

Hosp. Reg. No.: TMC - Zone -386

Ramestivas Wankhede 34 yrs 1 mare

24/02/2024

No fresh complaints. No comosbidities No PIH. NO S1H.

FIH- Mother - HTN father - healthy

H+-173 cm W+-84199 BMI- 28.1181m2 (overweight

BP- 130/80 mmtg 8- 63/min 310, 98%.

Pt is frand can returne his normal duties

2D Echo

Vagar.

consult with physician for blood changes cholesteral, TT, VIDL, incorposed.



S-1, Vedant Complex. Vartak Nagar, Thane (W) 400 606







OPTHAL CHECK UP SCREENING

NAME OF EMPLOYEE RAMESHWAR WANKHEDE

AGE

34

DATE - 24.02.2024

Spects: Without Glasses

	RT Eye	Lt Eye
NEAR	N/6	N/6
DISTANT	6/6	6/6
Color Blind Test	NORMAL	

SIDDHIVINAYAK HOSPITALS



Siddhivinayak Hospital



Imaging Department Sonography | Colour Doppler | 3D / 4D USG

Name – Mr. Rameshwar Wankhede	Age - 34 Y/M
Ref by Dr Siddhivinayak hospital	Date - 24/02/2024

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

No significant abnormality seen.

Adv.: Clinical and lab correlation.

DR. AMOL BENDRE

MBBS; DMRE

CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.







Siddhivinayak Hospital



Imaging Department Sonography | Colour Doppler | 3D / 4D USG

Name - Mr. Rameshwar Wankhede	Age - 34 Y/M
Ref by Dr Siddhivinayak Hospital	Date - 24/02/2024

USG ABDOMEN & PELVIS

FINDINGS: -

The **liver** dimension is normal in size. It appears normal in morphology with **raised echogenicity**. No evidence of intrahepatic ductal dilatation.

The GB-gallbladder is distended normally. Wall thickness is normal.

The CBD- common bile duct is normal. The portal vein is normal.

The pancreas appears normal in morphology.

The spleen is normal in size ($9.9\;cm$) and morphology.

Both kidneys demonstrate normal morphology.

Both kidneys show normal cortical echogenicity.

The right kidney measures 11.6 x 5.0 cm.

The left kidney measures $11.2 \times 6.0 \text{ cm}$.

Urinary bladder: -normally distended. Wall thickness - normal.

Prostate is normal in size and morphology Size: 18.1 gms.

No free fluid is seen.

