



TEST REPORT

Reg. No : 2401100429
Name : MOHD.WASID
Age/Sex : 30 Years / Male
Ref. By :
Client : MEDIWHEEL WELLNESS

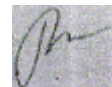
Reg. Date : 13-Jan-2024
Collected On : 13-Jan-2024 12:41
Approved On : 13-Jan-2024 13:19
Printed On : 14-Jan-2024 13:13

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Interval</u>
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KIDNEY FUNCTION TEST

UREA <i>(Urease & glutamate dehydrogenase)</i>	21.3	mg/dL	10 - 50
Creatinine <i>(Jaffe method)</i>	0.91	mg/dL	0.5 - 1.4
Uric Acid <i>(Enzymatic colorimetric)</i>	4.2	mg/dL	2.5 - 7.0

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COMPLETE BLOOD COUNT (CBC)

SPECIMEN: EDTA BLOOD

Hemoglobin	16.4	g/dL	13.0 - 17.0
RBC Count	6.19	million/cmm	4.5 - 5.5
Hematocrit (PCV)	53.3	%	40 - 54
MCH	26.5	Pg	27 - 32
MCV	86.1	fL	83 - 101
MCHC	30.8	%	31.5 - 34.5
RDW	13.2	%	11.5 - 14.5
WBC Count	9400	/cmm	4000 - 11000

DIFFERENTIAL WBC COUNT (Flow cytometry)

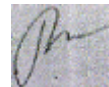
Neutrophils (%)	60	%	38 - 70
Lymphocytes (%)	32	%	20 - 40
Monocytes (%)	06	%	2 - 8
Eosinophils (%)	02	%	0 - 6
Basophils (%)	00	%	0 - 2
Neutrophils	5640	/cmm	
Lymphocytes	3008	/cmm	
Monocytes	564	/cmm	
Eosinophils	188	/cmm	
Basophils	0	/cmm	
Platelet Count (Flow cytometry)	256000	/cmm	150000 - 450000
MPV	7.9	fL	7.5 - 11.5

ERYTHROCYTE SEDIMENTATION RATE

ESR (After 1 hour)	03	mm/hr	0 - 14
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Modified Westergren Method

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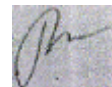
Result

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

ABO 'B'
Rh (D) Positive

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HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

Hb A1C <i>Boronate Affinity with Fluorescent Quenching</i>	6.0	% of Total Hb	Poor Control : > 7.0 % Good Control : 6.2-7.0 % Non-diabetic Level : 4.3-6.2 %
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Mean Blood Glucose <i>Calculated</i>	136.30	mg/dL	
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Degree of Glucose Control Normal Range:

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy,etc.

* Some danger of hypoglycemic reaction in Type I diabetics.

* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

EXPLANATION :-

*Total haemoglobin A1 c is continuously synthesised in the red blood cell through its 120 days life span.The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days,HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

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Parameter	Result	Unit	Reference Interval
LIPID PROFILE			
Cholesterol <i>(Enzymatic colorimetric)</i>	171.0	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride <i>(Enzymatic colorimetric)</i>	145.6	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
VLDL <i>Calculated</i>	29.12	mg/dL	15 - 35
LDL CHOLESTEROL	98.18	mg/dL	Optimal : < 100.0 Near / above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >190.0
HDL Cholesterol <i>Homogeneous enzymatic colorimetric</i>	43.7	mg/dL	30 - 70
Cholesterol /HDL Ratio <i>Calculated</i>	3.91		0 - 5.0
LDL / HDL RATIO <i>Calculated</i>	2.25		0 - 3.5



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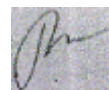
Table header with columns: Parameter, Result, Unit, Reference Interval

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP<?xml:namespace prefix = "o" ns = "urn:schemas-microsoft-com:office:office" />

