

Patient Name : **MR. AKSHAY JAIN**
Patient ID : 63212
Age / Sex : 36 years / Male
Referred by : MEDIWHEEL
Bill ID : 107093

Collected : Oct 19, 2024, 12:53 p.m.
Reported : Oct 19, 2024, 07:12 p.m.
Sample ID :



Test Description	Results	Units	Biological Reference Range
TOTAL THYROXINE (T4)			
Sample Type : Serum			
Total Thyroxine (T4) [CLIA]	69.1	ng/ml	52 - 127

****END OF REPORT****



Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

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THYROID STIMULATING HORMONE (TSH)

Sample Type : Serum

Thyroid Stimulative Hormone (TSH) [CLIA]	2.01	μIU/mL	0.3 - 4.5 1st trimester - 0.1 - 2.5μIU/mL 2nd trimester - 0.2 - 3μIU/mL 3rd trimester - 0.3 - 3μIU/mL
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Clinical Significance :-

1. Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night.
2. Useful for: Screening for thyroid dysfunction and detecting mild (subclinical), as well as overt, primary hypo- or hyperthyroidism in ambulatory patients.
3. Monitoring patients on thyroid replacement therapy.
4. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine suppression therapy.
5. Prediction of thyrotropin-releasing hormone-stimulated TSH response.

END OF REPORT



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TOTAL TRIIODOTHYRONINE (T3)

Sample Type : Serum

TotalTriiodothyronine (T3) [CLIA]	1.35	ng/mL	0.69 - 2.15
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****END OF REPORT****

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Consultant Pathologist
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Test Description	Results	Units	Biological Reference Range
LIVER FUNCTION TEST			
Sample Type : Serum			
TOTAL BILIRUBIN [DIAZO]	0.53	mg/dl	0.3-1.3 mg/dl
BILIRUBIN-DIRECT [DIAZO]	0.21	mg/dl	0.1-0.4 mg/dl
BILLIRUBIN-INDIRECT [CALCULATED]	0.32	mg/dl	0.1-0.9 mg/dl
S.G.O.T. (AST) [IFCC without Pyridoxal Phosphate]	15.1	IU/L	5-40 IU/L
S.G.P.T.(ALT) [IFCC without Pyridoxal Phosphate]	7.8	IU/L	5-40 IU/L
ALKALINE PHOSPHATASE [Amino Methyl Propanol (AMP)]	74	IU/L	44-147 IU/L
TOTAL PROTEINS [BIURET]	6.41	IU/L	6.0 - 8.5g/dL
ALBUMIN [BROMO CRESOL GREEN (BCG)]	4.35	g/dl	3.5-5.0 g/dl
GLOBULIN [CALCULATED]	2.06	gm%	2.3-3.5 gm%
ALBUMIN/GLOBULIN RATIO [CALCULATED]	2.11		
Technique :	Fully Automated Biochemistry Analyser ERBA EM-200		

END OF REPORT



Dr. Sudhamani S. MD
Consultant Pathologist
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SR. URIC ACID

Sample Type : Serum

Uric Acid [Uricase - POD]	4.1	mg/dl	3.6 - 7.7
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200.

****END OF REPORT****

Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

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LIPID PROFILE

Sample Type : Serum

TOTAL CHOLESTEROL
[CHOD-PAP]

186

mg/dL

Desirable : <200 mg/dl
Borderline : 200 - 239mg/dl
High : >240 mg/dlTRIGLYCERIDES
[Glycerol Phosphate Oxidase]

72.7

mg/dL

Desirable : <150 mg/dl
Borderline : 150 - 199mg/dl
High : >200mg/dl

HDL CHOLESTEROL [Direct]

34.1

mg/dL

Desirable : >40 mg/dl
Borderline Risk : 35 mg/dl
High Risk : <30 mg/dl

LDL CHOLESTEROL [Calculated]

137.36

mg/dL

Desirable : <100 mg/dl
Borderline : 130 - 160mg/dl
High : >160mg/dlVLDL Cholesterol
[Calculated]

14.54

mg/dL

Desirable : <26 mg/dl
Borderline : >30 mg/dlTotal Chol / HDL Chol Ratio
[Calculated]**5.45**

mg/dL

Desirable : <5 %

LDL / HDL Ratio
[Calculated]**4.03**

1.00 - 3.55

NON-HDL CHOLESTEROL
[Calculated]**151.90**

mg/dL

Desirable : <130 mg/dl
Borderline : 160 - 189 mg/dl
High : >220 mg/dl**Technique:**

Fully Automated Biochemistry Analyser ERBA EM-200.

