.DM.(Cardio) Cardiologist

Name	MR.RAVICHANDRAN P	ID	MED122093707
Age & Gender	38Y/MALE	Visit Date	25 Aug 2023
Ref Doctor Name	MediWheel	-	

Thanks for your reference

SONOGRAM REPORT

WHOLE ABDOMEN

Liver: The liver is normal in size and shows uniform echotexture with no

focal abnormality. There is no intra or extra hepatic biliary ductal

dilatation.

Gallbladder: The gall bladder is normal sized and smooth walled and contains

no calculus.

Pancreas: The pancreas shows a normal configuration and echotexture.

The pancreatic duct is normal.

Spleen: The spleen is normal.

Kidneys: The right kidney measures 9.0 x 4.3 cm. Normal architecture.

The collecting system is not dilated.

The left kidney measures 9.6 x 4.6 cm. Normal architecture.

The collecting system is not dilated.

Urinary

bladder: The urinary bladder is smooth walled and uniformly transonic.

There is no intravesical mass or calculus.

Prostate: The prostate measures 3.6 x 3.3 x 3.0 cm and is normal sized.

Corresponds to a weight of about 19.03 gms.

Name	MR.RAVICHANDRAN P	ID	MED122093707
Age & Gender	38Y/MALE	Visit Date	25 Aug 2023
Ref Doctor Name	MediWheel	-	

The echotexture is homogeneous. The seminal vesicles are normal.

RIF: Iliac fossae are normal.

No mass or fluid collection is seen in the right iliac fossa.

The appendix is not visualized.

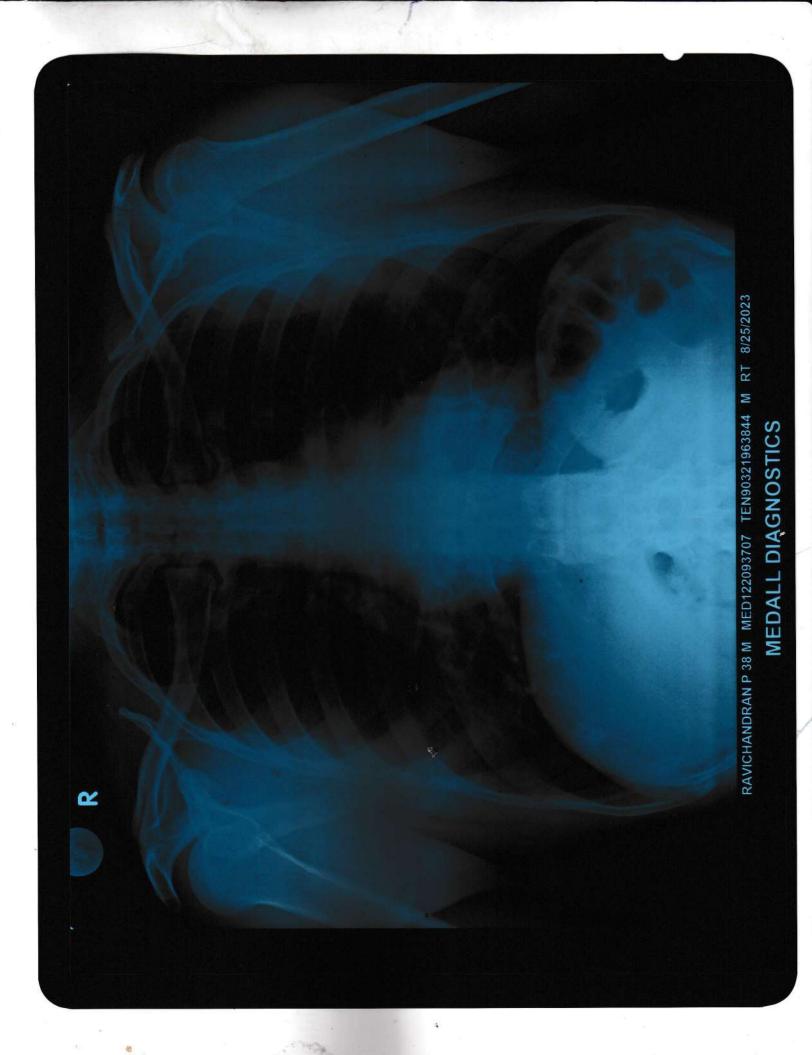
There is no free or loculated peritoneal fluid. No para aortic lymphadenopathy is seen.

IMPRESSION:

> No significant abnormality.

DR. T. ANNIE STALIN MBBS., F.USG., SONOLOGIST. REG. NO: 85764.

