



PATIENT NAME: BIJU K JOHN REF. DOCTOR: DR. MEDIWHEEL

CODE/NAME & ADDRESS: CA00010147 - MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED F701A, LADO SARAI, NEW DELHI, SOUTH DELHI,

DELHI,

SOUTH DELHI 110030

8800465156

ACCESSION NO: 4036XC003701

PATIENT ID : BIJUM3105664036

CLIENT PATIENT ID: ABHA NO : AGE/SEX :57 Years Mal

DRAWN:

RECEIVED : 22/03/2024 08:11:02 REPORTED :23/03/2024 07:54:32

Test Report Status <u>Final</u> Results Biological Reference Interval Units

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

TREADMILL TEST

TREADMILL TEST TEST NOT DONE

DENTAL CHECK UP

DENTAL CHECK UP COMPLETED

OPTHAL

OPTHAL COMPLETED

PHYSICAL EXAMINATION

PHYSICAL EXAMINATION COMPLETED

PRASEEDA S NAIR BIOCHEMIST



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MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

ECG WITH REPORT

REPORT

COMPLETED

USG ABDOMEN AND PELVIS

REPORT

COMPLETED

CHEST X-RAY WITH REPORT

REPORT

COMPLETED

HAEMATOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

GLYCOSYLATED HEMOGLOBIN(HBA1C), EDTA WHOLE **BLOOD**

HBA1C 5.9 Normal : 4.0 -

5.6%.

Non-diabetic level : < 5.7%. Diabetic : >6.5%

Glycemic control goal

More stringent goal : < 6.5 %. General goal : < 7%. Less stringent goal : < 8%.

Glycemic targets in CKD :-If eGFR > 60: < 7%. If eGFR < 60 : 7 - 8.5%.

METHOD: HPLC

PRASEEDA S NAIR BIOCHEMIST

Prof.Dr.A.VIJAYALAKSHMI MBBS, MD (path)

Formerly Professor of Pathology

Reg.No-2306





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MC-6221

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Units **Test Report Status** Results <u>Final</u>

BLOOD COUNTS,EDTA WHOLE BLOOD			
HEMOGLOBIN	14.2	13.0 - 17.0	g/dL
METHOD: AUTOMATED CELL COUNTER NON-CYANIDE			
RED BLOOD CELL COUNT	4.65	4.5 - 5.5	mil/µL
METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE WHITE BLOOD CELL COUNT	6.20	4.0 - 10.0	thou/µL
METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE	0.20	4.0 - 10.0	tilou/ µL
PLATELET COUNT	181	150 - 410	thou/µL
METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE			,,
DDC AND DIATELET INDICES			
RBC AND PLATELET INDICES	40.0	40 50	0/
HEMATOCRIT	42.2	40 - 50	%
METHOD: RBC PULSE HEIGHT DETECTION MEAN CORPUSCULAR VOL	91.0	83 - 101	fL
METHOD : AUTOMATED CELL COUNTER / CALCULATED	91.0	65 - 101	16
MEAN CORPUSCULAR HGB.	30.6	27.0 - 32.0	pg
METHOD : AUTOMATED CELL COUNTER / CALCULATED			, 5
MEAN CORPUSCULAR HEMOGLOBIN	33.7	31.5 - 34.5	g/dL
CONCENTRATION			
METHOD: AUTOMATED CELL COUNTER / CALCULATED RED CELL DISTRIBUTION WIDTH	11.5 Low	11.6 - 14.0	%
METHOD : CALCULATED PARAMETER	11.5 LOW	11.6 - 14.0	70
MENTZER INDEX	19.6		
METHOD : CALCULATED PARAMETER			
WBC DIFFERENTIAL COUNT			
	63	40 00	%
SEGMENTED NEUTROPHILS METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE	63	40 - 80	70
LYMPHOCYTES	31	20 - 40	%
METHOD: AUTOMATED CELL COUNTER	~ -		-
MONOCYTES	03	2 - 10	%
EOSINOPHILS	03	1 - 6	%