****END OF REPORT****

Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

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CREATININE

Sample Type : Serum

Creatinine

0.63

mg/dl

0.40 - 1.40

[Enzymatic]

Estimated GFR

126.42

ml/min/1.73sq m

Normal: >90

[Calculated]

Mild Decrease : 60-89

Mild Moderate Decrease : 45-59

Moderate to Severe Decrease :
30-44

Severe Decrease ; 15-29

Kidney Failure : <15

Formula

Estimated GFR Calculate By CKD-EPI Formula.

Technique :-

Done On Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT****

Dr. Sudhamani S. MD
Consultant Pathologist
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BLOOD UREA LEVEL (BUL)

Sample Type : Serum

Urea	16.9	mg/dl	10 - 40
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[Urease - GLDH]

Bun	7.89	mg/dl	6 - 21
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[Calculated]

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT****

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COMPLETE BLOOD COUNT

Sample Type : EDTA / Whole Blood

Hemoglobin	12.6	g/dl	13.0 - 17.0
RBC COUNT	4.79	Millions/c	4.5 - 5.5
PCV(Hematocrit)	38.4	%	40.0 - 50.0
Mean Cell Volume(MCV) [calculated]	83.6	fl	80.0 - 100.0
Mean Cell Hemoglobin(MCH) [calculated]	26.4	pg	27.0 - 33.0
Mean Cell Hb Conc(MCHC) [calculated]	31.6	g/dl	32 - 36
RDW	13.8	%	11.50 - 14.50
Total Leucocytes (WBC) Count	5600	/cumm	4000-11000

DIFFERENTIAL COUNT

Neutrophils	55.5	%	40 - 70
Lymphocytes	37.2	%	20 - 50
Eosionphils	1	%	01 - 06
Monocytes	5.9	%	00 - 08
Basophils [calculated]	0.4	%	00-01

SMEAR STUDY

RBC Morphology	Hypochromia (+)		
WBC Morphology	No E/o Toxic granules seen		
Platelets On Smear	Adequate on Smear		
Platelet Count	285000	/cumm	150000 - 450000
MPV	11.4	fL	6.5 - 10.0

Comments :-

Method:-

HB:-Colorimetric, Total WBC:-Impedance/Flow Cytometry, HCT, MCV, MCH, MCHC, RDW-CV:-Calculate, Diff. Count: Flow Cytometry / Manual Stained Smear Microscopy, RBC: Impedance, Platelets : Impedance Method.

Technique :-

Fully Automated 5 part Diff. Cell Counter .

All Test Results are subjected to stringent international External and Internal Quality Control Protocols

****END OF REPORT****


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Test Description	Results	Units	Biological Reference Range
<u>GLYCOCYLATED HAEMOGLOBIN</u>			
Sample Type : EDTA / Whole Blood			
Glycylated Haemoglobin (HbA1c) [Tosoh HPLC]	5.5	%	<5.7%NON DIABETIC 5.7-6.4% PRE-DIABETIC >6.5% DIABETIC <7.0% GOAL FOR DIABETIC ON TREATMENT
MEAN BLOOD GLUCOSE	111.15	mg/dL	116.89 - 154.2

END OF REPORT



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Test Description	Results	Units	Biological Reference Range
<u>ESR</u>			
Sample Type : EDTA / Whole Blood			
ESR	10	Mm/hr	0 - 15
Method	Westergren		

END OF REPORT



Dr. Sudhamani S. MD
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URINE ANALYSE REPORT

