Patient Name	Anhit Cha	tunedi?	Date	22/01/202	9
Age	3.5		UHID No		
Sex	male,		Ref By		
Occupation			Phone No Email		
	HEALT	H ASSESSI	MENT FOR	M	
	A -	GENERAL EXA	NOITANIMA		
CHIEF COMPLAINTS PAST HISTORY	CIO won b	me de action	d on the	atint for	ħ
MEDICAL HISTORY	Hypertension	Asthama	Heart Disease	Thyroid Disorder	Allergy
MEDICAL HISTORY		10		NO	N 2
	Diabetes	Stroke	Kidney Disorder	Tuberculosis	Liver Disorder
	MO	lu,	μО	Mo	NO
	Other History	COVID-10	7 2022	Nome qua	anno
SURGICAL HISTORY	Piles	Fissures	Fistula	Hernia	Gall Bladder Stone
			ДО		
CURRENT					
MEDICATIONS	Sr. No	Com	plaints	Dosage	Duration
	10.50		140		
	Constitution of the second	altem	ater medicat	725	

NAME Anuir Chaterove de	Weight	75.5
120./80m	Height	138
Pulse 69	SPO2	
Temperature Meb	Peripheral Pulses	(t).
Dedema	Breath Sound	
Heart Sound	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
B - SYSTEMIC EXAM	NOITANIN	
FILL YES/NO		
CONSTITUTIONAL		NARY SYSTEM
	Frequency of urine	
Fever	Blood in urine	
Chills	Incomplete empty of	
Recent weight gain	bladder	
EYES	Nycturia	w.
	Dysuria	1 / 0
Eye pain	Urge Incontinence	1
Spots before eyes		/GYNE.
Dry eyes destance years.	Abnormal bleed	
Wearing glasses yoo 1.25 1.25	Vaginal Discharge	
Vision changes	Irregular menses	Ino
Itchy eyes	Midcycle bleeding	100
EĂR/NOSE/THROAT		OSKELETAL
Earaches		1.
Nose bleeds	Joint swelling	hand It ture
Sore throat Yes /mrt to back.		t) anune It a
Loss of hearing Frequent Throat inf.	Limb swelling	2 head to
Sinus problems	JUILI SUITIESS	1 Carre
Dental problems		ENTARY(SKIN) un #
CARDIOVASCULAR	Acne	- h
Chest pain	Breast pain	tho.
Heart rate is fast/slow	Change in mole	100.
Palpitations 1P	Breast	
Leg swelling	NEUR	OLOGICAL
RESPIRATORY	Confused	
Shortness of breath	Sensation in limbs	
Cough	Migraines	In.
Orthopnoea	Difficulty walking	
Wheezing	PSYC	CHIATRIC
Dyspnoea	Suicidal	
Respiratory distress in sleep	Change in personality	
GASTROINTESTINAL	Anxiety	
Abdominal pain	Sleep Disturbances	IP
Constipation	Depression	
	Emotional	
	g - step to the contract of th	
Vomiting mr mobile Diarrhoea	7	
Melena O		
	•	





भारत सरकार Unique Identification Authority of India Government of India

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120/235 india path

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Japan

Mansarovar

A.C. Jobner Jaipur

Rajasihan 302020

MN109796893FT

(Physio Lounge & Diagnolounge) 104-105, 1st Floor, Asmi Dreamz, At Junction Of S.V. Road, & M. G. Ro Goregaon (West), Murnbai- 40010-



आपका आधार क्रमांक / Your Aadhaar No. :

5758 5097 2846

Achecis no आधार - आम आदमी का अधिका

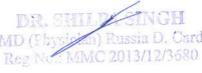


भारत सरकार

Government of India



अवित्त चतुर्वेदी Ankit Chaturvedi ਗਵਸ ਰਥੇ / Year of Birth 1988 पुरुष / Male



5097 2846 5758



साधार -





VRX HEALTH CARE PVT. LTD.