PRASEEDA S NAIR

BIOCHEMIST

Prof.Dr.A.VIJAYALAKSHMI MBBS ,MD (path) **Formerly Professor of Pathology**

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METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE			
BASOPHILS	00	0 - 2	%
METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE			
ABSOLUTE NEUTROPHIL COUNT	3.91	2.0 - 7.0	thou/µL
METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE			
ABSOLUTE LYMPHOCYTE COUNT	1.92	1.0 - 3.0	thou/µL
METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE			
ABSOLUTE MONOCYTE COUNT	0.19 Low	0.2 - 1.0	thou/µL
METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE			
ABSOLUTE EOSINOPHIL COUNT	0.19	0.02 - 0.50	thou/µL
METHOD: AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE			
ABSOLUTE BASOPHIL COUNT	00 Low	0.02 - 0.10	thou/µL
NEUTROPHIL LYMPHOCYTE RATIO (NLR)	2.0		
METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE			
See See Sourier / Electricate in Eperior			

ERYTHROCYTE SEDIMENTATION RATE (ESR), EDTA BLOOD

17 High SEDIMENTATION RATE (ESR) 0 - 14

METHOD: WESTERGREN METHOD

SUGAR URINE - POST PRANDIAL

SUGAR URINE - POST PRANDIAL **NOT DETECTED** NOT DETECTED

SUGAR URINE - FASTING

SUGAR URINE - FASTING NOT DETECTED NOT DETECTED

IMMUNOHAEMATOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

ABO GROUP & RH TYPE, EDTA WHOLE BLOOD

PRASEEDA S NAIR BIOCHEMIST

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mm at 1 hr



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ABO GROUP

METHOD: COLUMN AGGLUTINATION TECHOLOGY

RH TYPE

METHOD: COLUMN AGGLUTINATION TECHOLOGY

TYPE A

POSITIVE

ABO GROUP & RH TYPE, EDTA WHOLE BLOOD-Blood group is identified by antigens and antibodies present in the blood. Antigens are protein molecules found on the surface of red blood cells. Antibodies are found in plasma. To determine blood group, red cells are mixed with different antibody solutions to give A,B,O or AB.

Disclaimer: "Please note, as the results of previous ABO and Rh group (Blood Group) for pregnant women are not available, please check with the patient records for availability of the same.'

The test is performed by both forward as well as reverse grouping methods.

BIO CHEMISTRY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

BLOOD UREA NITROGEN (BUN), SERUM

BLOOD UREA NITROGEN 11 Adult(<60 yrs): 6 to 20 mg/dL

BUN/CREAT RATIO

5 - 15 **BUN/CREAT RATIO** 11.5

CREATININE, SERUM

0.95 18 - 60 yrs: 0.9 - 1.3 mg/dL **CREATININE**

METHOD: KINETIC COLORIMETRIC

GLUCOSE, POST-PRANDIAL, PLASMA

GLUCOSE, POST-PRANDIAL, PLASMA 166 High Diabetes Mellitus : > or = 200. mg/dL

> Impaired Glucose tolerance/ Prediabetes: 140 - 199.

Hypoglycemia: < 55.

METHOD: HEXOKINASE

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BIOCHEMIST

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Test Report Status Final Results Units

GLUCOSE FASTING, FLUORIDE PLASMA

FBS (FASTING BLOOD SUGAR) 112 Diabetes Mellitus: > or = 126. mg/dL

Impaired fasting Glucose/ Prediabetes: 101 - 125. Hypoglycemia: < 55.

METHOD: HEXOKINASE

LIVER FUNCTION TEST WITH GGT

BILIRUBIN, TOTAL METHOD: DIAZO METHOD	1.08	General Range : < 1.1	mg/dL
BILIRUBIN, DIRECT METHOD: DIAZO METHOD	0.30	General Range : < 0.3	mg/dL
BILIRUBIN, INDIRECT	0.78	0.00 - 1.00	mg/dL
TOTAL PROTEIN	6.9	Ambulatory: 6.4 - 8.3 Recumbant: 6 - 7.8	g/dL
ALBUMIN	4.2	20-60yrs: 3.5 - 5.2	g/dL
GLOBULIN	2.7	2.0 - 4.1	g/dL
ALBUMIN/GLOBULIN RATIO	1.6	1.0 - 2.0	RATIO
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19	Adults: < 40	U/L
ALANINE AMINOTRANSFERASE (ALT/SGPT)	25	Adults: < 45	U/L
ALKALINE PHOSPHATASE	87	Adult(<60yrs): 40 - 130	U/L
GAMMA GLUTAMYL TRANSFERASE (GGT)	42	Adult (male) : < 60	U/L

