Customer Name	MR.RAMACHANDRAN P	Customer ID	MED112068553
Age & Gender	35Y/MALE	Visit Date	10/02/2024
Ref Doctor	MediWheel		

Personal Health Report

General Examination:

Height : 168.9 cms   BP: 110/70 mmhg
Weight : 77.4 kg   Pulse: 72/ min, regular
BMI   : 27.3 kg/m²

Systemic Examination:

CVS: S1 S2 heard;
RS : NVBS +.
Abd : Soft.
CNS : NAD

Blood report:

All blood parameters are well within normal limits. (Report enclosed).

Urine analysis – Within normal limits.

X-Ray Chest – Normal study.

ECG – Normal ECG.

ECHO – Normal study.

USG whole abdomen - Fatty liver.

Eye Test – Normal study.

Vision	Right eye	Left eye
Distant Vision	6/6	6/6
Near Vision	N6	N6
Colour Vision	Normal	Normal
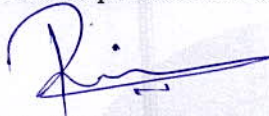
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Customer Name	MR.RAMACHANDRAN P	Customer ID	MED112068553
Age & Gender	35Y/MALE	Visit Date	10/02/2024
Ref Doctor	MediWheel		

Impression & Advice:

USG whole abdomen - Fatty liver. To take low fat diet, and high fiber diets. Regular brisk walking for 45 minutes daily, 5 days a week is essential.

All other health parameters are well within normal limits.

DR. NOOR MOHAMMED RIZWAN A. M.B.B.S, FDM
MHC Physician Consultant

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Name	: **Mr. RAMACHANDRAN P**	Register On : 10/02/2024 8:58 AM	
PID No.	: MED112068553	Collection On : 10/02/2024 9:45 AM	
SID No.	: 224002054	Report On : 10/02/2024 5:22 PM	
Age / Sex	: 35 Year(s) / Male	Printed On : 10/02/2024 5:53 PM	
Type	: OP		
Ref. Dr	: MediWheel		

Investigation	Observed Value	Unit	Biological Reference Interval
BLOOD GROUPING AND Rh TYPING (EDTA Blood/Agglutination)	'O' 'Negative'		

INTERPRETATION: Reconfirm the Blood group and Typing before blood transfusion

Complete Blood Count With - ESR

Investigation	Observed Value	Unit	Biological Reference Interval
Haemoglobin (EDTA Blood/Spectrophotometry)	15.3	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood/Derived from Impedance)	46.2	%	42 - 52
RBC Count (EDTA Blood/Impedance Variation)	5.43	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood/Derived from Impedance)	85.1	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood/Derived from Impedance)	28.3	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood/Derived from Impedance)	33.2	g/dL	32 - 36
RDW-CV (EDTA Blood/Derived from Impedance)	13.5	%	11.5 - 16.0
RDW-SD (EDTA Blood/Derived from Impedance)	40.21	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood/Impedance Variation)	5730	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood/Impedance Variation & Flow Cytometry)	59.9	%	40 - 75
Lymphocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	30.6	%	20 - 45

VERIFIED BY

Dr Archana K MD Ph.D
Consultant Pathologist
Reg No : 79967

APPROVED BY

The results pertain to sample tested.

Page 1 of 8

Name	: **Mr. RAMACHANDRAN P**		
PID No.	: MED112068553	Register On	: 10/02/2024 8:58 AM
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Type	: OP	Printed On	: 10/02/2024 5:53 PM
Ref. Dr	: MediWheel		

Investigation	Observed Value	Unit	Biological Reference Interval
Eosinophils (EDTA Blood/*Impedance Variation & Flow Cytometry*)	4.3	%	01 - 06
Monocytes (EDTA Blood/*Impedance Variation & Flow Cytometry*)	4.7	%	01 - 10
Basophils (EDTA Blood/*Impedance Variation & Flow Cytometry*)	0.5	%	00 - 02

INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

Investigation	Observed Value	Unit	Biological Reference Interval
Absolute Neutrophil count (EDTA Blood/*Impedance Variation & Flow Cytometry*)	3.43	$10^3 / \mu l$	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/*Impedance Variation & Flow Cytometry*)	1.75	$10^3 / \mu l$	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/*Impedance Variation & Flow Cytometry*)	0.25	$10^3 / \mu l$	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/*Impedance Variation & Flow Cytometry*)	0.27	$10^3 / \mu l$	< 1.0
Absolute Basophil count (EDTA Blood/*Impedance Variation & Flow Cytometry*)	0.03	$10^3 / \mu l$	< 0.2
Platelet Count (EDTA Blood/*Impedance Variation*)	273	$10^3 / \mu l$	150 - 450
MPV (EDTA Blood/*Derived from Impedance*)	10.2	fL	7.9 - 13.7
PCT (EDTA Blood/*Automated Blood cell Counter*)	0.28	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/*Automated - Westergren method*)	2	mm/hr	< 15

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Consultant Pathologist
Reg No : 79967

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Ref. Dr	: MediWheel		

Investigation	Observed Value	Unit	Biological Reference Interval
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	**100.1**	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	103.80	mg/dL	70 - 140

INTERPRETATION:
Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	13.1	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.90	mg/dL	0.9 - 1.3

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists,N-acetylcysteine, chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	6.00	mg/dL	3.5 - 7.2

Liver Function Test

Bilirubin(Total) (Serum/DCA with ATCS)	0.63	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.13	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.50	mg/dL	0.1 - 1.0

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Name : Mr. RAMACHANDRAN P

PID No. : MED112068553

SID No. : 224002054

Age / Sex : 35 Year(s)/ Male

Type : OP

Ref. Dr : MediWheel

Register On : 10/02/2024 8:58 AM

Collection On : 10/02/2024 9:45 AM

Report On : 10/02/2024 5:22 PM

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DIAGNOSTICS
experts who care

Investigation	Observed Value	Unit	Biological Reference Interval
SGOT/AST (Aspartate Aminotransferase) (Serum/*Modified IFCC*)	27.40	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/*Modified IFCC*)	29.1	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/*IFCC / Kinetic*)	36.20	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/*Modified IFCC*)	84.20	U/L	53 - 128
Total Protein (Serum/*Biuret*)	7.75	gm/dl	6.0 - 8.0
Albumin (Serum/*Bromocresol green*)	4.8	gm/dl	3.5 - 5.2
Globulin (Serum/*Derived*)	2.95	gm/dL	2.3 - 3.6
A : G RATIO (Serum/*Derived*)	1.63		1.1 - 2.2

Lipid Profile

Cholesterol Total (Serum/*CHOD-PAP with ATCS*)	166.70	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/*GPO-PAP with ATCS*)	67.90	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

VERIFIED BY

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Ref. Dr	:	MediWheel			

Investigation	Observed Value	Unit	Biological Reference Interval
HDL Cholesterol (Serum/*Immunoinhibition*)	**37.40**	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/*Calculated*)	115.7	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >=190
VLDL Cholesterol (Serum/*Calculated*)	13.6	mg/dL	< 30
Non HDL Cholesterol (Serum/*Calculated*)	129.3	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >=220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol. 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/*Calculated*)	4.5		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/*Calculated*)	1.8		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/*Calculated*)	3.1		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

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Ref. Dr	: MediWheel	

Investigation	Observed Value	Unit	Biological Reference Interval
Glycosylated Haemoglobin (HbA1c)			
HbA1C (Whole Blood/_HPLC_)	**5.9**	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood_)_	122.63	mg/dL	

INTERPRETATION: Comments
HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.
Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia,hyperbilirubinemia,Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.
Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly,Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/_Chemiluminescent Immunometric Assay (CLIA)_)	1.49	ng/ml	0.7 - 2.04

INTERPRETATION:
Comment :
Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Tyroxine) - Total (Serum/_Chemiluminescent Immunometric Assay (CLIA)_)	9.46	µg/dl	4.2 - 12.0

INTERPRETATION:
Comment :
Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/_Chemiluminescent Immunometric Assay (CLIA)_)	2.660	µIU/mL	0.35 - 5.50

VERIFIED BY

Dr Archana K MD Ph.D
Consultant Pathologist
Reg No : 79967

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Investigation	Observed Value	Unit	Biological Reference Interval

INTERPRETATION:
Reference range for cord blood - upto 20
1 st trimester: 0.1-2.5
2 nd trimester 0.2-3.0
3 rd trimester : 0.3-3.0
(Indian Thyroid Society Guidelines)
Comment :
1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.
2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.
3.Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

