Chandan Diagnostic Centre, Dehradun



Age / Gender:

Date and Time: 26th Jun 22 9:15 AM

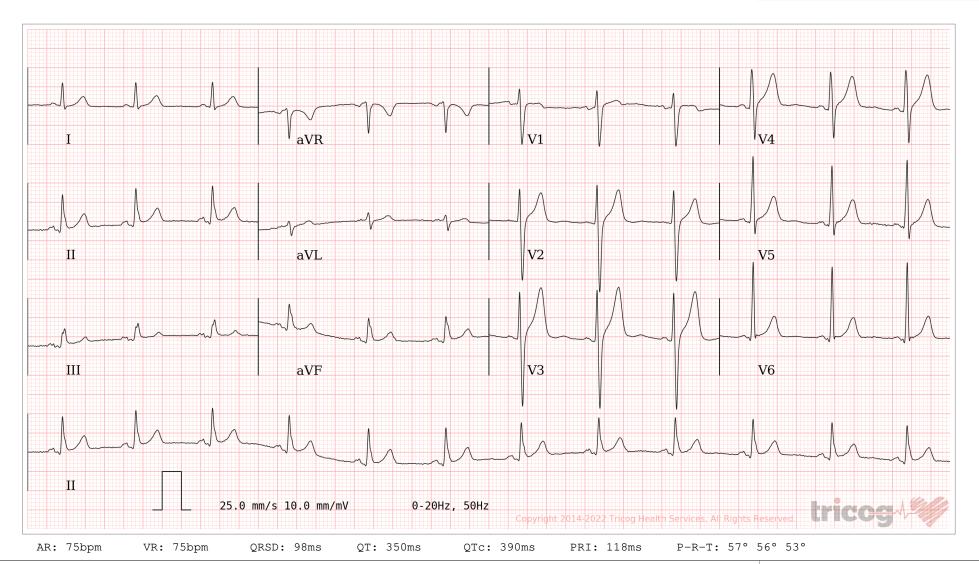
Patient ID:

IDUN0108152223

32/Male

Patient Name:

Mr.KAPIL JOSHI-PKG10000238



ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please correlate clinically.

AUTHORIZED BY

REPORTED BY



Ø~

Dr. Charit MD, DM: Cardiology Dr. Maramita Manjul Das

63382

96308

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.





CIN: U85110DL2003PLC308206



Patient Name : Mr.KAPIL JOSHI-PKG10000238 Registered On : 26/Jun/2022 08:48:28 Age/Gender Collected : 32 Y 0 M 0 D /M : 26/Jun/2022 09:08:59 UHID/MR NO : IDUN.0000175251 Received : 26/Jun/2022 09:20:46 Visit ID : IDUN0108152223 Reported : 26/Jun/2022 11:49:08

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

Blood Group (ABO & Rh typing) *, Blood

Blood Group

0

Rh (Anti-D)

POSITIVE

Complete Blood Count (CBC) *, Whole Blood

Haemoglobin 17.00 g/dl 1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl

1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5

g/dl

2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0

g/dl

Male- 13.5-17.5 g/dl

Female- 12.0-15.5 g/dl

			1 Ciliaic 12.0 13.3 6/ C	
TLC (WBC)	8,710.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	63.80	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	24.20	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	9.20	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.30	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.50	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	6.00	Mm for 1st hr.		
Corrected	0.00	Mm for 1st hr.	. <9	
PCV (HCT)	49.50	cc %	40-54	
Platelet count				
Platelet Count	2.34	LACS/cu mm	1.5-4.0	ELECTRONIC
				IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	14.60	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	39.80	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.24	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	10.40	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	5.79	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE



Home Sample Collection 1800-419-0002



Since 1991

CHANDAN DIAGNOSTIC CENTRE

Add: Armelia,1St Floor,56New Road, M.K.P Chowk,Dehradun Ph: 9235501532,01352710192

CIN: U85110DL2003PLC308206



Patient Name : Mr.KAPIL JOSHI-PKG10000238 Registered On : 26/Jun/2022 08:48:28 Age/Gender : 32 Y 0 M 0 D /M Collected : 26/Jun/2022 09:08:59 UHID/MR NO : IDUN.0000175251 Received : 26/Jun/2022 09:20:46 Visit ID : IDUN0108152223 Reported : 26/Jun/2022 11:49:08

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DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	85.40	fl	80-100	CALCULATED PARAMETER
MCH	29.30	pg	28-35	CALCULATED PARAMETER
MCHC	34.30	%	30-38	CALCULATED PARAMETER
RDW-CV	12.30	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	43.00	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	5,560.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	200.00	/cu mm	40-440	