Sample Type : Urine

PHYSICAL EXAMINATION

COLOUR	Pale Yellow		
APPEARANCE	Clear		
REACTION (PH)	6.0		4.8 - 7.6
SPECIFIC GRAVITY	1.015		1.010 - 1.030
ALBUMIN	Absent		
GLUCOSE	Absent		
BLOOD (U)	Absent		
BILE PIGMENTS	Negative		
BILE SALTS	Absent		
KETONE	Negative		
LEUKOCYTES	Absent		
NITRITE	Absent		
UROBILINOGEN	Negative		

MICROSCOPY

PUS CELLS/hpf	1-2		
RBCs/hpf	Absent		
EPI.CELLS/hpf	1-2		
CASTS	Absent		
CRYSTALS	Absent		
BACTERIA	Absent		
Other	Absent		

END OF REPORT



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Consultant Pathologist
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
<u>FASTING BLOOD SUGAR</u>			
Sample Type : Flouride R			
Fasting Blood Sugar [GOD - POD]	73.5	mg/dl	Normal : 70 - 99 mg/dl impaired Tolerance : 100 - 125mg/dl Diabetes Mellitus : >126 mg/dl
Technique :-	Fully Automated Biochemistry Analyser ERBA EM-200		

END OF REPORT



Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

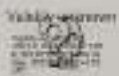


ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ಮೊರೆಯದ ಸಂಖ್ಯೆ Enrolment No.: 0804/29606/00173

To
श्री अश्वय जी
Ashay Jain
S/O: Chandrahar Prasad Jain
Maranji road
subhashi park
Dhaupur
Dhaupur Rajasthan - 328001
7526943773



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

XXXX XXXX 5953

VID : 9145 5082 4120 5187

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



श्री अश्वय जी
Ashay Jain
S/O: Chandrahar Prasad Jain
पुल्लिङ्ग MALE

XXXX XXXX 5953

VID : 9145 5082 4120 5187

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ವಿವರಣೆ / INFORMATION

- ಆಧಾರ್ ಗುರುತಿನ ಪ್ರಮಾಣವು ದೇಶದ ಪೌರತ್ವವನ್ನು ಸೂಚಿಸುವುದಿಲ್ಲ.
- ಆಧಾರ್ ವಿಶಿಷ್ಟ ಗುರುತಿನ ಪ್ರಮಾಣವಾಗಿದೆ.
- ಆಧಾರ್ QR ಕೋಡ್ ಅಥವಾ XML/ಆನ್‌ಲೈನ್ ಪ್ರಮಾಣೀಕರಣದ ಮೂಲಕವೂ ಪರಿಶೀಲಿಸಬಹುದು.
- ಆಧಾರ್ ಕಾರ್ಡ್, PVC ಕಾರ್ಡ್, e ಆಧಾರ್ ಮತ್ತು m ಆಧಾರ್ ಆಧಾರ್ ಅನ್ನು ಸಮಾನ ಮಟ್ಟದಲ್ಲಿ ಪರಿಗಣಿಸಬಹುದು. 12 ಅಂಕದ ಆಧಾರ್ ಸಂಖ್ಯೆಯನ್ನು ಲಾಕರ್/ಡಾಕ್ಟರ್ ಆಧಾರ್ ಅಡಾಲ್ಡ್ (V/D) ಅಥವಾ ಇತರ ಪ್ರಯೋಗಿಸಬಹುದು.
- 10 ವರ್ಷಗಳಿಗೊಮ್ಮೆ ಆಧಾರ್ ಅನ್ನು ನವೀಕರಿಸಿ.
- 12 ಅಂಕದ ಸಂಖ್ಯೆಯನ್ನು ಸುರಕ್ಷಿತವಾಗಿರಿಸಿ / ಸುರಕ್ಷಿತವಾಗಿ ಪಡೆದರೆ ಆಧಾರ್ ಅನ್ನು ಉಪಯೋಗಿಸಬಹುದು.
- ನಿಮ್ಮ ಆಧಾರ್ ಅನ್ನು ಸುರಕ್ಷಿತವಾಗಿರಿಸಿ, ಉಪಯೋಗಿಸಬಹುದು.
- ಆಧಾರ್ ವಿಶಿಷ್ಟ ಗುರುತಿನ ಪ್ರಮಾಣವನ್ನು mAadhaar ಅಥವಾ ಇತರ ಅಧಿಕಾರಿಗಳಿಗೆ ನೀಡಿ.
- ಆಧಾರ್ ಅನ್ನು ಪರಿಶೀಲಿಸಲು ಅಥವಾ ಅದನ್ನು ನವೀಕರಿಸಲು ಅಧಿಕಾರಿಗಳಿಗೆ ನೀಡಿ.
- ಆಧಾರ್ ಅನ್ನು ಉಪಯೋಗಿಸಲು ಅಧಿಕಾರಿಗಳಿಗೆ ನೀಡಿ.
- Aadhaar is a proof of identity, not of citizenship.
- Aadhaar is unique and secure.
- Verify identity using secure QR code/offline XML/online authentication.
- All forms of Aadhaar like Aadhaar letter, PVC Cards, eAadhaar and mAadhaar are equally valid. Virtual Aadhaar identity (VID) can also be used in place of 12 digit Aadhaar Number.
- Update Aadhaar at least once in 10 years.
- Aadhaar helps you avail various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app on smart phones to avail Aadhaar Services.
- Use the feature of lock/unlock Aadhaar biometrics to ensure security.
- Entities seeking Aadhaar are obligated to seek due consent.



