



Lab No.	012410050331	Age/Gender	27.8 YRS/MALE	Coll. ON	05/Oct/2024 09:11AM
NAME	Mr. ABHISHEK KUMAR SINGH			Reg. ON	05/Oct/2024
Ref. Dr.	MEDIWHEEL	BarcodeNo	01050331	Approved ON	05/Oct/2024 12:00PM
Rpt. Centre				Printed ON	05/Oct/2024 04:55PM

Test Name	Value	Unit	Biological Reference Interval
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Complete Haemogram, EDTA whole blood

Haemoglobin (Hb) <i>Method : Colorimetry</i>	14.70	gm/dl	13.0 - 17.0
RBC count <i>Method : Electrical impedance</i>	4.81	Millions/cmm	4.5 - 5.5
PCV / Haematocrit <i>Method : Calculated</i>	42.60	%	40.0 - 50.0
MCV <i>Method : Calculated</i>	88.50	fl	83.0 - 101.0
MCH <i>Method : Calculated</i>	30.50	picogram	27.0 - 32.0
MCHC <i>Method : Calculated</i>	34.40	%	31.5 - 34.5
RDW - CV <i>Method : Calculated</i>	13.30	%	11.6 - 14.0
Mentzer Index <i>Method : Calculated</i>	18.40		>= 13.0

The Mentzer index (MCV/ RBC count) is a useful tool for initial screening of patients with a microcytic hypochromic blood picture to rule out a thalassemia trait. If the index is less than 13, thalassemia is said to be more likely. If the result is greater than 13, then iron-deficiency anemia is said to be more likely. All patients with a low normal to low hemoglobin and a Mentzer index below 13 should be screened for thalassemia trait by HPLC.

TLC (Total Leucocyte Count) <i>Method : Flowcytometry</i>	5,750	/cmm	4000 - 10000
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DLC (Flowcytometry)

Neutrophils	57.20	%	35.0 - 75.0
Lymphocytes	34.20	%	25.0 - 45.0
Eosinophils	2.60	%	1.0 - 5.0
Monocytes	5.50	%	1.0 - 6.0
Basophils	0.50	%	0 - 1

Absolute Leucocyte Count (Calculated)

Absolute Neutrophil Count	3,289.00	/cmm	2000 - 7000
Absolute Lymphocyte Count	1,966.50	/cmm	1000 - 3000
Absolute Eosinophil count	149.50	/cmm	20 - 500
Absolute Monocyte count	316.25	/cmm	200 - 1000
Absolute Basophil count	28.75	/cmm	0 - 100

Platelet count <i>Method : Electrical impedance</i>	2.03	Lakh/cmm	1.5 - 4.1
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ESR (Erythrocyte Sedimentation Rate) <i>Method : Westergren method</i>	4	mm/1st hr	0 - 22
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Peripheral Smear

RBCs are normocytic and normochromic.
Leucocytic series is numerically and morphologically within normal limits.
Platelets are adequate in number and are normal in morphology.
No atypical cells or haemoparasites are seen.
Impression: Normal peripheral smear.

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Blood Group (ABO + RH)

Blood Group , EDTA blood B
 Method : Slide agglutination (Forward & Reverse grouping)

Rh type , EDTA blood Positive
 Method : Slide agglutination



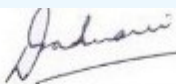
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Ref. Dr.	MEDIWHEEL	BarcodeNo	01050331	Approved ON	05/Oct/2024 10:50AM
Rpt. Centre				Printed ON	05/Oct/2024 04:55PM

Test Name	Value	Unit	Biological Reference Interval
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Glucose Fasting, plasma Method : GOD POD	97.10	mg/dL	60 - 100
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Interpretation (In accordance with the American diabetes association guidelines):

- A fasting plasma glucose level below 100 mg/dl is considered normal.
- A fasting plasma glucose level between 100-126 mg/dl is considered as glucose intolerant or pre diabetic. A fasting and post-prandial blood sugar test (after consumption of 75 gm of glucose) is recommended for all such patients.
- A fasting plasma glucose level of above 126 mg/dl is highly suggestive of a diabetic state. A repeat fasting test is strongly recommended for all such patients. A fasting plasma glucose level in excess of 126 mg/dl on both the occasions is confirmatory of a diabetic state.

Glucose PP, plasma Method : GOD POD	101.00	mg/dL	90 - 140
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Interpretation (In accordance with the American diabetes association guidelines):

- A post-prandial plasma glucose level below 140 mg/dl is considered normal.
- A post-prandial plasma glucose level between 140-199 mg/dl is considered as glucose intolerant or pre diabetic. A fasting and post-prandial blood sugar test (after consumption of 75 gm of glucose) is recommended for all such patients.
- A post-prandial plasma glucose level of above 200 mg/dl is highly suggestive of a diabetic state. A repeat post-prandial test is strongly recommended for all such patients. A post-prandial plasma glucose level in excess of 200 mg/dl on both the occasions is confirmatory of a diabetic state.