Name	MR.RAVICHANDRAN P	ID	MED122093707
Age & Gender	38Y/MALE	Visit Date	25 Aug 2023
Ref Doctor Name	MediWheel	-	



MEDICAL EXAMINATION REPORT

sition Selected For	Identification marks				
HISTORY:					
Do you have, or are you being treated for, any of the following coeditions? (please tick all that apply					
Anxiety		Blood Pressu			
Arthritis Depression/ bipolar disorder High Ch					
Asthama, Bronchitis, Emphysema		aine Headach	es		
Back or spinal problems		sitis or Allergio			
Epilepsy		Fever)			
срперзу	which you are receiving medical attention				
2. List the medications taken Regula	rrly. No				
3. List allergies to any known medic	ations or chemicals NO				
4. Alcohol: Yes No	ccasional				
5. Smoking: Yes No Q	uit(more than 3 years)				
6. Respiratory Function :		desidence			
	breath while walking fast or taking stair - case?	Yes	No -		
b. Do you usually cough a lot first th	ning in morning?	Yes	No _		
b. Do you usuany cough a for mist th	ing in morning:	163	140		
c. Have you vomited or coughed or	ut blood?	Yes	No		
7. Cardiovascular Function & Physic	cal Activity :				
a. Exercise Type: (Select 1)	The district				
 No Activity 					
o Very Light Activity (Seated At De	esk, Standing)				
 Light Activity (Walking on level s 	urface, house cleaning)				
 Moderate Activity (Brisk walking, 	dancing, weeding)				
 Vigrous Activity (Soccer, Running 	g)				
b. Exercise Frequency: Regular (le	ess than 3 days/ week) / Irregular (more than 3	3 days/ Week)	450		
c. Do you feel pain in chest when e		Yes	No -		
•	ngaging in physical activity.		110		
8. Hearing :a. Do you have history of hearing tr	oubles?	Yes	No -		
b. Do you experiences ringing in yo		Yes	No .		
c. Do you experience discharge fro	CONTRACTOR	Yes	No -		
d. Have you ever been diagnosed		Yes	No ·		
	Mut inquation deditiosa:	169	140		
9. Musculo - Skeletal History a. Neck:	Have you ever injured or experienced pain?	Yes	No -		
b. Back :	If Yes; approximate date (MM/YYYY)	. 55			
c. Shoulder, Elbow, Writs, Hands	Consulted a medical professional?	Yes	No .		
d. Hips, Knees, Ankles, Legs	Resulted in time of work?	Yes	No		
	Surgery Required ?	Yes	No _		
	Ongoing Problems ?	Yes	No .		

1	10. Function History			
	a. Do you have pain or	r discomfort when lifting or	handling heavy objects?	v
		pain when squatting or kne		Yes No
		pain when forwarding or tw		Yes No
			cts above your shoulder height?	Yes No
		when doing any of the	following for prolonged period	
	•Walking: Yes N	•Kneeling:	Yes No Squat	ing: Yes No
	•Climbing: Yes No	•Sitting:	Yes No No	3 · · · · · · · · · · · · · · · · · · ·
	•Standing: Yes No	•Bending:	Yes No	
	f. Do you have pain w	hen working with hand too		Yes No
		any difficulty operating ma		Yes No
	.h. Do you have difficult	ty operating computer instr	rument?	Yes No
В.	CLINICAL EXAMINATIO	N.:		Pulse-71
	a. Height 164	b. Weight 60 200	Blood Pressure	7 167 mmhg
	Chest measurements:	a. Normal	b. Expanded	7 0 / mining
	Waist Circumference		Ear, Nose & Throat□	Normal
	Skin	Normal	Respiratory System	Normal
	Vision	Normal	Nervous System	Normal
	Circulatory System	Normal	Genito- urinary System	Normal
	Gastro-intestinal System		Colour Vision	
	Discuss Particulars of Section B :-		_ cologi vicion	Normal
C.	REMARKS OF PATHOL	OGICAL TESTS		
	Chest X -ray	Nomal	TECG	Normal
	Complete Blood Count	14,61	Urine routine	
	Serum cholesterol	The second secon	=======================================	Normal
		74.3		- TT8 p.p-926
ь	Blood Group	B'positive	S.Creatinine	0.94
D.	CONCLUSION: Any further investigations r	required	Any propositions averages to d	
	7 any turner investigations i	equired	Any precautions suggested	
	_		-	
E.	FITNESS CERTIFICATION	N'm	J. L.	
			man to be a ffe in t	1 56-5
			ppear to be suffering from an	y disease communicable
	or otherwise, constitu	utional weakness or	bodily informity except	
		I do not conside	er this as disqualification for empl	oyment in the Company. S
	Candidate is free	from Contagious/Con	mmunicable disease	Although the State of the State
	e e en mon o		7	
	20 6.00		- 4	V
Dat	e: 25.8,23		Dr.S. MANISignati	ure of Medical Adviser

Reg. No. 61765, Consultant Cardiologi : Medall Diagnostics
Tirunelyeli - 3.



