

Patient Name : Mr.AMIT PANDEY	Visit No : CHA250037432
Age/Gender : 45 Y/M	Registration ON : 02/Mar/2025 08:07AM
Lab No : 10134727	Sample Collected ON : 02/Mar/2025 08:09AM
Referred By : SELF	Sample Received ON : 02/Mar/2025 08:36AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 02/Mar/2025 10:06AM
Doctor Advice : CBC (WHOLE BLOOD),CREATININE,FASTING,LFT,LIPID-PROFILE,NA+K+,UREA,T3T4TSH	



MASTER HEALTH CHECKUP 1

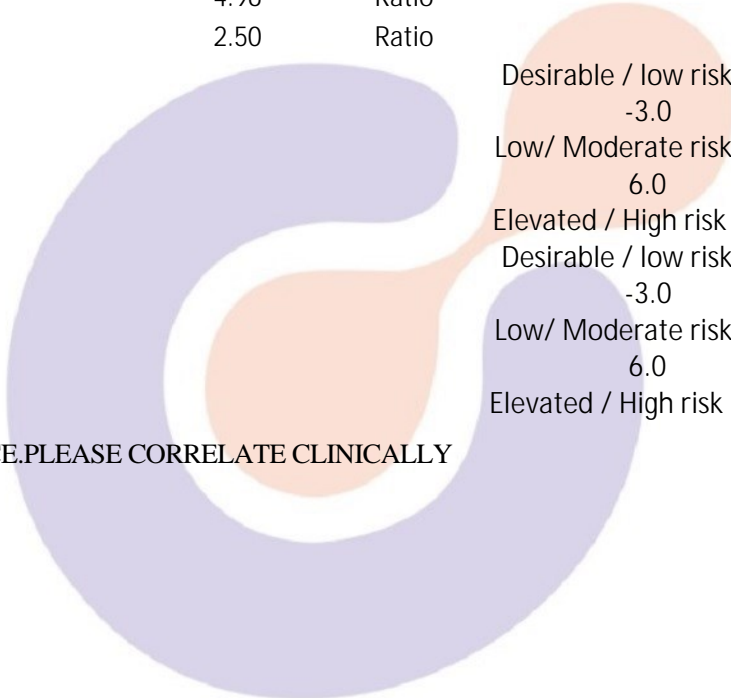
Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIPID-PROFILE

Cholesterol/HDL Ratio	4.96	Ratio		Calculated
LDL / HDL RATIO	2.50	Ratio		Calculated

Desirable / low risk - 0.5
-3.0
Low/ Moderate risk - 3.0-
6.0
Elevated / High risk - >6.0
Desirable / low risk - 0.5
-3.0
Low/ Moderate risk - 3.0-
6.0
Elevated / High risk - > 6.0

FINDING CHECKED TWICE.PLEASE CORRELATE CLINICALLY



CHARAK

[Checked By]

Print.Date/Time: 02-03-2025 12:30:10

*Patient Identity Has Not Been Verified. Not For Medicolegal



Sharma

DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)

Patient Name : Mr. AMIT PANDEY	Visit No : CHA250037432
Age/Gender : 45 Y/M	Registration ON : 02/Mar/2025 08:07AM
Lab No : 10134727	Sample Collected ON : 02/Mar/2025 08:09AM
Referred By : SELF	Sample Received ON : 02/Mar/2025 08:29AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 02/Mar/2025 10:06AM
Doctor Advice : CBC (WHOLE BLOOD), CREATININE, FASTING, LFT, LIPID-PROFILE, NA+K+, UREA, T3T4TSH	



MASTER HEALTH CHECKUP 1

Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	16.4	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	5.70	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	54.0	%	36 - 45	Pulse height detection
MCV	95.1	fL	80 - 96	calculated
MCH	28.9	pg	27 - 33	Calculated
MCHC	30.4	g/dL	30 - 36	Calculated
RDW	13.6	%	11 - 15	RBC histogram derivation
RETIC	0.9 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	6610	/cmm	4000 - 10000	Floctometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	50	%	40 - 75	Flowcytometry
LYMPHOCYTES	45	%	25 - 45	Flowcytometry
EOSINOPHIL	3	%	1 - 6	Flowcytometry
MONOCYTE	2	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	121,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	130,000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	3,305	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,974	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	198	/cmm	20-500	Calculated
Absolute Monocytes Count	132	/cmm	200-1000	Calculated
Mentzer Index	17			
Peripheral Blood Picture	:			

.Red blood cells are normocytic normochromic. Platelets are reduced. No immature cells or parasite seen.