Urine Analysis - Routine

Investigation	Observed Value	Unit	Biological Reference Interval
COLOUR (Urine)	Pale yellow		Yellow to Amber
APPEARANCE (Urine)	Clear		Clear
Protein (Urine/*Protein error of indicator*)	Negative		Negative
Glucose (Urine/*GOD - POD*)	Negative		Negative
Pus Cells (Urine/*Automated – Flow cytometry*)	0 - 1	/hpf	NIL
Epithelial Cells (Urine/*Automated – Flow cytometry*)	0 - 1	/hpf	NIL
RBCs (Urine/*Automated – Flow cytometry*)	NIL	/HPF	NIL
Casts (Urine/*Automated – Flow cytometry*)	NIL	/hpf	NIL
Crystals (Urine/*Automated – Flow cytometry*)	NIL	/hpf	NIL
Others (Urine)	NIL		

INTERPRETATION: Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

VERIFIED BY

Dr Archana K MD Ph.D
Consultant Pathologist
Reg No : 79967

APPROVED BY

The results pertain to sample tested.

Page 7 of 8

Investigation	Observed Value	Unit	Biological Reference Interval
Stool Analysis - ROUTINE			
Colour (Stool)	Brown		Brown
Blood (Stool)	Absent		Absent
Mucus (Stool)	Absent		Absent
Reaction (Stool)	Acidic		Acidic
Consistency (Stool)	Semi Solid		Semi Solid
Ova (Stool)	NIL		NIL
Others (Stool)	NIL		NIL
Cysts (Stool)	NIL		NIL
Trophozoites (Stool)	NIL		NIL
RBCs (Stool)	NIL	/hpf	Nil
Pus Cells (Stool)	1 - 2	/hpf	NIL
Macrophages (Stool)	NIL		NIL
Epithelial Cells (Stool)	NIL	/hpf	NIL

VERIFIED BY

Dr Archana K MD Ph.D
Consultant Pathologist
Reg No : 79967

APPROVED BY

-- End of Report --

The results pertain to sample tested.

Name	Mr. RAMACHANDRAN P	Customer ID	MED112068553
Age & Gender	35Y/M	Visit Date	Feb 10 2024 8:58AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: **_Essentially normal study._**

N. Sandhya

Dr.N.Sandhya, DMRD
Consultant Radiologist

Customer Name	MR.RAMACHANDRAN P	Customer ID	MED112068553
Age & Gender	35Y/MALE	Visit Date	10/02/2024
Ref Doctor	MediWheel		

SONOGRAM REPORT

WHOLE ABDOMEN

The liver is normal in size and shows diffuse fatty changes. No focal lesion is seen.

The gall bladder is normal sized, smooth walled and contains no calculus.

There is no intra or extra hepatic biliary ductal dilatation.

The pancreas shows a normal configuration and echotexture. The pancreatic duct is normal.

The portal vein and IVC are normal.

The spleen is normal.

There is no free or loculated peritoneal fluid.

No para aortic lymphadenopathy is seen.

No abnormality is seen in the region of the adrenal glands.

The right kidney measures ~ 11.6 x 5.6 cm.

The left kidney measures ~ 10.4 x 6.3 cm.

Both kidneys are normal in size, shape and position. Cortical echoes are normal bilaterally.

There is no calculus or calyceal dilatation.

The ureters are not dilated.

The bladder is smooth walled and uniformly transonic. There is no intravesical mass or calculus.

The prostate measures ~ 3.0 x 2.8 x 2.6 cm (Vol ~ 12.2 ml) and is normal sized.

The echotexture is homogeneous.

Customer Name	MR.RAMACHANDRAN P	Customer ID	MED112068553
Age & Gender	35Y/MALE	Visit Date	10/02/2024
Ref Doctor	MediWheel		

The seminal vesicles are normal.

Iliac fossae are normal.

IMPRESSION:

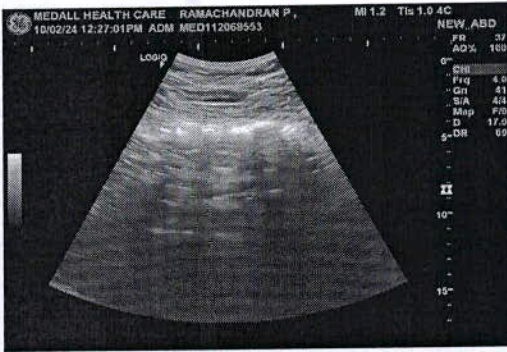- **Fatty liver.**
- **Normal study of other abdominal organs.**

DR. UMALAKSHMI
SONOLOGIST

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Customer Name	MR.RAMACHANDRAN P	Customer ID	MED112068553
Age & Gender	35Y/MALE	Visit Date	10/02/2024
Ref Doctor	MediWheel		