Name

MR. ANKIT CHATURVEDI

Age/Gender

35 Years 8 Months /M

Referred By

: MEDIWHEEL

Id

: VRX-36411

Registered On **Collected Time** : 27/01/2024 08:36

Repo

: 27/01/2024 10:00 27/01/2024 14:38

orted On	31	27/01/	2024	1
				-

nvestigations	Observed Value	Bio. Ref. Interval	METHOD
CBC-COMPLETE BLOOD COUNT			
HAEMOGLOBIN	13.8	13.0 - 17.0 gm/dl	
RBC COUNT	4.74	4.5 - 5.5 Millions/Cmm	
PACKED CELL VOLUME	41.0	40.0 - 50.0 %	
MEAN CORP VOL (MCV)	86.5	83.0 - 101.0 fL	
MEAN CORP HB (MCH)	29.11	27 - 32 pg	
MEAN CORP HB CONC (MCHC)	33.66	31.5 - 34.5 g/dl	
RDW	13.4	11.6 - 14.0 %	
WBC COUNT	5.7	4.0 - 10.0 *1000/cmm	
NEUTROPHILS	55	40 - 80 %	
LYMPHOCYTES	36	20 - 40 %	
EOSINOPHILS	4	1-6 %	
MONOCYTES	5	2 - 10 %	
BASOPHILS	0		
PLATELETS COUNT	140	150 - 410 *1000/Cmm	
PLATELETS ON SMEAR	Reduced on Smear Large Platelets Seen		
MPV	5.7	6.78 - 13.46 %	
PDW	13.4	9-17 %	
RBC MORPHOLOGY	NORMOCYTIC NORMOCHROMIC		Towns and the second

REMARKS
EDTA Whole Blood - Tests done on Automated NIHON KOHDEN MEK-7300K 5 Part Analyzer. (Haemoglobin by Photometric and WBC, RBC, Platelet count by Impedance method, WBC differential by Floating Discriminator Technology and other parameters are calculated) All Abnormal Haemograms are reviewed and confirmed microscopically. Differential count is based on approximately 10,000 cells.

INTERPRETATION

--- End of the Report ---

Dr. Vipul Jain M.D.(PATH)

APPROVED BX

ENTERED BY - SANTOSH M

CHECKED BY - SNEHA G





VRX HEALTH CARE PVT. LTD.

Name

: MR. ANKIT CHATURVEDI

Age/Gender

35 Years 8 Months /M

Referred By

: MEDIWHEEL

ld

VRX-36411

Registered On

27/01/2024 08:36

Collected Time

27/01/2024 10:00

Reported On

27/01/2024 14:38

Investigations

Observed Value

Bio. Ref. Interval

METHOD

MEDIWHEEL FULL BODY B UNISEX

ESR

10

< 20 mm at the end of 1Hr.

WESTERGREN

INTERPRETATION

ESR(Erythrocyte Sedimentation Rate)-The ESR measures the time required for erythrocytes from a whole blood sample to settle to the bottom of a vertical tube. Factors influencing the ESR include red cell volume, surface area, density, aggregation, and surface charge. The ESR is a sensitive, but nonspecific test that is frequently the earliest indicator of disease. It often rises significantly in widespread inflammatory disorders due to infection or autoimmune mechanisms. Such elevations may be prolonged in localized inflammation and malignancies.

Increased ESR: may indicate pregnancy, acute or chronic inflammation, tuberculosis, rheumatic fever, paraproteinemias, rheumatoid arthritis, some

malignancies, or anemia.

Decreased ESR: may indicate polycythemia, sickle cell anemia, hyperviscosity, or low plasma protein.

--- End of the Report ---

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Dr. Vipul Jain M.D.(PATH)

APPROVED B

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ENTERED BY - SANTOSH M

CHECKED BY - SNEHA G





VRX HEALTH CARE PVT. LTD.

Name

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Age/Gender

: 35 Years 8 Months /M

Referred By

: MEDIWHEEL

ld

: VRX-36411

Registered On

: 27/01/2024 08:36

Collected Time

: 27/01/2024 09:17

Reported On

: 27/01/2024 16:39

Investigations	Observed Value	Bio. Ref. Interval	METHOD
BLOOD GROUP	O POSITIVE		SLIDE AGGLUTIN ATION - FORWAR D GROUPING

--- End of the Report ---

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Dr. Vipul Jain M.D.(PATH)

APPROVED P

ENTERED BY - SANTOSH M

CHECKED BY - SNEHA G





VRX HEALTH CARE PVT. LTD.