TOTAL PROTEIN, SERUM

TOTAL PROTEIN 6.9 Ambulatory: 6.4 - 8.3 g/dL

Recumbant : 6 - 7.8

METHOD : COLORIMETRIC

PRASEEDA S NAIR BIOCHEMIST



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Test Report Status Results Units <u>Final</u>

URIC ACID, SERUM

URIC ACID 4.6 Adults: 3.4-7 mg/dL

METHOD: URICASE

BIOCHEMISTRY - LIPID

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

CHOLECTEROL	475	D : 11	
CHOLESTEROL	1/5	Desirable : < 200	mg/dL

Borderline: 200-239 High : >or= 240

METHOD: CHOD-POD

TRIGLYCERIDES 111 Normal : < 150 High : 150-199

Hypertriglyceridemia: 200-499

Very High: > 499

METHOD: GPO-PAP HDL CHOLESTEROL 47 General range: 40-60

METHOD: HOMOGENOUS DIRECT ENZYMATIC COLORIMETRIC

METHOD: HOMOGENOUS DIRECT ENZYMATIC COLORIMETRIC

mg/dL LDL CHOLESTEROL, DIRECT 121 Optimum : < 100

Above Optimum: 100-129 Borderline High: 130-159

High 189

Very High : >or=

190

NON HDL CHOLESTEROL 128 Desirable: Less than 130

Above Desirable: 130 - 159 Borderline High: 160 - 189

High: 190 - 219

Very high: > or = 220

METHOD: CALCULATED PARAMETER VERY LOW DENSITY LIPOPROTEIN 22.2 < or = 30.0

METHOD: CALCULATED PARAMETER

PRASEEDA S NAIR BIOCHEMIST



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mg/dL

mg/dL

mg/dL

mg/dL



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CHOL/HDL RATIO	3.7	3.30 - 4.40	
METHOD: CALCULATED PARAMETER			
LDL/HDL RATIO	2.6	0.5 - 3.0	
METHOD: CALCULATED PARAMETER			