DR.SMRITI GUPTA MD (PATHOLOGY)









CIN: U85110DL2003PLC308206



Patient Name : Mr.KAPIL JOSHI-PKG10000238 : 26/Jun/2022 08:48:29 Registered On Age/Gender : 32 Y 0 M 0 D /M Collected : 26/Jun/2022 09:08:59 UHID/MR NO : IDUN.0000175251 Received : 26/Jun/2022 09:20:46 Visit ID : IDUN0108152223 Reported : 26/Jun/2022 16:34:04

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

GLUCOSE FASTING, Plasma

Glucose Fasting 104.34 mg/dl < 100 Normal GOD POD

100-125 Pre-diabetes ≥ 126 Diabetes

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.

b) 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.

c) I.G.T = Impared Glucose Tolerance.

Glucose PP 95.78 mg/dl <140 Normal GOD POD

Sample:Plasma After Meal 140-199 Pre-diabetes >200 Diabetes

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.

b) 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.

c) I.G.T = Impared Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) *, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c) 5.30 % NGSP HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c) 34.00 mmol/mol/IFCC
Estimated Average Glucose (eAG) 106 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 mnagement.









CIN: U85110DL2003PLC308206



Patient Name : Mr.KAPIL JOSHI-PKG10000238 : 26/Jun/2022 08:48:29 Registered On : 26/Jun/2022 09:08:59 Age/Gender : 32 Y 0 M 0 D /M Collected UHID/MR NO : IDUN.0000175251 Received : 26/Jun/2022 09:20:46 Visit ID : IDUN0108152223 Reported : 26/Jun/2022 16:34:04 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. : Final Report Status

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

est Name	Result	Unit	Bio. Ref. Interval	Method	
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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.

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.

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.





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





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Ur	nit Bio. Ref. Inter	val Method
BUN (Blood Urea Nitrogen) * Sample:Serum	9.31	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.85	mg/dl	0.5-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	115.00	ml/min/1,73m	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid	7.97	mg/dl	3.4-7.0	URICASE
Sample:Serum				
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	45.70	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	110.07	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	46.58	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.51	gm/dl	6.2-8.0	BIRUET
Albumin	4.34	gm/dl	3.8-5.4	B.C.G.
Globulin	2.17	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	2.00		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	91.47	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.51	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.22	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.29	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	190.21	mg/dl	<200 Desirable 200-239 Borderline Hig > 240 High	CHOD-PAP gh
HDL Cholesterol (Good Cholesterol)	45.66	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	80	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal	
E-14-14-08 (E-1			130-159 Borderline Hig 160-189 High > 190 Very High	gn
国 新教教教教育 1667 京学 安学家	64.05	mg/dl	10-33	0
	320.26	mg/dl	< 150 Normal 150-199 Borderline Hig 200-499 High >500 Very High	DR.SMRITI GUPTA MD (PATHOLOGY









Add: Armelia,1St Floor,56New Road, M.K.P Chowk,Dehradun

Ph: 9235501532,01352710192 CIN: U85110DL2003PLC308206



Patient Name : Mr.KAPIL JOSHI-PKG10000238 Registered On

: 26/Jun/2022 08:48:28 : 26/Jun/2022 11:37:14

Age/Gender

: 32 Y 0 M 0 D /M : IDUN.0000175251 Collected Received

: 26/Jun/2022 12:10:40

UHID/MR NO Visit ID

: IDUN0108152223

Reported

: 26/Jun/2022 13:03:51

Ref Doctor

: Dr.Mediwheel - Arcofemi Health Care Ltd. Status

: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE *	, Urine			
Color	YELLOW			
Specific Gravity	1.025			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
		,	10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
Ketone	ABSENT	mg/dl	> 2 (++++) 0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT	ilig/ui	0.2-2.61	BIOCHEIVIISTKT
Bile Pigments Urobilinogen(1:20 dilution)	ABSENT ABSENT			
Microscopic Examination:	ABSENT		1.5	
Epithelial cells	1-2/h.p.f			MICROSCOPIC
- "	Professional Control			EXAMINATION
Pus cells	ABSENT			MICROSCOPIC
DDC-	ADCENIT			EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			EXAMINATION
Crystals	ABSENT			MICROSCOPIC
Crystals	ADJENT			EXAMINATION
Others	ABSENT			EXAMINATION
SUGAR, PP STAGE * , Urine				
Sugar, PP Stage	ABSENT			
Intomoratations		1		

