

FINAL REPORT

Bill No.	: APHHC230000839	Bill Date	: 22-07-2023 09:09
Patient Name	: MRS. ROZY KUMARI	UHID	: APH000016014
Age / Gender	: 36 Yrs 5 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23019325	Current Ward / Bed	: /
		Receiving Date & Time	: 22-07-2023 09:54
		Reporting Date & Time	: 22-07-2023 13:29

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

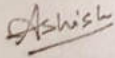
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.29	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.06	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		3.23	mIU/L	0.27-4.20

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low



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Age / Gender	: 36 Yrs 5 Mth / FEMALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23019523	Current Ward / Bed	: /
		Receiving Date & Time	: 24-07-2023 12:19
		Reporting Date & Time	: 24-07-2023 14:03

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Urine

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY		20 mL		
COLOUR		Pale Straw		Pale Yellow
TURBIDITY		Slight Hazy		

CHEMICAL EXAMINATION

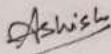
PH (Double pH indicator method)		6.0		5.0 - 8.5
PROTEINS (Protein-error-of-indicators)		Negative		Negative
SUGAR (GOD POD Method)		Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)		1.020		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		18-20	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		6-8/HPF		
CASTS		Absent		
CRYSTALS		Absent		
URINE-SUGAR		NEGATIVE		

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23019321	Current Ward / Bed	: /
		Receiving Date & Time	: 22-07-2023 09:54
		Reporting Date & Time	: 22-07-2023 11:46

HAEMATOLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

CBC -1 (COMPLETE BLOOD COUNT)

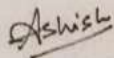
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.9	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focusing)		3.8	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	9.9	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	30.7	%	36 - 46
MEAN CORPUSCULAR VOLUME	L	81.0	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	26.1	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.2	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focusing)		154	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		45.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.7	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		72	%	40 - 80
LYMPHOCYTES		20	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	46	mm 1st hr	0 - 20

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Age / Gender	: 36 Yrs 5 Mth / FEMALE	Patient Type	: OPD # PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23019392	Current Ward / Bed	: /
		Receiving Date & Time	: 22-07-2023 23:18
		Reporting Date & Time	: 23-07-2023 02:17

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD UREA <small>Urease-GLO/HITAC</small>		22	mg/dL	15 - 45
BUN (CALCULATED)		10.3	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe's Kinetic)</small>		0.6	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		98.0	mg/dL	70 - 100

Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.
 (As per American Diabetes Association recommendation)

GLUCOSE-PLASMA (POST PRANDIAL) <small>(UV Hexokinase)</small>		105.0	mg/dL	70 - 140
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Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL.
 (As per American Diabetes Association recommendation)

LIPID PROFILE

CHOLESTROL-TOTAL <small>(CHO-POD)</small>		132	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>		48	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>		65	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO-POD)</small>		68	mg/dL	0 - 160
NON-HDL CHOLESTROL		84.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		2.8		½Average Risk <3.3 Average Risk 3.3 - 4.4 2 Times Average Risk 4.5 - 7.1 3 Times Average Risk 7.2-11.0
LDL CHOLESTROL / HDL CHOLESTROL		1.4		½Average Risk <1.5 Average Risk 1.5-3.2 2 Times Average Risk 3.3-5.0 3 Times Average Risk 5.1-6.1
CHOLESTROL-VLDL		14	mg/dL	10 - 35

Comments:

- Disorders of Lipid metabolism play a major role in atherosclerosis and coronary heart disease.
- There is an established relationship between increased total cholesterol & LDL cholesterol and myocardial infarction.
- HDL cholesterol level is inversely related to the incidence of coronary artery disease.
- Major risk factors which adversely affect the lipid levels are:
 - Cigarette smoking.
 - Hypertension.
 - Family history of premature coronary heart disease.
 - Pre-existing coronary heart disease.

LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL <small>(DPO)</small>		0.43	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.09	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.34	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		6.6	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.1	g/dL	

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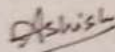
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Ref. Consultant	: MEDIMHEEL	Ward / Bed	: /
Sample ID	: APH23019392	Current Ward / Bed	: /
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		Reporting Date & Time	: 23-07-2023 02:17

S.GLOBULIN	L	2.5	g/dL	2.8-3.8
A/G RATIO		1.54		1.5 - 2.5
ALKALINE PHOSPHATASE (PC-AKP BUFFER)		55.4	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (PKC)		20.5	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (PKC)		15.4	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (PKC)		16.8	IU/L	7 - 35
LACTATE DEHYDROGENASE (PKC-LP)		164.1	IU/L	0 - 248
S.PROTEIN-TOTAL (Sumc)		6.6	g/dL	6 - 8.1
URIC ACID (Uricase - Tinder)	L	2.3	mg/dL	2.6 - 7.2

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Sample ID	: APH23019392	Current Ward / Bed	: /
		Receiving Date & Time	: 22-07-2023 23:18
		Reporting Date & Time	: 23-07-2023 02:17

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	6.2	%	4.0 - 6.2
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INTERPRETATION:

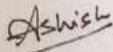
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- Note:
1. A three monthly monitoring is recommended in diabetics.
 2. Since HbA1c concentration represents the integrated values for blood glucose over the preceding 6 - 10 weeks and is not affected by daily glucose fluctuation, exercise and recent food intake, it is a more useful tool for monitoring diabetics.

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23019322	Current Ward / Bed	: /
		Receiving Date & Time	: 22-07-2023 09:54
		Reporting Date & Time	: 22-07-2023 16:01

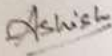
BLOOD BANK REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
Sample Type: EDTA Whole Blood				
MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550				
BLOOD GROUP (ABO)		"A"		
RH TYPE		POSITIVE		

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Age / Gender	: 36 Yrs 5 Mth / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward	:
Sample ID	: APH23019626	Current Bed	:
		Reporting Date & Time	: 25-07-2023 10:00
		Receiving Date & Time	: 25/07/2023 09:58

CYTOPATHOLOGY REPORTING

Cytopathology No:C-104/23

Material Received: PAP smear. Two unstained slide received.

Reporting System: BETHESDA 2014

Material Adequacy: Satisfactory for evaluation.
Endocervical/Transformation zone component present.

Microscopic Examination: Mostly Superficial cells, Intermediate cells & few Para-basal cells and basal cells.

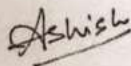
Non-Neoplastic Findings: Moderate neutrophilic infiltrates.

Specific Infections: Nil.

Epithelial cell abnormality (Squamous cells): Nil
Squamous cell abnormality (Glandular cells): Nil.

Impression: Inflammatory smear. Negative for Intraepithelial lesion or Malignancy.(NILM).

*** End of Report ***



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