SPECIALISED CHEMISTRY - HORMONE

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

THYROID PANEL, SERUM

T3 101.99 Adult: 60-181 ng/dL

METHOD: CLIA

T4 11.70 >20 yrs: 3.2-12.6 μg/dl

METHOD: CLIA

TSH 3RD GENERATION 0.410 50-80 yrs: 0.35-4.5 μΙU/mL

METHOD : CLIA

SPECIALISED CHEMISTRY - TUMOR MARKER

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

PROSTATE SPECIFIC ANTIGEN, SERUM

PROSTATE SPECIFIC ANTIGEN 0.940 Age Specific :- ng/mL

<49yrs: <2.5 50-59yrs: <3.5 60-69yrs: <4.5 >70yrs: <6.5

 $\mathsf{METHOD} : \mathsf{CLIA}$

CLINICAL PATH - URINALYSIS

MEDIWHEEL HEALTH CHECKUP ABOVE 40(M)TMT

My Dr. A. Morale

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Reg.No-2306

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PATIENT NAME: BIJU K JOHN





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NORMAL

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PHYSICAL EXAMINATION, URINE

COLOR PALE YELLOW

METHOD: MACROSCOPY

APPEARANCE CLEAR

METHOD: MACROSCOPY

CHEMICAL EXAMINATION, URINE

8.0 High 4.8 - 7.4 PH METHOD: DIPSTICK

1.015 - 1.030 SPECIFIC GRAVITY 1.015

METHOD: PKA CHANGE IN RELATION TO IONIC CONCENTRATION

NOT DETECTED PROTEIN NOT DETECTED

METHOD: PROTEIN ERROR OF INDICATORS WITH REFLECTANCE

GLUCOSE NOT DETECTED NOT DETECTED

METHOD: GOD-POD METHOD

KETONES NOT DETECTED NOT DETECTED

METHOD: NITROPRUSSIDE REACTION BII IRUBIN

NOT DETECTED NOT DETECTED METHOD: AZO COUPLING METHOD

UROBILINOGEN METHOD: EHRLICH REACTION REFLECTANCE

MICROSCOPIC EXAMINATION, URINE

/HPF RED BLOOD CELLS NOT DETECTED NOT DETECTED **DETECTED WBC** NOT DETECTED /HPF

NORMAL

(OCCASIONAL) METHOD: LIGHT MICROSCOPY

EPITHELIAL CELLS NOT DETECTED NOT DETECTED

NOT DETECTED **CASTS**

NOT DETECTED **CRYSTALS BACTERIA NOT DETECTED** NOT DETECTED

YEAST NOT DETECTED NOT DETECTED

METHOD: LIGHT MICROSCOPY

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End Of Report
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YOUR LAB PARTNER SINCE 1983

MEDICAL EXAMINATION REPORT (MER)

If the examinee is suffering from an acute life threatening situation, you may be obliged to disclose the result of the medical examination to the examinee.

	Name of the examinee	G. :	Mr./Mts. Arts. Beju K John	
2.	Mark of Identification		(Mole/Scar/any other (specify location)):	
⁻ 3.	Age/Date of Birth	:	31/05/1966 Gender: FM	
4.	Photo ID Checked	:	(Passport/Election Card/PAN Card/Driving Licence/Company ID)	

PHYSICAL DETAILS:

a. Height	and the second of the second o		c. Girth of Abdomen! 21 (cms) Systolic 160 Diastolic 100		
		1st Reading	160	100	
	Harmon little of z	2 nd Reading	150	100	

FAMILY HISTORY:

Relation	Age if Living	Health Status	If deceased, age at the time and cause
Father	90	Weak but sto	ble.
Mother	83	Weak but Sto	ble
Brother(s)	60	Healthy	
Sister(s)	53	Healton	

HARITS & ADDICTIONS: Does the examinee consume any of the following?

Tobacco in any form	Sedative	Alcohol
No	No	Occasionally

PERSONAL HISTORY

- a. Are you presently in good health and entirely free from any mental or Physical impairment or deformity. If No, please attach details.
- b. Have you undergone/been advised any surgical procedure? Thysoclomy
- c. During the last 5 years have you been medically examined, received any advice or treatment or Y/N admitted to any hospital?
- d. Have you lost or gained weight in past 12 months? Y/N

XIN

Y/N

XIN

Have you ever suffered from any of the following?

- · Psychological Disorders or any kind of disorders of the Nervous System? YIN
- · Any disorders of Respiratory system? Y/N
- · Any Cardiac or Circulatory Disorders? XIN
- X/N · Enlarged glands or any form of Cancer/Tumour? X/N
- · Any Musculoskeletal disorder?

- Any disorder of Gastrointestinal System?
- · Unexplained recurrent or persistent fever, and/or weight loss
- · Have you been tested for HIV/HBsAg / HCV before? If yes attach reports
- Are you presently taking medication of any kind?

Thywnom, Inhalu

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• Any disorders of Urinary System?	XN	 Any disorder Mouth & Ski 	of the Eyes, Ears, Nos	e, Throat or
FOR FEMALE CANDIDATES ONLY				
a. Is there any history of diseases of breast/geni organs?	tal Y/N	d. Do you have abortion or M	any history of miscarri	age/
b. Is there any history of abnormal PAP Smear/Mammogram/USG of Pelvis or any of tests? (If yes attach reports)	ther Y/N	during pregn	omen, were there any ancy such as gestational etc	
c. Do you suspect any disease of Uterus, Cervix or Ovaries?	Y/N	f. Are you now	pregnant? If yes, how	many months?
CONFIDENTAIL COMMENTS FROM MED	ICAL EXA	AMINER		
➤ Was the examinee co-operative?				Y/N
Is there anything about the examine's health, his/her job?	lifestyle tha	at might affect hir	n/her in the near future	with regard to Y/N
> Are there any points on which you suggest fu	rther inform	nation be obtained	1?	Y/N
Based on your clinical impression, please pro	vide your s	uggestions and re	commendations below:	
				•••••••
➤ Do you think he/she is MEDICALLY FIT or	UNFIT for	employment.		
		14-12/4		
		FIT		
MEDICAL EXAMINER'S DECLARATION				
I hereby confirm that I have examined the above in above are true and correct to the best of my knowl	ndividual af edge.	fter verification of	his/her identity and the	e findings stated
Name & Signature of the Medical Examiner :	Dr. Aust	n Vayhees	And the thought with	
Seal of Medical Examiner :		stin Varghees MBBS Reg. No:77017	Ganghi Nagar Kottayam 686 008	
Name & Seal of DDRC SRL Branch :			3 000	
KIN ISSA I			*	
Date & Time :				
				C