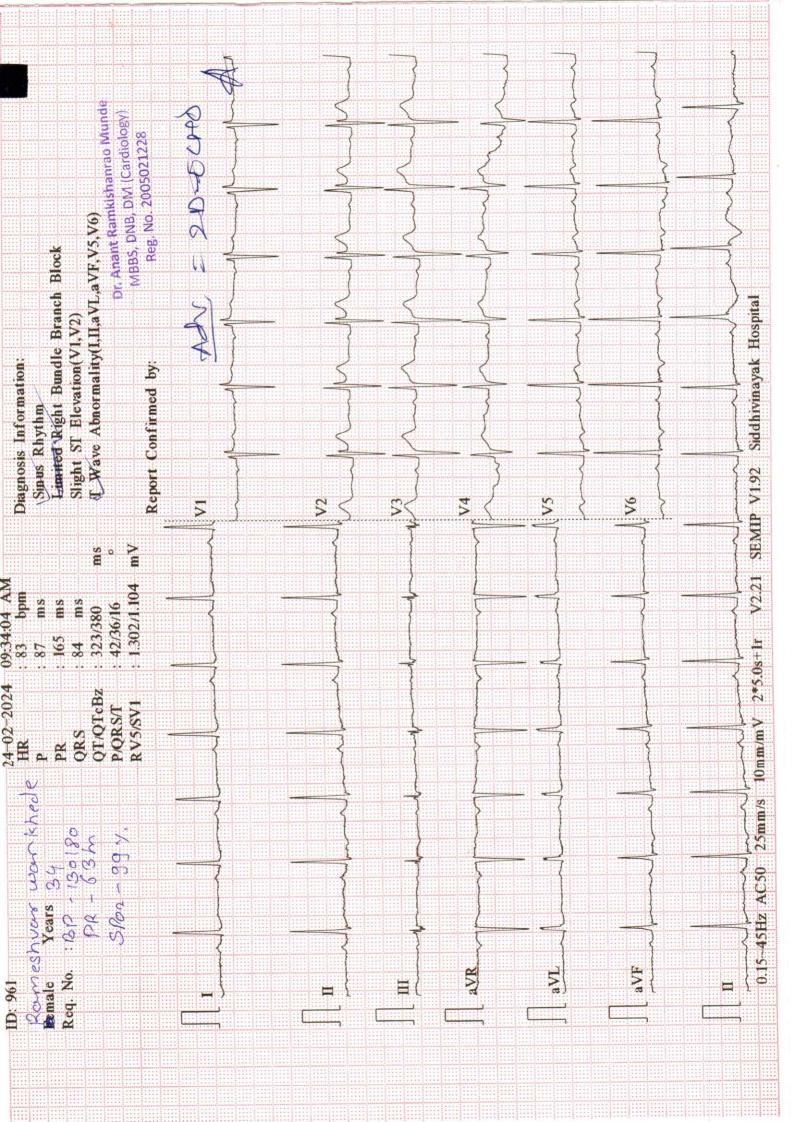
IMPRESSION:-

· Fatty liver (Grade I).

DR. AMOL BENDRE
MBBS; DMRE
CONSULTANT RADIOLOGIST









Siddhivinayak Hospital



Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

ECHOCARDIOGRAM

NAME	MR. RAMESHWAR WANKHEDE	
AGE/SEX	34 YRS/M	
REFERRED BY	SIDDHIVINAYAK HOSPITAL	
DATE OF EXAMINATION	24/02/2024	

2D/M-MODE ECHOCARDIOGRAPHY

VALVES:	CHAMBERS:
MITRAL VALVE:	LEFT ATRIUM: Normal
AML: NormalPML: Normal	Left atrial appendage: Normal
 Sub-valvular deformity: Absent 	LEFT VENTRICLE: Normal
AORTIC VALVE: Normal No. of cusps: 3	RWMA: NoContraction: Normal
PULMONARY VALVE: Normal	RIGHT ATRIUM: Normal
TRICUSPID VALVE: Normal	RIGHT VENTRICLE: Normal RWMA: No Contraction: Normal
GREAT VESSELS: • AORTA: Normal	SEPTAE:
PULMONARY ARTERY: Normal	IAS: Intact IVS: Intact
ORONARIES: Proximal coronaries normal	VENACAVAE:
CORONARY SINUS: Normal	SVC: Normal IVC: Normal and collapsing >20% with respiration
PULMONARY VEINS: Normal	PERICARDIUM: Normal

MEASUREMENTS:

AORT	A	LEFT VENTR	ICLE STUDY	RIGHT VENTR	SICLE STUDY
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	21 mm	Left atrium	36 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	40.8 mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	25.6 mm	RVEF	9/0
Ascending aorta	mm	IVSd	9.3 mm	TAPSE	
Arch of aorta	mm	LVPWd	9.3 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	66 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	13,0 mm





COLOR - FLOW & DOPPLER ECHOCARDIOGRAPHY

NAME	MR. RAMESHWAR WANKHEDE	
AGE/SEX	34 YRS/M	
REFERRED BY	SIDDHIVINAYAK HOSPITAL	
DATE OF EXAMINATION	24 /02/2024	

FLOW VELOCITY ()	MITRAL	TRICUSPID	AORTIC	PULMONARY
FLOW VELOCITY (m/s)			1.41	
PPG (mmHg)			1.41	1.19
MPG (mmHg)				
VALVE AREA (cm²)				
DVI (ms)				
PR END DIASTOLIC VELOCITY (m/s)				
ACCELERATION/				
DECELERATION TIME (ms)				_
PHT (ms)				
VENA CONTRACTA (mm)				
REGURGITATION				
		TRJV = m/s		
		PASP= mmHg		
E/A	1.4			
E/E'				
	7.2			