Bilirubin (Total + Direct)			
Serum Bilirubin Total Method : Diazotized Sulfanilic Acid (DSA)	0.78	mg/dl	0.1 - 1.2
Serum Bilirubin Direct Method : Diazotized Sulfanilic Acid (DSA)	0.25	mg/dl	0.0 - 0.3
Serum Bilirubin Indirect Method : Calculated	0.53	mg/dl	0.1 - 1.1
Serum SGPT/ALT Method : IFCC without P5P	97.70	U/l	<= 45.0
Blood Urea Nitrogen (BUN), serum Method : Calculated	10.02	mg/dl	7.8 - 20.2
Serum Creatinine Method : Jaffe kinetic	0.87	mg/dl	0.7 - 1.2

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<p>Dr. Smita Sadwani MD(Biochemistry) Technical Director</p>	<p>Dr. Mayank Gupta MD, DNB Pathology Consultant Pathologist</p>	<p><i>(Signature)</i> Dr. Deepak Sadwani MD(Pathology) Lab Director</p>	<p>Dr. Moushmi Mukherjee MBBS,MD (Pathology) Consultant Pathologist</p>
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Ref. Dr.	MEDIWHEEL	BarcodeNo	01050331	Approved ON	05/Oct/2024 10:48AM
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Urine Routine & Microscopic Examination

Physical examination

Volume	10	mL	
Colour	Pale Yellow		Pale yellow
Transparency	Clear		Clear
Specific gravity	1.030		1.003 - 1.035
<i>Method : pKa change</i>			

Chemical examination

Protein	Nil		Nil
<i>Method : error-of-indicator</i>			
Glucose	Nil		Nil
<i>Method : GOD-POD</i>			
pH	5.0		
<i>Method : Double indicator</i>			
Bilirubin	Negative		Negative
<i>Method : Azo-coupling reaction</i>			
Urobilinogen	Normal		Normal
<i>Method : Azo-coupling reaction</i>			
Ketone	Negative		Negative
<i>Method : Legals test</i>			
Erythrocytes	Absent		Absent
<i>Method : Peroxidase</i>			
Nitrite	Negative		Negative
<i>Method : Griess reaction</i>			
Leukocytes	Absent	Leu/uL	Negative
<i>Method : Esterase activity of granulocytes</i>			

Microscopic examination

WBC	0 - 1	/ HPF	0 - 2
RBC	Nil	/ HPF	0 - 2
Casts	Nil	/ HPF	Nil
Crystals	Nil	/ HPF	Nil
Epithelial cells	0 - 1	/ HPF	0 - 15
Bacteria	Absent		Absent
Others	Nil		
<i>Method : Light microscopy</i>			

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ECG Electro-cardiography

Sinus Rhythm.

Eye Vision		
	Right Eye	Left Eye
NEAR VISION	N/6	N/6
DISTANCE VISION	6/6	6/6
COLOR VISION	Normal	Normal

MER

General Condition	Fair, no pallor, no icterus, no anemia observed
Height (cm)	171
Weight (kg)	90
Pulse (bpm)	62
BP (mm/hg)	115/67

This is to certify that the above named candidate has been found to be fit.

Please note: Kindly review with clinician in view of abnormal reports (if any).

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X-Ray Chest PA view

Trachea and mediastinum are central.

Bilateral lung fields are clear.

Bilateral hilar shadows are normal.

Bilateral costophrenic angles are clear.

Cardiac shadow is normal.

Soft tissue shadows and bony rib cage is normal.

Impression: No significant abnormality seen .

Please correlate clinically

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*** Partial Report ***



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DR AMIT JAISWAL
MBBS,DMRD.DNB (RADIO DIAGNOSIS)
DMC No. 55709

PROGNOSIS LABORATORIES

A SUBSIDIARY OF MEDGENOME
515-516 DWARKA SEC -19 NEW DELHI-110075

Mr. ABHISHEK KUMAR SINGH

ID. : 74

AGE/SEX : 27 Yr /M

HT/WT : /

DATE : 05-10-2024 10:34:34 AM

REF.BY : Dr.MEDIWHEEL

MACHINE INTERPRETATION : Sinus Rhythm.

RATE : 53 bpm

BP : N/A

P Axis : -10 deg.

QRS Axis : 32 deg.

T Axis : 15 deg.

P Duration : 82 ms

PR Duration : 158 ms

QRS Duration : 112 ms

QT Interval : 393 ms

QTc Interval : 375 ms

Linked Median

Average Filtered

Speed : 25 mm/s

Sensitivity : 10 mm/mV



भारत सरकार
Government of India
साधार

अभिषेक कुमार सिंह
Abhishek Kumar Singh
जन्म तिथि / DOB : 26/01/1997
पुरुष / Male

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/
ऑफलाइन एक्सएमएल को स्कैनिंग) के साथ किया जाना चाहिए।
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authentication or scanning of QR code / offline XML).

7835 6352 0079

मेरा आधार, मेरी पहचान

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