LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. RAHUL GUPTA	**Age/Sex**	: 27 Year(s) / Male
UHID	: SHHM.99871	**Order Date**	: 13/07/2024 10:52
Episode	: OP		
Ref. Doctor	: self	**Mobile No**	: 8454964711
		DOB	: 12/11/1996
		Facility	: SEVENHILLS HOSPITAL, MUMBAI

Blood Bank

Test Name	Result

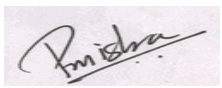
Sample No : O0344489A Collection Date : 13/07/24 11:02 Ack Date : 13/07/2024 11:50 Report Date : 13/07/24 13:34

BLOOD GROUPING/ CROSS-MATCHING BY SEMI AUTOMATION			
BLOOD GROUP (ABO)	' A '		
Rh Type *Method - Column Agglutination*	POSITIVE		

REMARK: THE REPORTED RESULTS PERTAIN TO THE SAMPLE RECEIVED AT THE BLOOD CENTRE.

Interpretation:
Blood typing is used to determine an individual's blood group, to establish whether a person is blood group A, B, AB, or O and whether he or she is Rh positive or Rh negative. Blood typing has the following significance,
• Ensure compatibility between the blood type of a person who requires a transfusion of blood or blood components and the ABO and Rh type of the unit of blood that will be transfused.
• Determine compatibility between a pregnant woman and her developing baby (fetus). Rh typing is especially important during pregnancy because a mother and her fetus could be incompatible.
• Determine the blood group of potential blood donors at a collection facility.
• Determine the blood group of potential donors and recipients of organs, tissues, or bone marrow, as part of a workup for a transplant procedure.

End of Report



Dr.Pooja Vinod Mishra
MD Pathology
Jr Consultant Pathologist, MMC Reg No. 2017052191
RegNo: 2017/05/2191

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HAEMATOLOGY

Sample No : O0344489A Collection Date : 13/07/24 11:02 Ack Date : 13/07/2024 11:12 Report Date : 13/07/24 13:28

Test Name	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC) - EDTA WHOLE BLOOD			
Total WBC Count	4.86	x10^3/ul	4 - 10
Neutrophils	61.1	%	40 - 80
Lymphocytes	31.6	%	20 - 40
Eosinophils	**0.5 ▼ (L)**	%	1 - 6
Monocytes	6.5	%	2 - 10
Basophils	**0.3 ▼ (L)**	%	1 - 2
Absolute Neutrophil Count	2.97	x10^3/ul	2 - 7
Absolute Lymphocyte Count	1.54	x10^3/ul	0.8 - 4
Absolute Eosinophil Count	0.02	x10^3/ul	0.02 - 0.5
Absolute Monocyte Count	0.32	x10^3/ul	0.12 - 1.2
Absolute Basophil Count	0.01	x10^3/ul	0 - 0.1
RBCs	5.24	x10^6/ul	4.5 - 5.5
Hemoglobin	14.1	gm/dl	13 - 17
Hematocrit	43.8	%	40 - 50
MCV	83.6	fl	83 - 101
MCH	**26.9 ▼ (L)**	pg	27 - 32
MCHC	32.2	gm/dl	31.5 - 34.5

MC-5288

LABORATORY INVESTIGATION REPORT

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RED CELL DISTRIBUTION WIDTH-CV (RDW-CV)	14.3	%	11 - 16
RED CELL DISTRIBUTION WIDTH-SD (RDW-SD)	44.4	fl	35 - 56
Platelet	228	x10^3/ul	150 - 410
Mean Platelet Volume (MPV)	10.6	fl	6.78 - 13.46
PLATELET DISTRIBUTION WIDTH (PDW)	16.0	%	9 - 17
PLATELETCRIT (PCT)	0.243	%	0.11 - 0.28
Comment	RBC:- NORMOCHROMIC NORMOCYTIC WBC:- WITHIN NORMAL LIMIT PLATELET:- REDUCED ON SMEAR.		