LDL CHOLESTEROL
CHOLESTEROL
HDL CHOLESTEROL
TRIGLYCERIDES
Optimal<100
Desirable<200
Low<40
Normal<150
Near Optimal 100-129
Border Line 200-239
High >60
Border High 150-199
Borderline 130-159
High >240
-
High 200-499
High 160-189
-
-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
• For LDL Cholesterol level Please consider direct LDL value
Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
• Detail test interpreation available from the lab
• All tests are done according to NCEP guidelines and with FDA approved kits.
• LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
For test performed on specimens received or collected from non-KSHIPRA locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender.
KSHIPRA will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.
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LIVER FUNCTION TEST			
Total Bilirubin <i>Colorimetric diazo method</i>	0.62	mg/dL	0.10 - 1.0
Conjugated Bilirubin <i>Sulph acid dpl/caff-benz</i>	0.19	mg/dL	0.0 - 0.3
Unconjugated Bilirubin <i>Sulph acid dpl/caff-benz</i>	0.43	mg/dL	0.0 - 1.1
SGOT <i>(Enzymatic)</i>	34.1	U/L	0 - 37
SGPT <i>(Enzymatic)</i>	29.6	U/L	0 - 40
Alakaline Phosphatase <i>(Colorimetric standardized method)</i>	100.2	U/L	53 - 130
<u>Protien with ratio</u>			
Total Protein <i>(Colorimetric standardized method)</i>	6.8	g/dL	6.5 - 8.7
Albumin <i>(Colorimetric standardized method)</i>	4.3	mg/dL	3.5 - 5.3
Globulin <i>Calculated</i>	2.50	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	1.72		0.8 - 2.0

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<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Interval</u>
Fasting Blood Sugar (FBS) <i>Hexokinase Method</i>	97.4	mg/dL	70 - 110
Post Prandial Blood Sugar (PPBS) <i>Hexokinase Method</i>	129.3	mg/dL	70 - 140

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THYROID FUNCTION TEST

T3 (Triiodothyronine) <i>Chemiluminescence</i>	1.00	ng/mL	0.87 - 1.81
T4 (Thyroxine) <i>Chemiluminescence</i>	8.69	µg/dL	5.89 - 14.9
TSH (ultra sensitive) <i>Chemiluminescence</i>	2.983	µIU/ml	0.34 - 5.6

SUMMARY The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. **LIMITATION** Presence of autoantibodies may cause unexpected high value of TSH

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URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity : 20 cc
Colour : Pale Yellow
Appearance : Clear

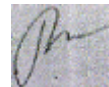
CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC METHOD)

pH	6.0	5.0 - 8.0
Sp. Gravity	1.015	1.002 - 1.03
Protein	Nil	
Glucose	Nil	
Ketone Bodies	Nil	
Urine Bile salt and Bile Pigment	Nil	
Urine Bilirubin	Nil	
Nitrite	Nil	
Leucocytes	Nil	
Blood	Nil	

MICROSCOPIC EXAMINATION (MANUAL BY MCIROSCOPY)

Leucocytes (Pus Cells)	Occasional/hpf
Erythrocytes (Red Cells)	Occasional/hpf
Epithelial Cells	1-2/hpf
Amorphous Material	Nil
Casts	Nil
Crystals	Nil
Bacteria	Nil
Monilia	Nil

----- End Of Report -----



Name	:	Mr. Mohd. Wasid	Age	:	30Yrs. / M
Thanks To	:	Mediwhleel wellness	Date	:	12/1/2024

ULTRASOUND STUDY OF WHOLE ABDOMEN

LIVER

Liver is mild enlarged in size (16.8cm), & bright in echotexture. No focal mass lesion is seen. Intra hepatic biliary radicles are normal. Portal vein is normal in caliber.

GALL BLADDER

Gall bladder is well distended. The wall thickness appears normal. No evidence of calculus or mass lesion is seen. C.B.D. appears normal.

PANCREAS

Pancreas is normal in size, shape & echotexture. No focal mass lesion is seen.

SPLEEN

Spleen is normal in size, shape & echotexture. No focal mass lesion is seen.

BOTH KIDNEYS

Both kidneys are normal in size, shape & echotexture. Renal parenchyma appears normal. No evidence of hydronephrosis or cortical scarring is seen in both kidneys.

Right kidney measures : 10.7 x 4.8 cms.

Left kidney measures : 10.2 x 5.2 cms.

URINARY BLADDER

Urinary bladder is well distended and appears normal in contour. The wall thickness appears normal.

PROSTATE

Prostate is normal in size, shape and echotexture

No obvious abdominal lymphadenopathy is seen.

No free fluid is seen in peritoneal cavity.

OPINION:

- Mild hepatomegaly with fatty changes grade II



Dr. Bharat Jain

MD (Radio-Diagnosis)

Consultant Radiologist

N.B.: This is only a professional opinion and not the final diagnosis. MRI/CT is subject to variations due to technical limitations, hence correlation with clinical findings and other investigations should be carried out to know the true nature of illness

2-B, Ground Floor, Court Choraha, Main Road Tehsil Ke Samne, Udaipur 313001 (Raj.)

Mob. : 7229961115, 7229970005, 7229901188

(24 x 7 Customer Service) Email : Kshipralabsudaipur@gmail.com



Name	:	Mohd. Wasid	Age	:	30Yrs. / M
Thanks To	:	Health checkup	Date	:	13/01/2024

Echocardiography Final Interpretation

1. No RWMA, Normal LV systolic function, LVEF - 60%
2. Normal Cardiac chamber dimensions
3. Normal LV Diastolic Function.
4. No MR/TR, Normal PASP.
5. No clot/mass/PE pathology.
6. IVC Normal

M-Mode/2-D Description:

- **Left Ventricle:** It is normal sized.
- **Left Atrium:** It is normal sized.
- **Right Atrium:** It is normal sized.
- **Right Ventricle:** It is normal sized. RV systolic function is normal.
- **Aortic Valve:** It appears normal.
- **Mitral Valve:** It appears normal.
- **Tricuspid Valve:** It appears normal.
- **Pulmonic Valve:** It appears normal.
- **Main Pulmonary artery & its branches:** Appear normal.
- **Pericardium:** There is no pericardial effusion.

Doppler Analysis:

- **Pulmonic Regurgitation** : Nil
- **Mitral Regurgitation** : Nil
- **Aortic Regurgitation** : Nil
- **Tricuspid Regurgitation** : Nil
- **Diastolic Parameters** :

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Echocardiography

Measurements (mm):

	Observed values	Normal values
Aortic root diameter	26	20-36 (22mm/M ²)
Aortic valve opening		15-26
Left atrium size	25	19-40

	End Diastole	End Systole	Normal Values
Left ventricle size	39	27	(ED=37-56:Es=22-40)
Interventricular septum	11	13	(ED=6-12)
Posterior wall thickness	11	13	(ED=5-10)

LV Ejection Fraction (%)	60%	55%-80%
HR		

Maximum Velocity across valve (cm/s)

Pulmonary	83	Aortic	133

Mitral Inflow Pattern		Normal values
E/A	96/78	1-25
DT		160-200ms
PHT		
PVs:PVd		PVs>PVd



Consultant Radiologist

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ECG Analysis Result:

HRD Normal Sinus Rhythm
 213 Mild Left Axis Deviation
 *** Normal ECG ***

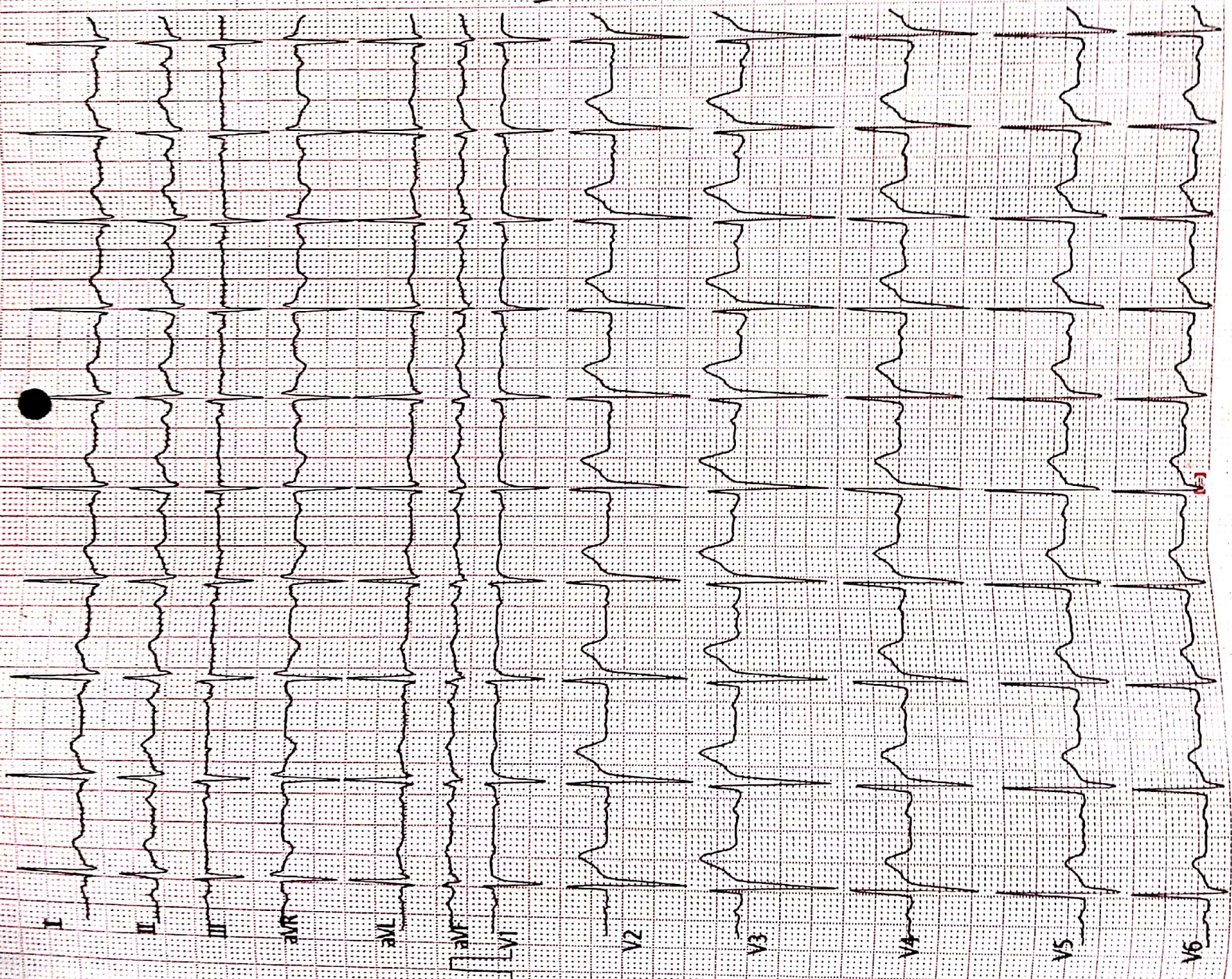
Heart Rate (BPM) : 94
 PR Int. (ms) : 157
 P/QRS/T Int. (ms) : 126 108 155
 QT/QTc Int. (ms) : 331 418
 P/QRS/T Axis (Deg.) : 31 2 39
 RV1/SV5 Amp. (mV) : 0.17 0.49
 RV5/SV1 Amp. (mV) : 1.29 0.79

Note: Unconfirmed Report. Need to Review

Technician : V2.33

ST LEVEL (mV)

I	II	III	aVR	aVL	aVF
+0.01	+0.03	+0.02	-0.02	-0.00	+0.02
V1	V2	V3	V4	V5	V6
+0.03	+0.00	+0.16	+0.11	+0.06	+0.03



MOHD HASIDU > 7551088142 M 30Y

MER-MEDICAL EXAMINATION REPORT

DATE OF EXAMINATION	13/01/2024
NAME	MOHD.WASID
AGE	30YRS / MALE
HEIGHT	167 CM
WEIGHT	81 KG
BP	124 / 75
ECG	NORMAL
X-RAY	NORMAL
PRESENT AILMENTS	NO
DETAILS OF PAST AUMENTS (IF AY)	NO
COMMENTS/ADVICE :SHE/HE IS PHYSICALLY FIT	YES

Signature With Stamp Of Medical Examiner



Mohd Wasim

30/m

13/01/2024

C/O - For eye checkup

DVAR 5/6
Tylab 6/6

NVAR N/6
N/6

Colour vision - Normal

Sharva

DR. SHARVA PANDYA
MBBS, MS (OPHTH.)
RMC : 021537 (MBBS) 007516 (MS.)
JAI DRISHTI EYE HOSPITAL
UDAIPUR (RAJ.)

चित्रकूट नगर, उदयपुर में हमारी
नेत्र चिकित्सा सेवाएं शीघ्र उपलब्ध होगी।

Cosmetology Partner :

Jai Drishti Eye Hospital, 23A, Residency Road, Opp. Equitas Bank, Sardarpura, Udaipur
जय दृष्टि आई हॉस्पिटल, 23-ए, रेजीडेन्सी रोड, एक्विटास बैंक के सामने, सरदारपुरा, उदयपुर

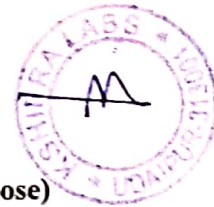

www.vibraclinica.com
9166046591

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Thanks To	: Health checkup	Date	: 13/01/2024

X-RAY CHEST (PA VIEW)

Both lung fields appear normal.
No e/o Koch's lesion or consolidation seen.
Both CP angles appear clear.
Both domes of diaphragm appear normal.
Heart size and aorta are within normal limits.
Bony thorax under vision appears normal.
Both hila appear normal.

Consultant Radiologist



(This report is not valid for any Medico-legal purpose)

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