Name Age/Gender : MR. ANKIT CHATURVEDI : 35 Years 8 Months /M

Referred By

: MEDIWHEEL

ld

VRX-36411

Registered On

: 27/01/2024 08:36

Collected Time

27/01/2024 12:35

Reported On

: 27/01/2024 14:38

Investigations	Observed Value	Bio. Ref. Interval	METHOD
FASTING BLOOD SUGAR			GODPOD
FDC	94.2	< 100 mg/dl	GODPOD
FBS			GODPOD
URINE SUGAR	ABSENT		GODPOD
URINE KETONE	ABSENT		000,00

INTERPRETATION

SAMPLE: FLUORIDE, PLASMA

Plasma Glucose Fasting: Non-Diabetic: < 100 mg/dl

Diabetic : >/= 126 mg/dl Pre-Diabetic : 100 – 125 mg/dl Plasma Glucose Post Lunch : Non-Diabetic : < 140

Diabetic :>/= 200 mg/dl Pre-Diabetic : 140- 199 mg/dl.

Random Blood Glucose : Diabetic : >/= 200 mg/dl

References : ADA(American Diabetic Association Guidelines 2016)
Technique : Fully Automated PENTRA C-200 Clinical Chemistry Analyser .

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

m	m	5	C
۳	м	m	

PBS	1		GODPOD
PPBS	85.9	< 140 mg/dl	200000
URINE SUGAR	ABSENT		GODPOD
UNINE SUGAN			GODPOD
URINE KETONE	ABSENT		

INTERPRETATION

SAMPLE : FLUORIDE, PLASMA

Plasma Glucose Fasting: Non-Diabetic: < 100 mg/dl

Diabetic : >/= 126 mg/dl Pre-Diabetic : 100 – 125 mg/dl Plasma Glucose Post Lunch : Non-Diabetic : < 140

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Random Blood Glucose : Diabetic : >/= 200 mg/dl

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--- End of the Report ---

Dr. Vipul Jain M.D.(PATH)

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CHECKED BY - SNEHA G





VRX HEALTH CARE PVT. LTD.

Name

: MR. ANKIT CHATURVEDI

Age/Gender

35 Years 8 Months /M

Referred By

MEDIWHEEL

ld

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Registered On

: 27/01/2024 08:36

Collected Time

: 27/01/2024 10:00

Reported On

27/01/2024 14:38

Investigations

Observed Value

Bio. Ref. Interval

METHOD

MEDIWHEEL FULL BODY B UNISEX

ipid Test			
TOTAL CHOLESTEROL	183.96	130 - 200 mg/dl	
TRIGLYCERIDES	195.34	25 - 160 mg/dl	
HDL CHOLESTEROL	32.98	35 - 80 mg/dl	
LDL CHOLESTEROL	111.91	< 100 mg/dl	
VLDL CHOLESTEROL	39.07	7 - 35 mg/dl	
LDL-HDL RATIO	3.39	< 3.5 mg/dl	
TC-HDL CHOLESTEROL RATIO	5.58	2.5 - 4.0 mg/dl	

INTERPRETATION

SAMPLE: SERUM, PLAIN

Note: Non HDL is the best risk predictor of all cholesterol measures, both for CAD(Coronary Artery Diseases) events and for strokes. High Risk patients like Diabetics, Hypertension . With family history of IHD, Smokers, the Desirable reference values for cholesterol & Triglyceride are further reduced by 10 mg % each.

*VLDL and LDL Calculated.

(References: Interpretation of Diagnostic Tests by Wallach's) Technique: Fully Automated Pentra C-200 Biochemistry Analyzer.

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

--- End of the Report ---

Dr. Vipul Jain M.D.(PATH)

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VRX HEALTH CARE PVT. LTD.

Name

: MR. ANKIT CHATURVEDI

Age/Gender

35 Years 8 Months /M

PERFORMED ON FULLY AUTOMATED PENTRA C-200 BIOCHEMISTRY ANALYZER.