ECHOCARDIOGRAPHY

M-MODE MEASUREMENTS:-

VALUES	
AO	2.7 cm
LA	3.3 cm
LVID(D)	4.7 cm
LVID (S)	3.0 cm
IVS (D)	1.0 cm
LVPW (D)	1.0 cm
EF	67 %
FS	37 %
TAPSE	19 mm

DOPPLER AND COLOUR FLOW PARAMETERS :-

Aortic Valve Gradient	:	V max – 1.33 m/sec	
Pulmonary Valve Gradient	:	V max – 0.72 m/sec	
Mitral Valve Gradient	:	E: 0.82 m/sec	A: 0.50 m/sec
Tricuspid Valve Gradient	:	E: 0.40 m/sec	

VALVE MORPHOLOGY :-

Aortic valve	-	Normal
Mitral valve	-	Normal
Tricuspid valve	-	Normal
Pulmonary valve	-	Normal

Customer Name	MR.RAMACHANDRAN P	Customer ID	MED112068553
Age & Gender	35Y/MALE	Visit Date	10/02/2024
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CHAMBERS	
LEFT ATRIUM	NORMAL
LEFT VENTRICLE	NORMAL
RIGHT ATRIUM	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTERVENTRICULAR SEPTUM	INTACT

ECHO FINDINGS:

No Regional Wall Motion Abnormality (RWMA)
Normal Left Ventricular systolic function, EF 67%.
Trivial Mitral Regurgitation / No Mitral Stenosis
No Aortic Regurgitation /No Aortic Stenosis
Trivial Tricuspid Regurgitation (2.1 m/s).
Normal RV Function .
No Pulmonary Artery Hypertension.
No Pericardial Effusion.

IMPRESSION:

* STRUCTURALLY NORMAL HEART.
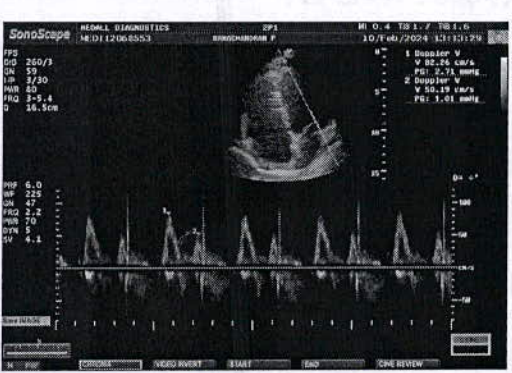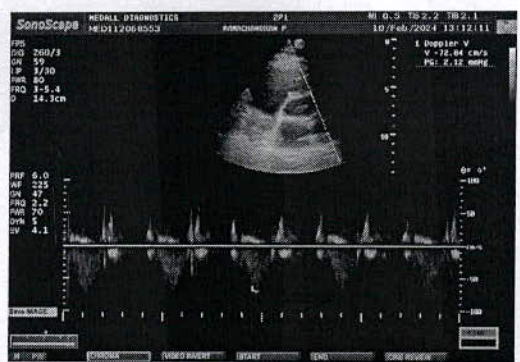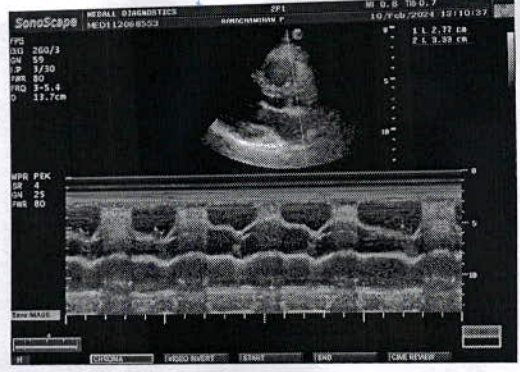* NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION, EF 67%

M. Varshini

MS. VARSHINI.M-ECHO TECHNOLOGIST

Medall Healthcare Pvt Ltd

58/6, Revathy street, Jawarlal nehru road, 100 feet Road, (Former State ElectionCommission Office),