Method:-
HB Colorimetric Method.
RBC/PLT Electrical Impedance Method.
WBC data Flow Cytometry by Laser Method.
MCV,MCH,MCHC,RDW and rest parameters - Calculated.
All Abnormal Haemograms are reviewed confirmed microscopically.

NOTE: Wallach's Interpretation of Diagnostic Tests. 11th Ed, Editors: Rao LV. 2021

NOTE :-
The International Council for Standardization in Haematology (ICSH) recommends reporting of absolute counts of various WBC subsets for clinical decision making.This test has been performed on a fully automated 5 part differential cell counter which counts over 10,000 WBCs to derive differential counts. A complete blood count is a blood panel that gives information about the cells in a patient's blood, such as the cell count for each cell type and the concentrations of Hemoglobin and platelets. The cells that circulate in the bloodstream are generally divided into three types: white blood cells (leukocytes), red blood cells (erythrocytes), and platelets (thrombocytes). Abnormally high or low counts may be physiological or may indicate disease conditions, and hence need to be interpreted clinically.

End of Report

Dr.Ritesh Kharche
MD, PGD-HM

MC-5288

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Consultant Pathologist and Director of Laboratory Services
RegNo: 2006/03/1680

MC-5288

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HAEMATOLOGY

Sample No : O0344489A | Collection Date : 13/07/24 11:02 | Ack Date : 13/07/2024 11:12 | Report Date : 13/07/24 13:28

Test Name	Result	Unit	Biological Reference Interval
ERYTHROCYTE SEDIMENTATION RATE (ESR)			
ESR	15	mm/hr	0 - 20

Method: Westergren Method

INTERPRETATION :-
ESR is a non-specific phenomenon, its measurement is clinically useful in disorders associated with an increased production of acute-phase proteins. It provides an index of progress of the disease in rheumatoid arthritis or tuberculosis, and it is of considerable value in diagnosis of temporal arteritis and polymyalgia rheumatica. It is often used if multiple myeloma is suspected, but when the myeloma is non-secretory or light chain, a normal ESR does not exclude this diagnosis.

An elevated ESR may occur as an early feature in myocardial infarction. Although a normal ESR cannot be taken to exclude the presence of organic disease, the vast majority of acute or chronic infections and most neoplastic and degenerative diseases are associated with changes in the plasma proteins that increased ESR values.

The ESR is influenced by age, stage of the menstrual cycle and medications taken (corticosteroids, contraceptive pills). It is especially low (0–1 mm) in polycythaemia, hypofibrinogenaemia and congestive cardiac failure and when there are abnormalities of the red cells such as poikilocytosis, spherocytosis, or sickle cells. In cases of performance enhancing drug intake by athletes the ESR values are generally lower than the usual value for the individual and as a result of the increase in haemoglobin (i.e. the effect of secondary polycythaemia).

End of Report

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Biochemistry

Sample No : O0344489C Collection Date : 13/07/24 11:02 Ack Date : 13/07/2024 11:12 Report Date : 13/07/24 11:56

Test Name	Result	Unit	Biological Reference Interval
ALT(SGPT) - SERUM			
SGPT (Alanine Transaminase) - SERUM *Method - IFCC*	**53.65 ▲ (H)**	IU/L	0 - 45
References : *1)Pack Insert of Bio system* *2) Tietz Textbook Of Clinical Chemistry And Molecular Diagnostics, 6th Ed, Editors: Rifai et al. 2018*			
Total Bilirubin - SERUM *Method - Diazo*	0.89	mg/dl	0 - 2
Direct Bilirubin - - SERUM *Method - Diazotization*	**0.47 ▲ (H)**	mg/dl	0 - 0.4
Indirect Bilirubin - Calculated *Method - Calculated*	**0.42 ▲ (H)**	mg/dl	
BUN-SERUM			
BUN - SERUM *Method - Urease-GLDH*	10.3	mg/dl	4 - 18
References: *1)Pack Insert of Bio system* *2) Tietz Textbook Of Clinical Chemistry And Molecular Diagnostics, 6th Ed, Editors: Rifai et al. 2018*			

