



NABL & ISO 9001 : 2008 Certified  
Wellness . Diagnostics  
A Unit of Gian Life Care Limited



7/216 (6), Swaroop Nagar  
(In Front of L.L.R. Hospital), Kanpur  
Mob. : 8808051576  
E-mail : reportsgpx@gmail.com  
arunguptagpx@gmail.com

Gian Pathology and X-Ray

Pathology . Radiology

Gian Life Line - Health Checkup

Lab No.	: 012303230029	Reg No/BarcodeNo	: 544523/01490630
Patient Name	: Mrs..KANCHAN AWASTHI	Reg. Date	: 23/Mar/2023 09:01AM
Age/Sex	: 41 Y / Female	Sample Taken Date	: 23/Mar/2023 09:57AM
Client Code/Name	: MEDIWHEEL FULL BODY CHECKUP	Report Date	: 23/Mar/2023 12:07PM
Referred By Doctor	: Dr. BANK OF BARODA		

**BIOCHEMISTRY**

**MEDIWHEEL FEMALE ABOVE 40**

**Blood Sugar (Fasting)**

Blood Sugar Fasting Hexokinase 88 mg/dl 70 - 100

Sample Type:Plasma

**Blood Sugar (PP)**

Blood Sugar PP (2 Hr.) Hexokinase 107 mg/dL 70 - 140

Sample Type:Plasma

**GAMMA GT/GGT**

GAMMA GT / GGT 12 IU/l 12 - 43

\*Not in NABL Scope\*

Sample Type:Serum

**BUN / BLOOD UREA NITROGEN**

BLOOD UREA NITROGEN Urease 8 mg/dl 7.0 - 18.7

Sample Type:Serum

**CREATININE SERUM**

CREATININE, Serum Kinetic Alkaline Picrate 0.74 mg/dl 0.52 - 1.04

Sample Type:Serum

**URIC ACID**

URIC ACID, Serum Uricase 4.8 mg/dl 2.5 - 6.2

Sample Type:Serum



*Arun Kumar Gupta*

**Dr. Arun Kumar Gupta**

M.D. Chief Pathologist  
(Reg No. 34930)

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BIOCHEMISTRY

MEDIWHEEL FEMALE ABOVE 40

**LFT/LIVER FUNCTION TESTS**

BILIRUBIN TOTAL Diazonium Salt	0.40	mg/dl	0.10 - 1.00
BILIRUBIN DIRECT Diazo Reaction	0.18	mg/dl	0.0 - 0.3
BILIRUBIN INDIRECT Calculated	0.22	mg/dl	0.10 - 1.1
SGOT /AST Enzymatic (NADH(Without P-5-P))	15	U/L	14 - 36
SGPT /ALT Enzymatic (NADH(Without P-5-P))	16	U/L	0.0 - 55
Alk. Phosphatase, Serum PNPP AMP Kinetic	75	U/L	38 - 126
PROTEIN TOTAL Biuret	7.8	g/dl	6.4 - 8.3
ALBUMIN BCG	4.3	g/dl	3.5 - 5.0
GLOBULIN Calculated	3.5	g/dl	2.3 - 3.5
A/G RATIO Calculated	1.23	Ratio	1.5 - 2.5

Sample Type:Serum



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BIOCHEMISTRY

MEDIWHEEL FEMALE ABOVE 40

Lipid Profile

CHOLESTEROL TOTAL Enzymetic	172	mg/dl	Desirable: <200 Boderline High: 200 – 239 High : ≥240
TRIGLYCERIDES GPO	131	mg/dl	Normal <150 Boderline High: 150 – 199 High : 200 – 499 Very High: ≥500
HDL CHOLESTEROL Accelerator Selective Detergent	41	mg/dl	40 - 60
LDL CHOLESTEROL Calculated	104.8	mg/dl	100 - 130
VLDL CALCULATED Calculated	26.2	mg/dl	13 - 36
CHOL/ HDL RATIO Calculated	4.2	Ratio	Less than 4.0
LDL / HDL RATIO	2.56		3.3 - 4.4 (Low Risk) 4.4-7.1 (Average Risk) 7.1-11.0 (Moderate Risk)

Ratio of LDL to HDL

Risk	Men	Women
Very low (1/2 average)	1	1.5
Average risk	3.6	3.2
Moderate risk (2x average)	6.3	5.0
High risk (3x risk)	8	6.1

HDL levels have an inverse relationship with coronary heart disease. The ability of HDL to predict the development of coronary atherosclerosis has been estimated to be four times greater than LDL and eight times greater than TC. Treatment is recommended for those with a HDL level below 40 mg/dL. An HDL of 60 mg/dL is considered protection against heart disease.