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Unique Identification Authority of India



ಶಿವರು
S/O: Chandrahar Prasad Jain, Maranji road,
subhashi park,
Dhaupur - 328001

Address:
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road, subhashi park, Dhaupur,
Rajasthan - 328001



XXXX XXXX 5953

VID : 9145 5082 4120 5187

1087 | help@uidai.gov.in | www.uidai.gov.in

Dr. Mahesh V. Padsuly
MD. (Medicine)
Consultant Physician
Reg. No. 91424 (M/MO)

19/10/24

Akshay Jain
 Age: 36/male

Eye checkup.

	(R)	(L)
VA (A)	6/6	(A) 6/6
	N/C	N/C
Color Vn	(N)	(N)
Plseg	(N)	(N)
(F)	(N)	(N)

(R) wink

→ Oj

Female

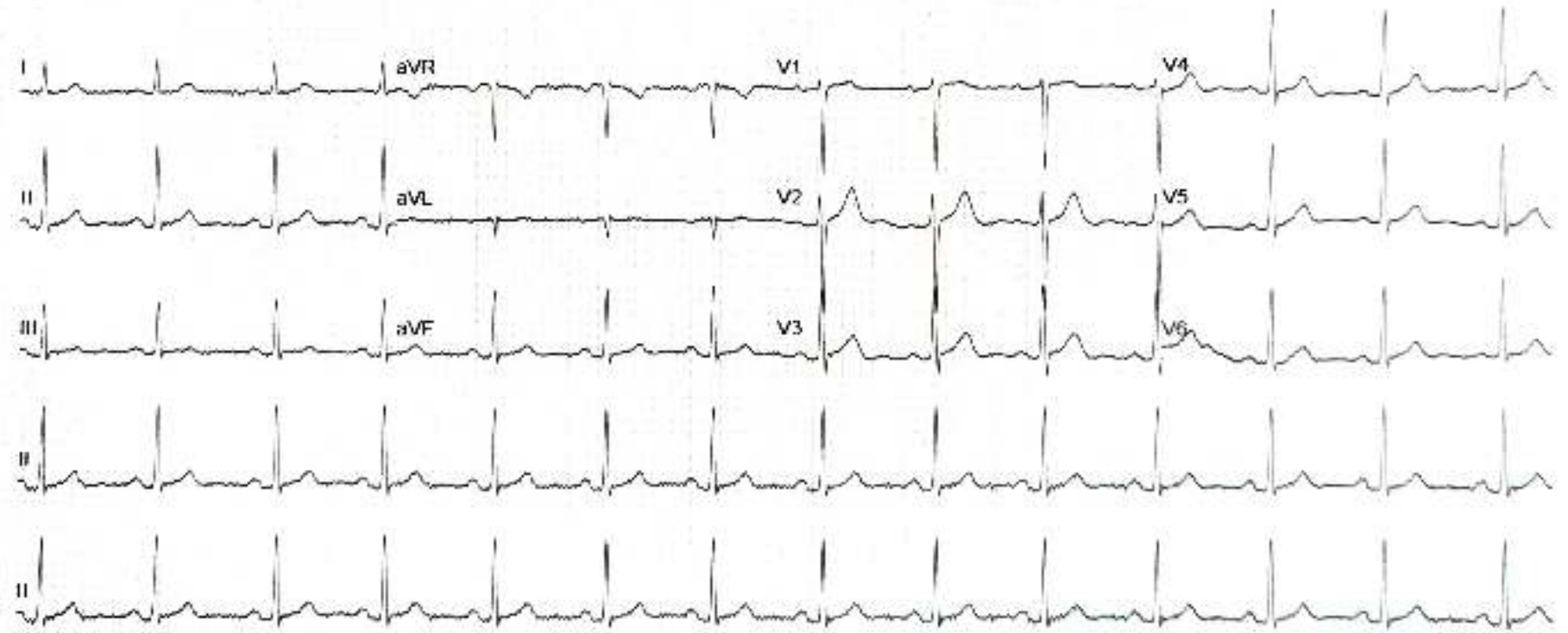
QRS .	82 ms
QT / QTcBaz :	344 / 401 ms
PR	148 ms
P :	92 ms
RR / PP	734 / 731 ms
P / QRS / T :	79 / 88 / 59 degrees

