Government of India आरत सरकार VID: 9127 3081 6006 2005 god MALE Jay Dhoot. ज्य धूरा चन्म तिथि/DOB: 31/01/2003 Dr. PIYUSH GOYAL MBBS, DMRA (Radiologist) RMC NJ.-037041



- B-14, Vidhyadhar Nagar Enclave-II, Near Axis Bank Central Spine, Vidhyadhar Nagar, Jaipur-302 023
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General Physical Examination

Date of Examination:	
Name: Tay phoot Age: Oly	15 DOB: 01/01/ 2003 Sex: Mare
Referred By: TM FTNANCTAL	
Photo ID: AADHAIR CARIS ID#: 0333	-
Ht: 170 (cm) Wt:!	SG (Kg)
Chest (Expiration): 89 (cm) Abdom	en Circumference: (cm)
Blood Pressure: Nollow mm Hg PR: Amin	RR: 18/min Temp: Alebonice
BMI 13.4	
Eye Examination: RIE-GIGNIGNES LIE-GIGNIGNES	
Other:	
On examination he/she appears physically and mentally fit:	Yes 7 No
Signature Of Examine: Name of	f Examinee: TAX b H LD 17 T
Signature Medical Examiner: PIYUSH GOYAL (Radiologist)	Medical Examiner DROPT XUSH CHONL
RMC No037041	



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Patient ID	1224449 Patient Mob No.7230940370	Registered On	22/06/2024 08:41:09
NAME	Mr. JAY DHOOT	Collected On	22/06/2024 09:29:15
Age / Sex	Male 21 Yrs 4 Mon 23 Days	Authorized On	22/06/2024 16:07:39
Ref Bv	JM FINANCIAL	Printed On	22/06/2024 16:13:36

Lab/Hosp Mr.MEDIWHEEL

HAEMOGARAM

Test Name	Value	Unit	Biological Ref Interval
JM FINANCIALS SERVICE LTD			
HAEMOGLOBIN (Hb)	16.0	g/dL	13.0 - 17.0
TOTAL LEUCOCYTE COUNT	8.50	/cumm	4.00 - 10.00
DIFFERENTIAL LEUCOCYTE COUNT			
NEUTROPHIL	66.2	%	40.0 - 80.0
LYMPHOCYTE	30.0	%	20.0 - 40.0
EOSINOPHIL	1.0	%	1.0 - 6.0
MONOCYTE	2.8	%	2.0 - 10.0
BASOPHIL	0.0	%	0.0 - 2.0
TOTAL RED BLOOD CELL COUNT (RBC)	5.08	x10^6/uL	4.50 - 5.50
HEMATOCRIT (HCT)	47.80	%:	40.00 - 50.00
MEAN CORP VOLUME (MCV)	94.0	fL	83.0 - 101.0
MEAN CORP HB (MCH)	31.5	pg	27.0 - 32.0
MEAN CORP HB CONC (MCHC)	33.4	g/dL	31.5 - 34.5
PLATELET COUNT	312	x10^3/uL	150 - 410
RDW-CV	13.8	%	11.6 - 14.0

Technologist



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HAEMATOLOGY

Test Name	Value	Unit	Biological Ref Interval
Erythrocyte Sedimentation Rate (ESR)	10	mm in 1st hr	00 - 15

The erythrocyte sedimentation rate (ESR or sed rate) is a relatively simple, inexpensive, non-specific test that has been used for many years to help detect inflammation associated with conditions such as infections, cancers, and autoimmune diseases.ESR is said to be a non-specific test because an elevated result often indicates the presence of inflammation but does not tell the health practitioner exactly where the inflammation is in the body or what is causing it. An ESR can be affected by other conditions besides inflammation. For this reason, the ESR is typically used in conjunction with other tests, such as C-reactive protein.ESR is used to help diagnose certain specific inflammatory diseases, including temporal arteritis, systemic vasculitis and polymyalgia rheumatica. (For more on these, read the article on Vasculitis.) A significantly elevated ESR is one of the main test results used to support the diagnosis. This test may also be used to monitor disease activity and response to therapy in both of the above diseases as well as

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NAME Mr. JAY DHOOT

Lab/Hosp

Age / Sex Male 21 Yrs 4 Mon 23 Days

Mr.MEDIWHEEL

Ref. By JM FINANCIAL Printed On 22/06/2024 16:13:36

(CBC): Methodology: TLC,DLC Fluorescent Flow cytometry, HB SLS method,TRBC,PCV,PLT Hydrodynamically focused Impedance. and

MCH, MCV, MCHC, MENTZER INDEX are calculated. InstrumentName: Sysmex 6 part fully automatic analyzer XN-L, Japan



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Lab/Hosp Mr.MEDIWHEEL

st Name Value Unit		Unit	Biological Ref Interval
FASTING BLOOD SUGAR (Plasma) Methord:- GLUCOSE OXIDASE/PEROXIDASE	83.1	mg/dl	70.0 - 115.0
Impaired glucose tolerance (IGT)		111 - 125 mg/dL	

Instrument Name: HORIBA CA60 Interpretation: Elevated glucose levels (hyperglycemia) may occur with diabetes, pancreatic neoplasm,

hyperthyroidism and adrenal cortical hyper-function as well as other disorders. Decreased glucose levels (hypoglycemia) may result from excessive insulin

therapy or various liver diseases.

BLOOD SUGAR PP (Plasma)
Methord:- GLUCOSE OXIDASE/PEROXIDASE

93.7 mg/dl

70.0 - 140.0

Instrument Name: HORIBA Interpretation: Elevated glucose levels (hyperglycemia) may occur with diabetes, pancreatic neoplasm, .
hyperthyroidism and adrenal cortical hyper-function as well as other disorders. Decreased glucose levels (hypoglycemia) may result from excessive insulin therapy or various liver diseases.

BLOOD UREA NITROGEN (BUN)	15.2	mg/dl	0.0 - 23.0
SERUM CREATININE Methord:- JAFFE	1.12	mg/dl	Males : 0.6-1.50 mg/dl Females : 0.6 -1.40 mg/dl
SERUM BILIRUBIN (TOTAL) Methord:- DIAZOTIZED SULFANILIC	0.88	mg/dL	Infants: 0.2-8.0 mg/dL Adult - Up to - 1.2 mg/dL
SGPT Methord:- IFCC	17.8	U/L	0.0 - 40.0

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Ref. By	JM FINANCIAL	Printed On	22/06/2024 16:13:36

ſ	Test Name	Value	Unit	Biological Ref Interval
ı	restranic	Value	Omit	Diological Rel Intel val

TEST

Lab/Hosp

BLOOD GROUP ABO

Mr.MEDIWHEEL

"B" POSITIVE

*** End of Report ***

Technologist



(ASSOCIATES OF MAXCARE DIAGNOSTICS)

B-14, Vidhyadhar Enclave-II, Near Axix Bank Central Spine, Vidhyadhar Nagar, Jaipur - 302023

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MR. JAY DHOOT	Age/Sex: 21 Y/M		
Registration Date: 22/06/2024	Ref. by: J. M. FINANCIAL		

CHEST X RAY (PA VIEW)

Rotation is noted on right side

Bilateral lung fields appear clear.

Bilateral costo-phrenic angles appear clear.

Cardiothoracic ratio is normal.

Thoracic soft tissue and skeletal system appear unremarkable.

Soft tissue shadows appear normal.

IMPRESSION: No significant abnormality is detected

DR. ROHAN GAUR

M.B.B.S, M.D (Radiodiagnosis)

RMC no. 17887

http:/ #P3 HEALTH SOLUTIONS LLP B-14, Vidhyadhar nahar , Jaipur Ref.: JM FINANCIAL 128541925462108/Mr Jay Dhoot 21Yrs/Male Vent Rate: 65 bpm; PR Interval: 132 ms; QRS Duration: P-QRS-T axis: 73-90-39- (Deg) Comments: FINDINGS: Normal Variant with 2 PAC/min Observed avR / dia.com @ RMS BCG (VESTA_v3.0.3) Test Date: 22-Jun-2024(9:24:24 A) Notch: 50Hz 0.05Hz - 35Hz Kgs/ Cms avh 5 128 ms; QT/QTc Int: 427/448 ms BP: 10mm/mV 25mm/Sec mmHg HR: 65 bpm ≾ 6 15 QRS Duration: 128 ms QT/QTc: 427/448ms P-QRS-T Axis: 73 - 90 - 39 (Deg) PR Interval: 132 ms PINIC No.: 35703

PRINC No.: 35703

Dr. NARESHAMOTORIS aresh Kumar Mohanka

Tems (P) Ltd