Preparation:

Blood should be collected after a 12-hour fast (no food or drink, except water). For the most accurate results, wait at least 2 months after a heart attack, surgery, infection, injury or pregnancy to check Lipid Profile.

Sample Type:Serum



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**BIOCHEMISTRY**

**MEDIWHEEL FEMALE ABOVE 40**

**BUN/CREATININE RATIO**

BLOOD UREA NITROGEN Urease	8	mg/dl	7.0 - 18.7
CREATININE, Serum Kinetic Alkaline Picrate Ratio	0.74	mg/dl	0.52 - 1.04
	10.81	mg/dl	5 - 20

Sample Type:Serum



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Age/Sex	: 41 Y / Female	Sample Taken Date	: 23/Mar/2023 01:18PM
Client Code/Name	: MEDIWHEEL FULL BODY CHECKUP	Report Date	: 23/Mar/2023 02:58PM
Referred By Doctor	: Dr. BANK OF BARODA		

CLINICAL PATHOLOGY

MEDIWHEEL FEMALE ABOVE 40

MEDIWHEEL FEMALE ABOVE 40

**URINE SUGAR (F)**

URINE SUGAR (F) NIL

(\*Not in NABL Scope\*)

**URINE ROUTINE EXAMINATION**

**Method -Dipstick And Microscopy**

**PHYSICAL EXAMINATION**

COLOUR	STRAW	
SPECIFIC GRAVITY (Based on pka change)	1.015	1.001 - 1.030
pH ( methylred/Bromothymol blue method )	6	7.50 - 8.0
TURBIDITY	NIL	
Deposit (UR)	NIL	

**Chemical**

PROTEIN Dipstick/Tetra bromophenol blue/ Heat & Acid Test method).	NIL	Nil
GLUCOSE (Oxidase Peroxidase method)	NIL	Nil
KETONE (Nitroprusside Method)	NEGATIVE	Nil
BILL PIGMENT (Diazo Method)	NEGATIVE	Negative
UROBILINOGEN (Ehrlich reaction)	NEGATIVE	Normal
Nitrite (Based on presence of bacteria )	NEGATIVE	Negative
Leucocyte Esterase (Esterase Diazonium Method)	NEGATIVE	Negative

**After Centrifugation at 2500 R.P.M. For 5 Minutes**

**MICROSCOPIC EXAMINATION**

RBC (Microscopic)	NIL	per HPF	
PUS CELLS (Microscopic)	1-2	Per HPF	0 - 5 WBC/hpf
EPITHELIAL CELLS (Microscopic)	NIL	Per HPF	
CASTS (Microscopic)	NIL	Per LPF	
CRYSTALS (Microscopic)	NIL		
Amorphous Material (Microscopic)	Nil		Nil
BACTERIA (Microscopic)	NIL	Per HPF	0-0



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CLINICAL PATHOLOGY

MEDIWHEEL FEMALE ABOVE 40

URINE SUGAR (PP)

URINE SUGAR (PP) NIL

(\*Not in NABL Scope\*)



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HAEMATOLOGY

MEDIWHEEL FEMALE ABOVE 40

MEDIWHEEL FEMALE ABOVE 40

**CBC / COMPLETE BLOOD COUNT**

HEMOGLOBIN (Hb) Photometry Cyanide Free	11.8	g/dl	12.0 - 15.0
TLC Impedance	8800	/cumm	4000-10000
<b>DLC (%)</b>			
NEUTROPHIL DHSS/Microscopic	59	%	40-80
LYMPHOCYTE DHSS/Microscopic	28	%	24-44
EOSINOPHIL DHSS/Microscopic	8	%	01-06
MONOCYTE DHSS/Microscopic	5	%	3-6
Platelet Impedance/Microscopic	272	10 <sup>3</sup> /μL	150 - 410
RBC COUNT Impedance	4.2	10 <sup>6</sup> /μL	3.8 - 4.8
PCV (HCT) Numeric Integration	36	%	36-46
MCV Calculated	86.2	fL	83-91
MCH Calculated	28.2	pg	27-32
MCHC Calculated	32.7	g/dL	31.5-34.5
RDW-CV Calculated	15	%	11.6 - 14.0
MPV	10.6	fL	8 - 12
ABSOLUTE NEUTROPHIL COUNT DHSS/Calculated	5	10 <sup>3</sup> /μL	2.00-7.00
ABSOLUTE LYMPHOCYTE COUNT DHSS/Calculated	2.5	10 <sup>3</sup> /μL	1.0-3.0
ABSOLUTE MONOCYTE COUNT DHSS/Calculated	0.5	10 <sup>3</sup> /μL	0.0-2.0
ABSOLUTE EOSINOPHIL COUNT DHSS/Calculated	0.7	10 <sup>3</sup> /μL	0.02 - 0.50