Dr. Vijay Kumar S.

Dr. Vishnu Kuppusamy Pounraju

Dr. Visalatchi

THE EYE FOUNDATION

SUPER SPECIALITY EYE HOSPITALS





E-mail: tirunelveli@theeyefoundation.com Website: www.theeyefoundation.com **H.O:** D.B. Road, Coimbatore - 641 002.

CONSULTANTS :			*
Dr. Abiramasundari D		#	
Dr. Adarsh S Naik Dr. Ajay R Kaushik			Date: 2.5. 8. 2.3.
Dr. Andrea Jose			
Dr. Ashraya Nayaka T.E			
Dr. Ashwin Segi		Eye Fitness Certificate	
Dr. Aylette Jude Dsilva		25 0 1 1111055 201 111101110	
Dr. Chandra Shekar C.S. Dr. Chitra Ramamurthy			
Dr. Gautam Kukadia			
Dr. Girish Reddy G.C.		0:11	h
Dr. Gitansha Shreyas Sachdev	This is to certify that Mr/Mrs/N	As. Kavichand Jar	Age 3740S
Dr. Gopal R.			U
Dr. Gopinathan G.S Dr. Hameed Obedulla			
Dr. Hemanth Murthy	Male/Female, our MRNO1.3	100 CD 84	
Dr. Hemamalini	Maich emaic, our Micho		
Dr. Iris			2.2
Dr. Jatinder Singh Dr. Jezeela K.		OD	OS
Dr. Khalid Lateef		A 1.	1 1
Dr. Krishnan R.	Visual Acuity	0/6	6/6
Dr. Maimunnisa M.			10
Dr. Manjula	Near Vision	N.6	NЬ
Dr. Mohamed Faizal S. Dr. Mohd Shahbaaz	iveal vision	/. N . C	
Dr. Mugdha Kumar	C 1 V.	01/	21/21
Dr. Muralidhar R.	Colour Vision	21.	2 /2
Dr. Muralidhar N.S.			
Dr. Nagesh	B.S.V	Noomal	Normal
Dr. Nikitha Dr. Pranessh Ravi			
Dr. Praveen Muraly	Central Fields	Noomal	Normal
Dr. Preethi	Central Fields		
Dr. Priyanka R.		1	1
Dr. Priyanka Shyam	Anterior Segment	Normal	mal
Dr. Priyanka Singh Dr. Raline Solomon			
Dr. Ramamurthy D.	Fundus	Normal	Normal
Dr. Rashmita Kukadia			
Dr. Rathinasamy V.			
Dr. Ravi J. Dr. Romit Salian	Eit with alagas	Carlo Car	
Dr. Sagar Basu	Fit with glasses	9	
Dr. Sahana Manish	Fit without glasses		Fit
Dr. Sakthi Rajeswari N.		V	1-10
Dr. Shreesh Kumar K. Dr. Shreyas Ramamurthy	unfit		
Dr. Shylesh Dabke			8
Dr. Soundarya B.			
Dr. Srinivas Rao V.K.			*
Dr. Sumanth Dr. Sunitha	Medical Congultant		
Dr. Sushma Poojary	Medical Consultant,		
Dr. Swathi Baliga	The Eye Foundation	2	
Dr. Tamilarasi S.	Tirunelveli.	•	
Dr. Thenarasun S.A.	D. Dorr	W11: 10	
Dr. Umesh Krishna Dr. Vaishnavi M.	or Luci	THI.K MBBS.MS.FMR	
Dr. Vamsi K.		No. 105495	
Dr. Vidhya N.	THE EY	FOUNDATION	

Tirunelveli

Name	Mr. RAVICHANDRAN P	Customer ID	MED122093707
Age & Gender	38Y/M	Visit Date	Aug 25 2023 9:51AM
Ref Doctor	MediWheel		

Thanks for your reference

DIGITAL X- RAY CHEST PA VIEW

Trachea appears normal.

Cardiothoracic ratio is within normal limits.

Bilateral lung fields appear normal.

Costo and cardiophrenic angles appear normal.

Visualised bony structures appear normal.

Extra thoracic soft tissues shadow grossly appears normal.

IMPRESSION:

i. NO SIGNIFICANT ABNORMALITY DEMONSTRATED.

DR. J. VINOLIN NIVETHA, M.D.R.D., Consultant Radiologist. Reg. No: 115999.