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Dr. RAJENDRAN'S CARE & CURE DENTAL CLINIC

KHI-2653/13

OTHALATHUMOOTTIL COMMERCIAL COMPLEX (FIRST FLOOR)
SAMKRANTHI, KOTTAYAM - 686 016, KERALA. Mob: 8891189933, 9446026310

DATE. 22/.3/.24.	
OP NONAME	
C/O	
D/O	
IND FOR	
R _X	61 1
The patient named Biju	k John of age
chelle up. On Examiner ton	present int 15.
chelle up. On Examinet ion present 131- 6 1 6, now	
A D A A A A A A A A A A A A A A A A A A	
pt. is advised to undergo	restoration along
Pt. is advised	
with scaley process	
Examination fee: 1001-	
Examinar 10	Dr. Seena
	Reano: 30819



LABORATORY SERVICES



OPHTHALMOLOGY REPORT

ACCESSION	NO: 4036	XC003701
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This is to certify that I have examined

MR/MS BLU- K. JOHN Aged 571M and

His / her visual standard is as follows.

Acuity of Vision

For Far

R. 6/8

L....6/8.....

For Near

R.....N8

L.......8......

With Spees RI > N6

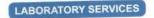
Colour Vision

NORMAL

DATE 22/03/2024

Ganghi Nagar By Kottayam 686 008

OPTOMETRIST





YOUR LAB PARTNER SINCE 1983

ECG REPORT

ACCESSION NO : 4036XC003701

NAME

:BIJU K JOHN

AGE

: 57

SEX

:MALE

DATE

: 22/03/2024

COMPANY

: MEDIWHEEL

RATE

: 77 BPM

RHYTHM

: NORMAL SINUS RHYTHM

P. WAVE

: NORMAL

P-R INTERVAL

: 143 MS

Q,R,S,T. WAVES

: NORMAL

AXIS

: NORMAL

ARRHYTHMIAS

: NIL

QT INTERVAL

: 341 MS

OTHERS

: NIL

OPINION

: NORMAL ECG

Dr. Austin Varghees

TCMC Reg. No:77017

686 008







X - RAY CHEST - PA

ACCESSION NO

: 4036XC003701

NAME

: BIJU K JOHN

AGE

: 57

SEX

: MALE

DATE

: 22.03.2024

COMPANY

: MEDIWHEEL

EXPOSURE

: GOOD

POSITIONING

: CENTRAL

SOFT TISSUES

NORMAL

LUNG FIELDS

: NORMAL

HEART SHADOW

: NORMAL

CARDIOPHRENIC ANGLE

: NO OBLITERATION

COSTOPHRENIC ANGLE

: NO OBLITERATION

HILUM

: NORMAL

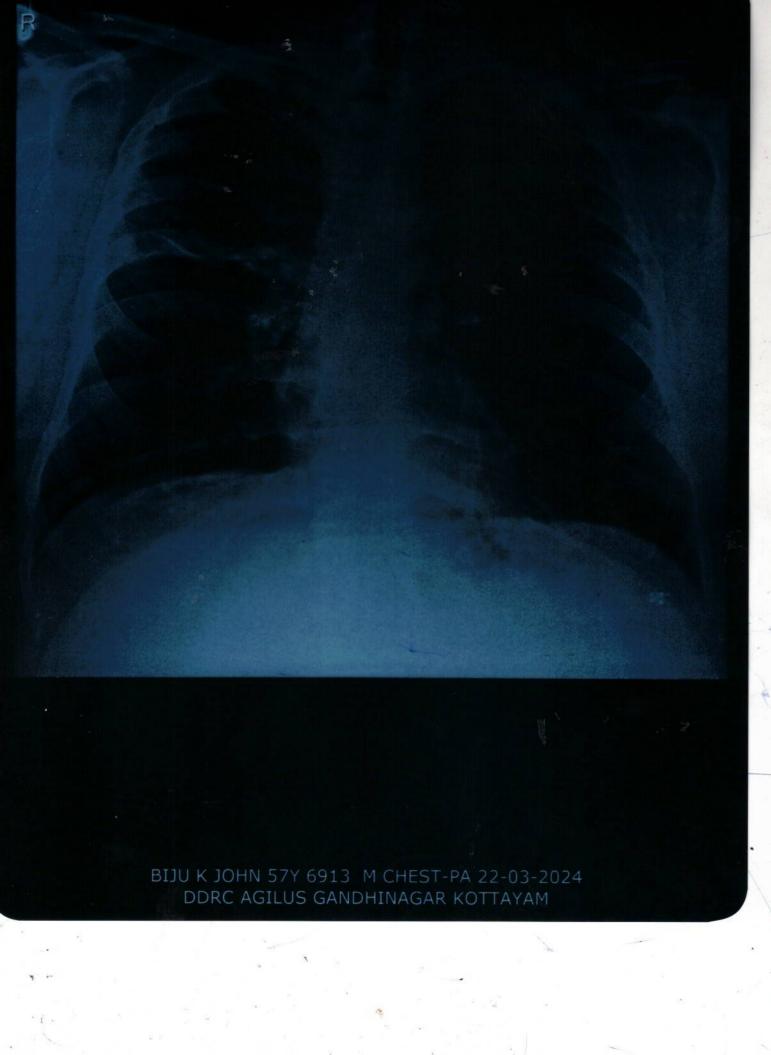
OTHERS

: NIL

OPINION

: NORMAL CHEST X- RAY