Customer Name	MR.RAMACHANDRAN P	Customer ID	MED112068553
Age & Gender	35Y/MALE	Visit Date	10/02/2024
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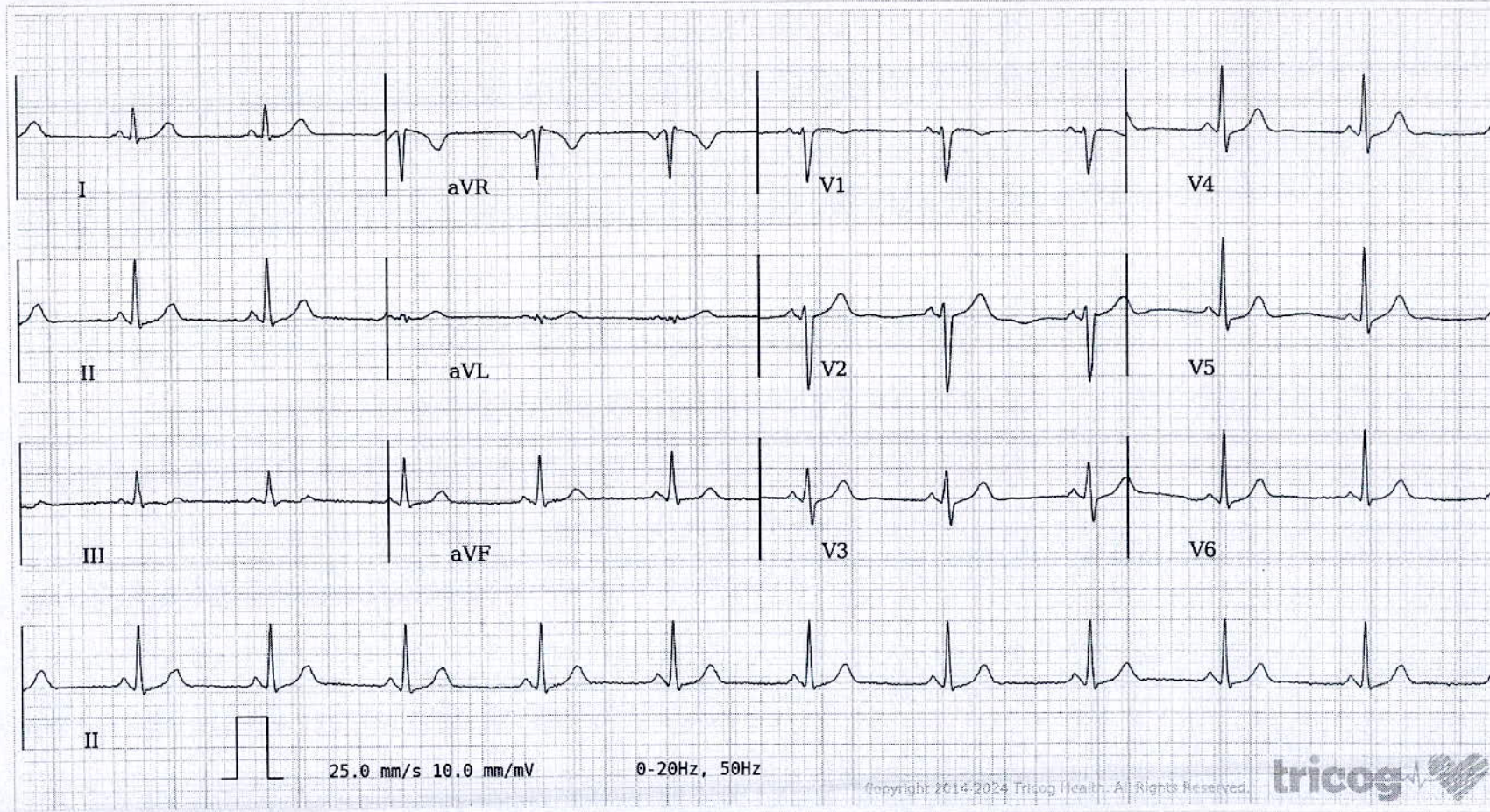
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Age / Gender: 35/Male

Patient ID: med112068553

Patient Name: Mr ramachandran p

Date and Time: 10th Feb 24 12:36 PM

I aVR V1 V4

II aVL V2 V5

III aVF V3 V6

II

25.0 mm/s 10.0 mm/mV 0-20Hz, 50Hz

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AR: 68bpm   VR: 67bpm   QRSD: 86ms   QT: 356ms   QTcB: 376.19ms   PRI: 118ms   P-R-T: 47° 61° 40°

Sinus Rhythm, Short PR Interval. Please correlate clinically.

REPORTED BY

Dr Kavitha A

ASSURED DIAGNOSIS