[Checked By]



Sham

DR. NISHANT SHARMA PATHOLOGIST DR. SHADAB PATHOLOGIST Dr. SYED SAIF AHMAD MD (MICROBIOLOGY)

Patient Name : Mr. AMIT PANDEY Visit No : CHA250037432
Age/Gender : 45 Y/M Registration ON : 02/Mar/2025 08:07AM
Lab No : 10134727 Sample Collected ON : 02/Mar/2025 08:09AM
Referred By : SELF Sample Received ON : 02/Mar/2025 08:36AM
Refer Lab/Hosp : CHARAK NA Report Generated ON : 02/Mar/2025 10:06AM
Doctor Advice : CBC (WHOLE BLOOD), CREATININE, FASTING, LFT, LIPID-PROFILE, NA+K+, UREA, T3T4TSH



MASTER HEALTH CHECKUP 1

Test Name	Result	Unit	Bio. Ref. Range	Method
FASTING				
Blood Sugar Fasting	92.8	mg/dl	70 - 110	Hexokinase
NA+K+				
SODIUM Serum	136.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.0	MEq/L	3.5 - 5.5	ISE Direct
BLOOD UREA				
BLOOD UREA	25.20	mg/dl	15 - 45	Urease, UV, Serum
SERUM CREATININE				
CREATININE	0.70	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
LIVER FUNCTION TEST				
TOTAL BILIRUBIN	0.56	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.09	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.47	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	118.10	U/L	30 - 120	PNPP, AMP Buffer
SGPT	39.0	U/L	5 - 40	UV without P5P
SGOT	30.0	U/L	5 - 40	UV without P5P

CHARAK



[Checked By]



Sharma

DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)

Patient Name : Mr. AMIT PANDEY	Visit No : CHA250037432
Age/Gender : 45 Y/M	Registration ON : 02/Mar/2025 08:07AM
Lab No : 10134727	Sample Collected ON : 02/Mar/2025 08:09AM
Referred By : SELF	Sample Received ON : 02/Mar/2025 08:36AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 02/Mar/2025 10:06AM
Doctor Advice : CBC (WHOLE BLOOD),CREATININE,FASTING,LFT,LIPID-PROFILE,NA+K+,UREA,T3T4TSH	



MASTER HEALTH CHECKUP 1				
Test Name	Result	Unit	Bio. Ref. Range	Method

LIPID-PROFILE				
TOTAL CHOLESTEROL	245.20	mg/dL	Desirable: <200 mg/dl Borderline-high: 200-239 mg/dl High: >/=240 mg/dl	CHOD-PAP
TRIGLYCERIDES	361.90	mg/dL	Normal: <150 mg/dl Borderline-high:150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Serum, Enzymatic, endpoint
H D L CHOLESTEROL	49.40	mg/dL	30-70 mg/dl	CHER-CHOD-PAP
L D L CHOLESTEROL	123.42	mg/dL	Optimal:<100 mg/dl Near Optimal:100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High:>/= 190 mg/dl	CO-PAP
VLDL	72.38	mg/dL	10 - 40	Calculated

FINDING CHECKED TWICE.PLEASE CORRELATE CLINICALLY

CHARAK



[Checked By]



Sham

DR. NISHANT SHARMA PATHOLOGIST DR. SHADAB PATHOLOGIST Dr. SYED SAIF AHMAD MD (MICROBIOLOGY)

Patient Name : Mr.AMIT PANDEY Visit No : CHA250037432
Age/Gender : 45 Y/M Registration ON : 02/Mar/2025 08:07AM
Lab No : 10134727 Sample Collected ON : 02/Mar/2025 08:09AM
Referred By : SELF Sample Received ON : 02/Mar/2025 08:36AM
Refer Lab/Hosp : CHARAK NA Report Generated ON : 02/Mar/2025 10:06AM
Doctor Advice : CBC (WHOLE BLOOD),CREATININE,FASTING,LFT,LIPID-PROFILE,NA+K+,UREA,T3T4TSH



MASTER HEALTH CHECKUP 1

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

T3T4TSH				
T3	2.12	nmol/L	1.49-2.96	ECLIA
T4	155.17	n mol/l	63 - 177	ECLIA
TSH	6.90	uIU/ml	0.47 - 4.52	ECLIA

Note

- (1) Patients having low T3 & T4 levels but high TSH levels suffer from primary hypothyroidism,cretinism,juvenile mysedema or autoimmune disorders.
- (2) Patients having low T3 & T4 levels but high TSH levels suffer from grave~s disease, toxic adenoma or sub-acute thyroiditis.
- (3) Patients having either low or normal T3 & T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- (4) Patients having high T3 & T4 levels but normal TSH levels may suffer from toxic multinodular goitre. This condition is mostly asymptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- (5) Patient with high or normal T3 & T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 Toxicosis respectively.
- (6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the cacabolic state and may revert tonormal when the patient recovers.
- (7) There are many drugs for eg.Glucocorticoids ,dopamine,Lithium,iodides ,oral radiographic dyes,ets.Which may affect the thyroid function tests.
- (8) Generally when total T3& T4 results are indecisive then Free T3 & Free T4 test are recommended for further confirmation along with

(1 Beckman Dxi-600 2. ELECTRO-CHEMILUMINISCENCE TECHNIQUE BY ELECSYSYS -E411)

*** End Of Report ***



[Checked By]



Sham

DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)