Sample Type Whole Blood EDTA



*Harshita.*

Dr. Harshita Baranwal  
MD, Pathology (SGPGI)  
PDCC (RML IMS)  
Ex Senior Resident (SGPGI)



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HAEMATOLOGY

MEDIWHEEL FEMALE ABOVE 40

MEDIWHEEL FEMALE ABOVE 40

**ESR WESTERGREN (Automated)**

ESR WESTERGREN ( Automated) WESTERGREN	28	mm	0 - 14
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\*Not in NABL Scope\*

Sample Type:EDTA Blood

**ABO Rh / BLOOD GROUP Tube Agglutination (FORWARD & REVERSE Method)**

**BLOOD GROUP / ABO-RH**

ABO	B	.	-
Reverse & Forward			
Rh	POSITIVE	.	-
Reverse & Forward			

Sample Type:EDTA Blood



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HAEMATOLOGY

MEDIWHEEL FEMALE ABOVE 40

HbA1C/GLYCATED HEMOGLOBIN/GHB

HBA1C/GLYCATED HEMOGLOBIN 5.7 %  
Average of Glucose Level 117 mg/dl

Test is done by HPLC method (Gold Standard) D-10 Analyzer.

Expected Values :-

Test	Normal Range	
HbA1c	Non Diabetic:	4.0% - 6.0%
	Good Control:	6.1% - 8.0%
	Poor Control:	8.1% - 9.0 %
	Unsatisfactory:	> 9 %

To convert an A1c to the new average mean blood glucose, use this formula:  
eAG(mg/dl) = (28.7 X HbA1c) - 46.7

\*Not in NABL Scope\*

Sample Type:EDTA Blood



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IMMUNOASSAY

MEDIWHEEL FEMALE ABOVE 40

MEDIWHEEL FEMALE ABOVE 40

T3 / TRIDOTHYRONINE TOTAL

T3 TOTAL CMIA	1.42	ng/mL	0.35 - 1.93
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Increased levels are seen in hyperthyroidism and decreased levels are seen in hypothyroidism.

Sample Type:Serum

T4 / THYROXIN TOTAL

T4 TOTAL CMIA	10.46	µg/dl	4.50 - 10.9
------------------	-------	-------	-------------

Increased levels are seen in graves disease cancer of thyroid as symptoms of hyperthyroidism.Low levels are seen in hypothyroidism whose symptoms are myoxyedema hashmito disease and pituitary disorders



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IMMUNOASSAY

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MEDIWHEEL FEMALE ABOVE 40

**TSH (Thyroid Stimulating Hormone)**

TSH (ECLIA) CMIA	0.88	µIU/ml	0.35 - 5.50
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NOTE:

Guidelines for interpretation of abnormal thyroid function test.

TSH	T4/FT4	T3/FT3	Interpretation
High	Normal Normal	Mild(subclinical)	Hypothyroidism.
High	Low	Low/Normal	Hypothyroidism
Low	Normal Normal	Mild (subclinical)	Hyperthyroidism.
Low	High/Normal	High/Normal	Hyperthyroidism
Low	Low/Normal	Low/Normal	Rare pituitary(secondary)Hypothyroidism

Sample Type:Serum



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X-RAY

MEDIWHEEL FEMALE ABOVE 40

MEDIWHEEL FEMALE ABOVE 40

X RAY CHEST PA VIEW

Diaphragms are normal.

C.P. angles are clear.

**Cardiac shadow is slightly enlarged.**

Trachea is in midline.

**Hilar shadow are heavy.**

**Broncho-vascular markings are prominent.**

No parenchymal lesion is seen.

**Advise :-** Correlate Clinically

**DR. S. KHURANA**  
**M.B.B.S.,D.M.R.E.**

\*\*\* End Of Report \*\*\*