Referred By

: MEDIWHEEL

ld

: VRX-36411

Registered On

: 27/01/2024 08:36

Collected Time

: 27/01/2024 10:00

Reported On

: 27/01/2024 14:38

Investigations

Observed Value

Bio. Ref. Interval

METHOD

	MEDIW	HEEL FULL BODY B UNISEX	
IVER FUNCTION TEST			
SGOT	24.5	5 - 40 U/L	
SGPT	27.2	5 - 45 U/L	
TOTAL BILIRUBIN	0.55	0.1 - 1.2 mg/dl	
DIRECT BILIRUBIN	0.15	Adult: < 0.2 mg/dl Infant: 0.2 - 8 mg/dl	
INDIRECT BILIRUBIN	0.4	0.1 - 1.0 mg/dl	
TOTAL PROTEINS	8.31	6.0 - 8.3 g/dl	
ALBUMIN	4.44	3.5 - 5.2 g/dl	
GLOBULIN	3.87	2.0 - 3.5 g/dl	
A/G RATIO	1.15	1.0 - 2.0 mg/dl	
ALKALINE PHOSPHATASE	90.8	53 - 128 U/L	
GGT	13.3	3 - 60 U/L	

--- End of the Report ---

Dr. Vipul Jain M.D.(PATH)

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ENTERED BY - SANTOSH M

SAMPLE: SERUM, PLAIN

CHECKED BY - SNEHA G





VRX HEALTH CARE PVT. LTD.

Name : MR. ANKIT CHATURVEDI

Age/Gender : 35 Years 8 Months /M

Referred By : MEDIWHEEL

: VRX-36411

Id

Registered On : 27/01/2024 08:36

Collected Time : 27/01/2024 10:00 Reported On : 27/01/2024 14:38

Investigations	Observed Value	Bio. Ref. Interval	METHOD
	MEDIWHEEL	FULL BODY B UNISEX	
URIC ACID	7.17	3.5 - 7.2 mg/dl	URICASE
BUN			
UREA	18.3	19 - 44 mg/dl	
BLOOD UREA NITROGEN	8.58	9.0 - 20.5 mg/dl	
BUN / CREAT RATIO			
BUN (Blood Urea Nitrogen)	8.58	7.9 - 21.1 mg/dL	
Creatinine	1.15	0.5 - 1.4 mg/dL	
BUN/Creatinine Ratio	7.46	5.0 - 23.5	

--- End of the Report ---

NRJain

9001:2015

Dr. Vipul Jain M.D.(PATH)

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ENTERED BY - SANTOSH M

CHECKED BY - SNEHA G





Mr. Ankit Chaturvedi

Age/Gender:

VRX HEALTH CARE PVT. LTD.

Day(s)/Female

Referred By:

N.A

Client Name:

N.A

Collection Date:

27-01-2024 14:33:00

Report Release Date:

27-01-2024 15:26:08

No.	Investigation	Observed Value	Unit	Biological Reference Interval
Thy	vroid Profile - Total T3,Total T4,TSF	H (TFT)		
1	Total T3 Serum, Method: CLIA	129.38	ng/dL	60 - 200
2	Total T4 Scrum, Method: CLIA	9.4	μg/dL	4.5 - 14.5
3	TSH (Thyroid Stimulating Hormone)	5.798	μIU/ml	0.35 - 5.5

Interpretation

Serum, Method: CLIA

- 1. Triodothyronine (T3) is produced by the thyroid gland and along with thyroxine (T4) help control the rate at which the body uses energy. Elevated T3 denote hyperthyroidism while low levels indicate hypothyroidism.
- 2. The most common causes of thyroid dysfunction are related to autoimmune disorders. Graves disease causes hyperthyroidism, but it can also be caused by thyroiditis, thyroid cancer, and excessive production of TSH. Total T3 is used to assess thyroid function.
- 3. Elevated T4 levels may indicate hyperthyroidism. They may also indicate other thyroid problems, such as thyroiditis or toxic multinodular goiter. Abnormally low levels of T4 may indicate: dietary issues, such as fasting, malnutrition, or an iodine deficiency, medications that affect protein levels, hypothyroidism, illness.
- 4. Thyroid-stimulating hormone (TSH) stimulates the production and release of T4 (primarily) and T3. They help control the rate at which the body uses energy and are regulated by a feedback system. Most of the T4 circulates in the blood bound to protein, while a small percentage is free (not bound).
- 5. Lab has estimated Total T4 reference intervals that are specific for India, using the indirect sampling technique following CLSI EP28-A3c document: Defining Establishing, and Verifying Reference Intervals in the Clinical Laboratory: Approved Guideline-Third Edition.
- 5. Thyroid hormone status during pregnancy:

Pregnancy stage	TSH (μIU/ml)	T3 (ng/dl)	T4 (μg/dL)
First trimester	0.05-3.70	71-175	6.5-10.1
Second trimester	0.31-4.35	91-195	7.5-10.3
Third trimester	0,41-5.18	104-182	6.3-9.7

End Of Report

* The analyte is not in the lab scope.