FINAL IMPRESSION: NORMAL STUDY

- No RWMA
- Normal LV systolic function (LVEF 66 %)
- Good RV systolic function
- Normal diastolic function
- All cardiac valves are normal
- All cardiac chambers are normal
- IAS/IVS intact
- No pericardial effusion/ clot/vegetations

A	n	VI	0	E.	Ni	
(1)	v	VΙ	•	10.0	NI	

ECHOCARDIOGRAPHER:

Dr. ANANT MUNDE

DNB, DM (CARDIOLOGY)

INTERVENTIONAL CARDIOLOGIST

Dr. Anant Ramkishanrao Munde IMBBS, DNB, DM (Cardiology) Reg. No. 2005021228





. 24/2/2024 10:17 am Lab ID. Received On : 184736

Reported On : 24/2/2024 6:04 pm Age/Sex : 34 Years / Male

Report Status : FINAL : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

*LIPID PROFILE

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE,ESTERASE,PEROXIDA SE)	267.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	42.0	mg/dL	Major risk factor for heart :<30 mg/dl. Negative risk factor for heart disease: >=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	251.4	mg/dL	Desirable level : <161 mg/dl. High :>= 161 - 199 mg/dl. Borderline High :200 - 499 mg/dl. Very high :>499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	50	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	175	mg/dL	Optimal: <100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High: 160 - 189mg/dl. Very high: >= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	4.17		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	6.36		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

Priyanka_Deshmukh

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

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COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
HEMOGLOBIN	13.0	gm/dl	13 - 18	
HEMATOCRIT (PCV)	39.0	%	42 - 52	
RBC COUNT	4.65	x10^6/uL	4.70 - 6.50	
MCV	84	fl	80 - 96	
MCH	28.0	pg	27 - 33	
MCHC	33	g/dl	33 - 36	
RDW-CV	14.6	%	11.5 - 14.5	
TOTAL LEUCOCYTE COUNT	5910	/cumm	4000 - 11000	
DIFFERENTIAL COUNT				
NEUTROPHILS	48	%	40 - 80	
LYMPHOCYTES	35	%	20 - 40	
EOSINOPHILS	08	%	0 - 6	
MONOCYTES	09	%	2 - 10	
BASOPHILS	00	%	0 - 1	
PLATELET COUNT	358000	/ cumm	150000 - 450000	
MPV	9.9	fl	6.5 - 11.5	
PDW	15.8	%	9.0 - 17.0	
PCT	0.350	%	0.200 - 0.500	
RBC MORPHOLOGY	Normocytic Normocl	hromic		
WBC MORPHOLOGY	Mild Eosinophilia			
PLATELETS ON SMEAR	Adequate			
Mathad , FDTA Whala Blood Toota	dana an Automated Civ Da	ort Call Countar DDC	and Distalat sount by	

Method: EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method). Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

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URINE ROUTINE EXAMINATION

TEST NAME UNIT REFERENCE RANGE **RESULTS**

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION VOLUME

COLOUR Pale Yellow Pale Yellow

APPEARANCE Clear Clear

20ml

CHEMICAL EXAMINATION

REACTION Acidic Acidic

(methyl red and Bromothymol blue indicator)

1.005 - 1.022 SP. GRAVITY 1.005

(Bromothymol blue indicator)

PROTEIN Absent Absent

(Protein error of PH indicator)

BLOOD Absent Absent

(Peroxidase Method)

SUGAR Absent Absent

(GOD/POD)

KETONES Absent Absent

(Acetoacetic acid)

BILE SALT & PIGMENT Absent Absent

(Diazonium Salt)

UROBILINOGEN Normal Normal

(Red azodye)

LEUKOCYTES Absent Absent

(pyrrole amino acid ester diazonium salt)

Negative

(Diazonium compound With tetrahydrobenzo quinolin 3-phenol)

MICROSCOPIC EXAMINATION

RED BLOOD CELLS Absent / HPF Absent **PUS CELLS** 1-2 / HPF 0 - 5 **EPITHELIAL** 0-2 / HPF 0 - 5

CASTS Absent

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Name : Mr. RAMESHWAR WANKHEDE (A) **Collected On** : 24/2/2024 10:07 am

. 24/2/2024 10:17 am Lab ID. Received On : 184736

: 24/2/2024 6:04 pm Reported On Age/Sex : 34 Years / Male

Report Status : FINAL : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		
REMARK	Result relates to sample tested. Kindly correlate with clinical findings.		