Interpretation:

< 0.5 gms% (+)

(++)0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%







CHANDAN DIAGNOSTIC CENTRE

Add: Armelia,1St Floor,56New Road, M.K.P Chowk,Dehradun Ph: 9235501532,01352710192

CIN: U85110DL2003PLC308206



Patient Name

Since 1991

: Mr.KAPIL JOSHI-PKG10000238

Registered On

: 26/Jun/2022 08:48:28 : 26/Jun/2022 11:37:14

Age/Gender UHID/MR NO : 32 Y 0 M 0 D /M

Collected Received

: 26/Jun/2022 12:10:40

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: IDUN.0000175251 : IDUN0108152223

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: 26/Jun/2022 13:03:51

Ref Doctor

: Dr.Mediwheel - Arcofemi Health Care Ltd. Status

: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method





DR. RITU BHATIA







CHANDAN DIAGNOSTIC CENTRE

Add: Armelia,1St Floor,56New Road, M.K.P Chowk,Dehradun Ph: 9235501532,01352710192

CIN: U85110DL2003PLC308206



Patient Name : Mr.KAPIL JOSHI-PKG10000238 : 26/Jun/2022 08:48:29 Registered On Age/Gender : 32 Y 0 M 0 D /M Collected : 26/Jun/2022 09:08:59 UHID/MR NO : IDUN.0000175251 Received : 27/Jun/2022 11:09:10 Visit ID : IDUN0108152223 Reported : 27/Jun/2022 12:13:31 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. : Final Report Status

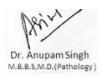
DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interva	l Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	121.52	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	6.32	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	3.51	μIU/mL	0.27 - 5.5	CLIA
		,		
Interpretation:				
		0.3-4.5 µIU/		
		0.5-4.6 µIU/		
		0.8-5.2 µIU/1		
		$0.5-8.9 \mu IU/r$	mL Adults	55-87 Years
		0.7-27 µIU/	mL Premature	28-36 Week
		2.3-13.2 μIU/1	mL Cord Blood	> 37Week
		0.7-64 μIU/1	mL Child(21 wk	c - 20 Yrs.)
		1-39 μΙ	J/mL Child	0-4 Days
		1.7-9.1 μIU/	mL Child	2-20 Week

- 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.













CIN: U85110DL2003PLC308206



Patient Name : Mr.KAPIL JOSHI-PKG10000238 Registered On : 26/Jun/2022 08:48:30

 Age/Gender
 : 32 Y 0 M 0 D /M
 Collected
 : N/A

 UHID/MR NO
 : IDUN.0000175251
 Received
 : N/A

Visit ID : IDUN0108152223 Reported : 26/Jun/2022 15:47:06

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

X-RAY REPORT (300 mA COMPUTERISED UNIT SPOT FILM DEVICE) 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:

NO SIGNIFICANT RADIOLOGICAL ABNORMALITY SEEN ON PRESENT STUDY.



Dr. Amit Bhandari MBBS MD RADIOLOGY







CHANDAN DIAGNOSTIC CENTRE

Add: Armelia,1St Floor,56New Road, M.K.P Chowk,Dehradun

Ph: 9235501532,01352710192 CIN: U85110DL2003PLC308206



Patient Name : Mr.KAPIL JOSHI-PKG10000238 Registered On : 26/Jun/2022 08:48:30

 Age/Gender
 : 32 Y 0 M 0 D /M
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 : IDUN.0000175251
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Visit ID : IDUN0108152223 Reported : 26/Jun/2022 09:59:45

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

Liver is normal in size, shape and echotexture. No focal lesion seen.

PV and CBD are normal. IHBR are not dilated.

Gall bladder seen in distended state with echofree lumen. Wall thickness is normal.

Spleen is normal in size, shape and echotexture.

Pancreas Head and body appear normal. Tail obscured by bowel gases.

Kidneys: Both kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Parenchymal thickness is normal.

No obvious mass/calculus/hydronephrosis seen.

Urinary bladder seen in distended state with echofree lumen. Wall thickness is normal.

Prostate is normal in size and echotexture.

No significant free fluid seen in peritoneal cavity.

IMP: - No significant abnormality detected.

Note: - In case of any discrepancy due to typing error kindly get it rectified immediately

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, SUGAR, FASTING STAGE, ECG / EKG



Dr. Amit Bhandari MBBS MD RADIOLOGY

....

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 Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *

*Facilities Available at Select Location