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Urinalysis

Sample No : O0344491D Collection Date : 13/07/24 11:06 Ack Date : 13/07/2024 11:12 Report Date : 13/07/24 15:17

Test Name	Result	Unit	Biological Reference Interval
Physical Examination			
QUANTITY	30	ml	
Colour	Pale Yellow		
Appearance	Slightly Hazy		
DEPOSIT	Absent		Absent
pH	Acidic		
Specific Gravity	1.020		
Chemical Examination			
Protein	Absent		Absent
Glucose	Absent		
ketones	Absent		
Blood	NEGATIVE		Negative
Bilirubin	Negative		
Urobilinogen	normal		Normal
NITRATE	Absent		Absent
LEUKOCYTES	Absent		
Microscopic Examination			
Pus cells	2-3	/HPF	
Epithelial Cells	2-3	/HPF	

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RBC	Absent	/HPF	Absent
Cast	Absent	/LPF	
Crystal	Absent	/HPF	
Amorphous Materials	Absent		
Yeast	Absent		
Bacteria	Absent		

End of Report

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DIAGNOSTICS REPORT

Patient Name	: Mr. RAHUL GUPTA	Order Date	: 13/07/2024 10:52
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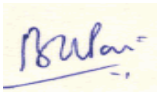
UHID	: SHHM.99871		
Ref. Doctor	: self	Facility	: SEVENHILLS HOSPITAL, MUMBAI
Address	: VEERA DESAI ROAD, OPP PRAMUKH HIGHT, ANDHERI WEST,Mumbai, Maharashtra, 400058	Mobile	: 8454964711

X-RAY CHEST PA VIEW

Both lungs are clear.
The frontal cardiac dimensions are normal.
The pleural spaces are clear.
Both hilar shadows are normal in position and density.
No diaphragmatic abnormality is seen.
The soft tissues and bony thorax are normal.

IMPRESSION: No pleuroparenchymal lesion is seen.



Dr.Bhujang Pai
MBBS,MD

Consultant

RegNo: 49380

Mediwheel
....Your wellness partner

Arcofemi Healthcare Pvt Ltd
(Formerly known as Arcofemi Healthcare Ltd)
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Email: wellness@mediwheel.in, Website: www.mediwheel.in
Tel: +91-11-41195959, Fax: +91-11-29523020
CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that **Mr. Rahul Gupta** aged, **27yr** .Based on the examination, I certify that he is in good dental and physical health and it is free from any physical defects such as deafness, colour blindness, and any chronic or contagious diseases.