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT --

Checked By

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Lab ID. : 184736

Reported On : 24/2/2024 6:04 pm Age/Sex : 34 Years / Male

Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status : FINAL

Received On

. 24/2/2024 10:17 am

IMMUNO ASSAY

TEST NAME		RESULTS		UNIT	REFERENCE RANGE	
TFT (THYROID	FUNCTION T	EST)				
SPACE				Space	-	
SPECIMEN		Serum				
T3		191.7		ng/dl	84.63 - 201.8	
T4		10.93		μg/dl	5.13 - 14.06	
TSH		2.42		μIU/ml	0.270 - 4.20	
T3 (Triido Thyronine)		T4 (Thyroxine)		TSH(Thyroid stimulating		
hormone)				-		
AGE	RANGE	AGE	RANGES	AGE	RANGES	
1-30 days	100-740	1-14 Days	11.8-22.6	0-14 D	ays 1.0-39	
1-11 months	105-245	1-2 weeks	9.9-16.6	2 wks -	5 months 1.7-9.1	
1-5 yrs	105-269	1-4 months	7.2-14.4	6 mon	ths-20 yrs 0.7-6.4	
6-10 yrs	94-241	4 -12 months	7.8-16.5	Pregna	ancy	
11-15 yrs	82-213	1-5 yrs	7.3-15.0	1st Tr	imester	
0.1-2.5						
15-20 yrs	80-210	5-10 yrs	6.4-13.3	2nd T	rimester	
0.20-3.0						
		11-15 yrs	5.6-11.7	3rd 7	rimester	
0.30-3.0						

0.30 - 3.0

INTERPRETATION:

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

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: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Name : Mr. RAMESHWAR WANKHEDE (A) **Collected On** : 24/2/2024 10:07 am

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. 24/2/2024 10:17 am Received On

Reported On : 24/2/2024 6:04 pm

Age/Sex : 34 Years / Male

Report Status : FINAL

HAEMATOLOGY

UNIT REFERENCE RANGE TEST NAME **RESULTS**

BLOOD GROUP

Ref By

SPECIMEN WHOLE BLOOD EDTA & SERUM

* ABO GROUP 'B"

RH FACTOR **POSITIVE**

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)

Result relates to sample tested, Kindly correlate with clinical findings.

---- END OF REPORT ----

Checked By

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: Mr. RAMESHWAR WANKHEDE (A) Name

: 34 Years

Collected On

: 24/2/2024 10:07 am

Lab ID.

: 184736

Received On

. 24/2/2024 10:17 am

Age/Sex

/ Male

Reported On

: 24/2/2024 6:04 pm

Ref By

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status : FINAL

*RENAL FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE		
BLOOD UREA	21.3	mg/dL	19 - 45		
(Urease UV GLDH Kinetic)					
BLOOD UREA NITROGEN	9.95	mg/dL	5 - 20		
(Calculated)					
S. CREATININE	0.67	mg/dL	0.6 - 1.4		
(Enzymatic)					
S. URIC ACID	7.1	mg/dL	3.5 - 7.2		
(Uricase)					
S. SODIUM	142.1	mEq/L	137 - 145		
(ISE Direct Method)					
S. POTASSIUM	4.0	mEq/L	3.5 - 5.1		
(ISE Direct Method)	100.0	- "	00 440		
S. CHLORIDE	100.0	mEq/L	98 - 110		
(ISE Direct Method) S. PHOSPHORUS	3.76	∞ a /dl	2.5 - 4.5		
	3.76	mg/dL	2.5 - 4.5		
(Ammonium Molybdate) S. CALCIUM	10.2	mg/dL	8.6 - 10.2		
(Arsenazo III)	10.2	mg/ac	0.0 10.2		
PROTEIN	6.61	g/dl	6.4 - 8.3		
(Biuret)		3/			
S. ALBUMIN	4.08	g/dl	3.2 - 4.6		
(BGC)		5.			
S.GLOBULIN	2.53	g/dl	1.9 - 3.5		
(Calculated)					
A/G RATIO	1.61		0 - 2		
calculated					
NOTE	BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.				

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

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. 24/2/2024 10:17 am Lab ID. Received On 184736

Reported On : 24/2/2024 6:04 pm Age/Sex : 34 Years / Male

Report Status : FINAL : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

Peripheral smear examination

TEST NAME RESULTS

SPECIMEN RECEIVED WHOLE BLOOD EDTA **RBC** Normocytic, Normochromic

WBC Total leukocytes count is normal on smear.

Eosinophil count are increased on smear.

NEUTROPHILS:48% LYMPHOCYTES:35% **EOSINOPHILS:08%** MONOCYTES:09% BASOPHILS :00% Adequate on smear.

HEMOPARASITE No parasites seen.

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

PLATELET

Priyanka Deshmukh

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/ Male

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: 24/2/2024 6:04 pm

Ref By

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status : FINAL

LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
TOTAL BILLIRUBIN	0.39	mg/dL	0.1 - 1.2	
(Method-Diazo)				
DIRECT BILLIRUBIN	0.19	mg/dL	0.0 - 0.4	
(Method-Diazo)				
INDIRECT BILLIRUBIN	0.20	mg/dL	0 - 0.8	
Calculated				
SGOT(AST)	16.1	U/L	0 - 37	
(UV without PSP)				
SGPT(ALT)	25.6	U/L	UP to 40	
UV Kinetic Without PLP (P-L-P)				
ALKALINE PHOSPHATASE	75.0	U/L	53 - 128	
(Method-ALP-AMP)				
S. PROTIEN	6.61	g/dl	6.4 - 8.3	
(Method-Biuret)				
S. ALBUMIN	4.08	g/dl	3.5 - 5.2	
(Method-BCG)				
S. GLOBULIN	2.53	g/dl	1.90 - 3.50	
Calculated				
A/G RATIO	1.61		0 - 2	
Calculated				

Result relates to sample tested, Kindly correlate with clinical findings.

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Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / **Report Status** : FINAL

HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
<u>ESR</u>				
ESR	25	mm/1hr.	0 - 20	

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

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BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD GLUCOSE FASTING & PP			
BLOOD GLUCOSE FASTING	103.8	mg/dL	70 - 110
BLOOD GLUCOSE PP	133.6	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

- 1. Fasting is required (Except for water) for 8-10 hours before collection for fasting speciman. Last dinner should consist of bland diet.
- 2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

INTERPRETATION

- Normal glucose tolerance: 70-110 mg/dl

- Impaired Fasting glucose (IFG): 110-125 mg/dl

- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance: 70-139 mg/dl - Impaired glucose tolerance: 140-199 mg/dl

- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin > 6.5%

***Any positive criteria should be tested on subsequent day with same or other criteria.

GAMMA GT 72.0 U/L 13 - 109

GLYCOCELATED HEMOGLOBIN (HBA1C)

HBA1C (GLYCOSALATED 6.6 Hb A1c HAEMOGLOBIN) > 8 Action suggested < 7 Goal < 6 Non - diabetic level AVERAGE BLOOD GLUCOSE (A. B. NON - DIABETIC: <=5.6 142.7 mg/dL PRE - DIABETIC: 5.7 - 6.4 G.)

DIABETIC: >6.5 **METHOD** Particle Enhanced Immunoturbidimetry

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BIOCHEMISTRY

UNIT REFERENCE RANGE TEST NAME **RESULTS**

HbA1c: Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c: Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

Result relates to sample tested, Kindly correlate with clinical findings.

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