CRM No:6928896

Sample Recd. Time: 27-01-2024 14:35

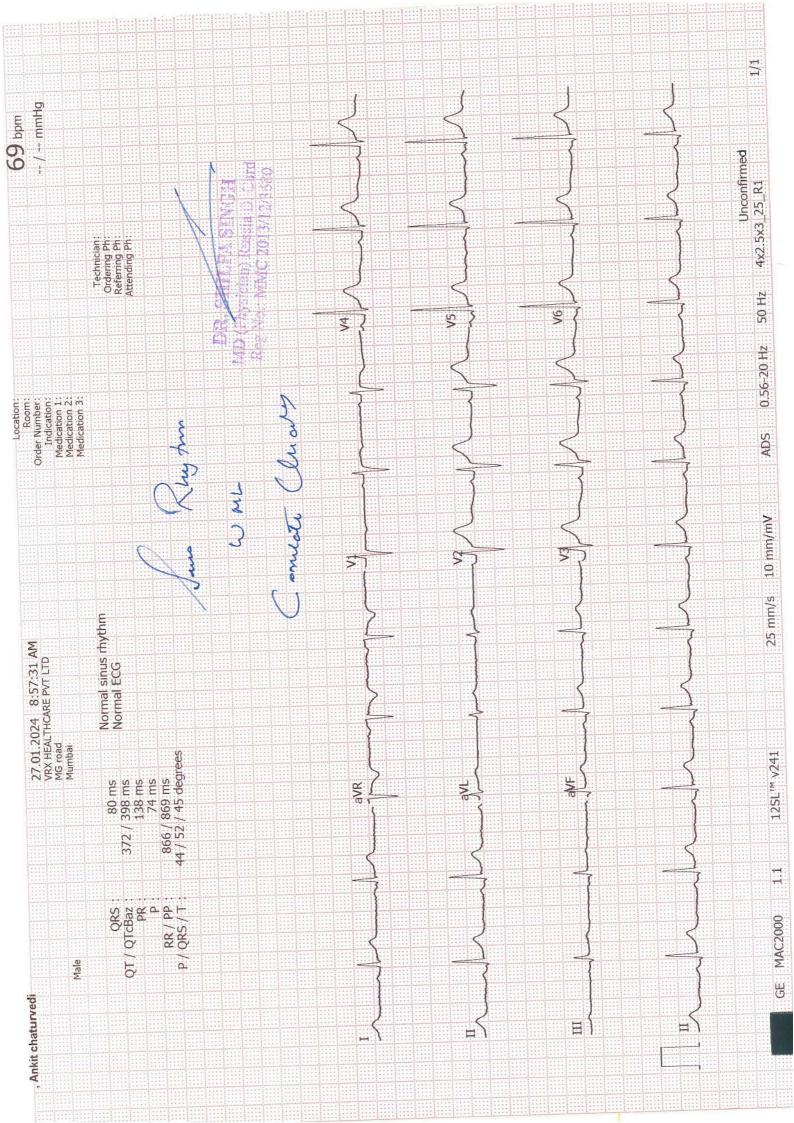
Report Time: 27-01-2024 15:26

Patient NanRhysionkioungev&dDiagno Lounge (VR. Patient H): 6928896

Dr. Sunil Kode (Health Care Pyt. Ltd.) MBBS, PB(Pathology)



COME DAY DOWN







VRX HEALTH CARE PVT. LTD.

NAME

: MR. ANKIT CHATURVEDI

DATE: 27/01/2024

REF. BY

: DR. MEDIWHEEL

AGE: 35YRS/M

EXAMINATION

: X-RAY CHEST PA VIEW

Both the lungs are essentially clear and show normal bronchial and vascular pattern.

Pleural spaces appear clear.

Both domes of diaphragm are in normal position.

Bony thorax appears normal.

Cardiac size is within normal limits.

Remark:

No pleuro parenchymal abnormality noted.

DR. CHETAN SHETH

(CONSULTANT RADIOLOGIST).

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X RAY is known to have inter-observer variations. Further / Follow-up imaging may be needed in some case for confirmation of findings Please interpret accordingly. In case of any typographical error in the report, patient is requested to immediately contact the center for rectification within 7 days post which the center will not be responsible for any rectification.