Dr. Austin Varghees
MBBS
TCMC Reg. No:77017







YOUR LAB PARTNER SINCE 1983

Name: BIJU K JOHN Age/Sex: 57 yrs/M

Accession No: 4036XC003701

Report Date: 22.03.2024 Ref.by: Mediwheel

USG ABDOMEN & PELVIS

OBSERVATIONS:

Liver: Enlarged in size (18.8 cm). Shows increased parenchymal

echotexture. No focal parenchymal lesion noted. The biliary radicals

appear normal. Portal vein is normal.

Gall bladder:

Distended. No calculus seen. No e/o of any wall thickening / edema. No

e/o any pericholecystic collection.

CBD:

Not dilated.

Spleen:

Normal in size and echotexture. No focal lesion.

Pancreas:

Head and body appear normal. Tail obscured by bowel gas. No focal

lesion. No calcification or duct dilatation noted.

Kidneys:

Right kidney measures 9.8 x 3.8 cm.

Normal in position & size. Cortical echogenicity is normal. There is good cortico-medullary differentiation. No calculus or mass lesion

seen. No hydronephrosis.

Left kidney measures 10.7 x 5.0 cm.

Normal in position & size. Cortical echogenicity is normal. There is good cortico-medullary differentiation. No calculus or mass lesion

seen. No hydronephrosis.

Ureters:

Not dilated.

Urinary Bladder: Distended, No luminal or wall abnormality noted.

Prostate:

Normal in size, volume 14 cc. Shows homogenous parenchymal

echotexture. No evidence of any mass lesion.

Others:

No free fluid in the peritoneal cavity.

IMPRESSION:

> Hepatomegaly with grade II fatty infiltration.

Dr. JACOB PAUL, MBBS, DMRD (DNB)

Ganghi Nagai Kottayam

686 008

Radiologist

Note: This is radiological opinion and not the final diagnosis. Ultrasound is limited by patient adiposity, bowel gas and correlate clinically and investigate further as needed.

Patient >

ID Name Birth Date Gender

Exam

94 Accession #
BIJU Exam Date
Description
Other Sonographer

22032024









LABORATORY SERVICES



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Ganghi Nagar Kottayam 686 008