Normal sinus rhythm
Normal ECG

602 mm

CR

Dr. Mahesh V. Padsalg
MD. (Medicine)
Consultant Physician
Reg. No. 51424 (MMA)



ECHO Report

Date: 19/10/2024

Patient Details

Patient ID -

Name- AKSHAY JAIN

Age- 36 YRS.

Gender- MALE

Referral BY - MEDI WHEEL

Doctor In charge

DR. MAHESH PADSALGE

Clinical Status of Patient -

Finding description -

1. Normal cardiac chambers dimensions.
2. Normal LV systolic function.
3. No RWMA.
4. All cardiac valves are structurally normal.
5. Trivial MR, Trivial PR, NO AR.
6. No PAH.
7. Normal RV systolic function.
8. No clot/vegetation/pericardial effusion.
9. No coarctation of aorta.

Chamber Dimensions-M mode Findings

LVID (Diastole) 35-56(mm)	- 45.00	LVID (Systole) 24-42(mm)	- 30.00
IVS (Diastole) 8-12(mm)	- 09.00	IVS (Systole) 14-42(mm)	- 14.00
LVPWT (Diastole) 6-11(mm)	- 09.00	EPSS	- 03.00
LVEF (%)	- 65%	LVFS (%)	- 35.00
LV Volume (Diastolic)(mm ³)		LV Volume (Systolic)(mm ³)	
Meridional Wall Stress in System		Cubed LV Volume in Diastole (mm ³)	
Cubed LV+ myocardial volume (mm ³)		Velocity of circumferential Shortening (mm)	
Aortic root 22-37(mm)	- 26.00	Left Atrium Width (mm)	
Left Atrium Length (mm)	- 28.00	Left Atrium Area (mm ²)	
Left Atrium Volume (mm ³)		RV Function	
RV size	Normal	RA Size	
Normal		IVC Size (mm) - 13 mm Collapsible	
RV volume (mm ³)			
Normal			
Pericardium	Normal		
Effusion	None		
Resp Variation	Present		
Predicted RV Systolic Pressure			

Doppler Findings- I


Dr. Mahesh Padsalge
Dr. Mahesh V. Padsalge
MD. (Medicine)
Consultant Physician
Reg. No. 51424 (Mh.)

NAME- AKSHAY JAIN

DATE-19/10/2024

AGE- 36/M

X-RAY CHEST PA

The Bony Thorax is Normal.

Both The Costophrenic And Cardiophrenic Angles Are Clear.

Cardiac Shape And Size Appears Normal.

The Lung Field Appears Normal.

Both The Hila Are Normal In Density And Position.

IMPRESSION: NORMAL CHEST X-RAY.**DR.MRUDULA BABAR****CONSULTANT RADIOLOGIST****DR. MRUDULA BABAR**

MBBS, MD, DM (RADIOLOGY)

CPS MUMBAI 2009

REG. NO. 2005/03/2139