Place: **Mumbai**

Date: 13/07/2024

BCMR 47093

Name & Signature of

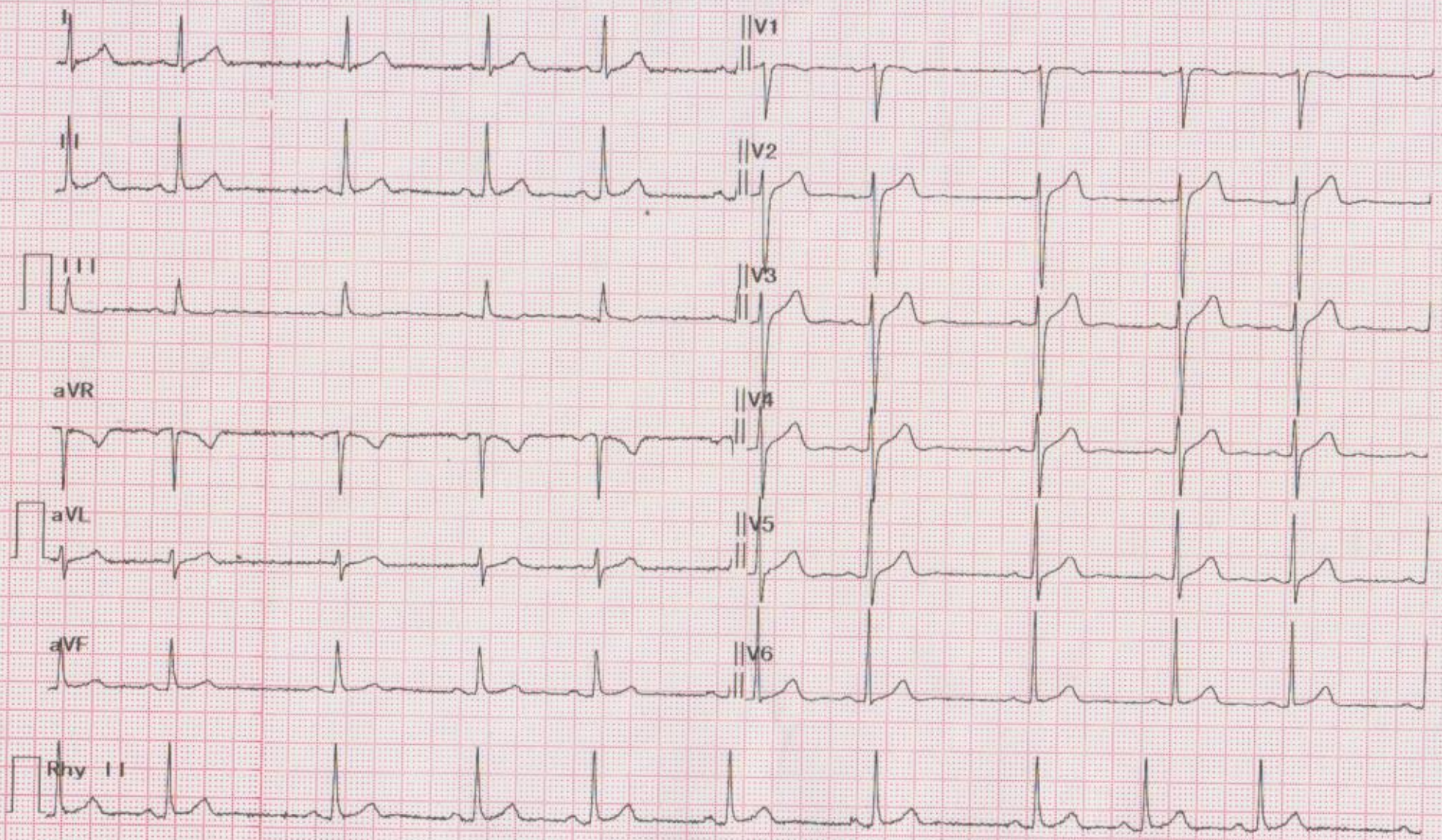
Medical officer

ID : 2407130012
Name: mr rahul gupta
Sex : Male
Divisions:

DataTime: 2024-07-13 11:44
Age : 27
BP : / mmHg
Bed No. :

Hospital:
Height : cm
Weight : kg
Hospital No.:

HR 60 bpm	RV5/SV1 amp 1.365/1.034mV	Minnesota Code	Diagnosis Info
P Dur/PR int 120/161ms	RV5+SV1 amp 2.399mV	8-1-1	800 Sinus Rhythm
QRS Dur 93 ms	RV6/SV2 amp 1.679/1.691mV	9-4-2(V4)	841 PAC(Premature Atrial Contruction)
QT/QTC int 372/372 ms			
P/QRS/T axis 52/62/32 °			



Diagnosis for reference, ask your doctor to confirm
AUTO PRINT 6X2+1R 60bpm 10 mm/mV 0.50Hz-45Hz AC 50Hz 25 mm/sec Confirmed By: