

Patient Name : Mr.RATNESH SHUKLA	Visit No : CHA250044968
Age/Gender : 38 Y/M	Registration ON : 13/Mar/2025 08: 22AM
Lab No : 10142263	Sample Collected ON : 13/Mar/2025 08: 31AM
Referred By : Dr.APEX HOSPITAL AND SUPER S	Sample Received ON : 13/Mar/2025 09: 16AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 13/Mar/2025 10: 15AM
Doctor Advice : FIBRO SCAN,URIC ACID,25 OH vit. D,CBC (WHOLE BLOOD),CREATININE,HBA1C (EDTA),LFT,LIPID-PROFILE,NA+K+,UREA,VIT B12,T3T4TSH,FASTING	



MASTER HEALTH CHECKUP 4				
Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C				
Glycosylated Hemoglobin (HbA1c)	5.0	%	4 - 5.7	HPLC (EDTA)

NOTE:-

Glycosylated Hemoglobin Test (HbA1c) is performed in this laboratory by the Gold Standard Reference method, ie: HPLC Technology (High performance Liquid Chromatography D10) from Bio-Rad Laboratories, USA.

EXPECTED (RESULT) RANGE :

Bio system	Degree of normal
4.0 - 5.7 %	Normal Value (OR) Non Diabetic
5.8 - 6.4 %	Pre Diabetic Stage
> 6.5 %	Diabetic (or) Diabetic stage
6.5 - 7.0 %	Well Controlled Diabet
7.1 - 8.0 %	Unsatisfactory Control
> 8.0 %	Poor Control and needs treatment

URIC ACID				
Sample Type : SERUM				
SERUM URIC ACID	4.9	mg/dL	2.40 - 5.70	Uricase, Colorimetric

LIPID-PROFILE				
Cholesterol/HDL Ratio	3.87	Ratio		Calculated
LDL / HDL RATIO	2.53	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



[Checked By]

Print.Date/Time: 13-03-2025 12:30:11

*Patient Identity Has Not Been Verified. Not For Medicolegal

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

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Test Name	Result	Unit	Bio. Ref. Range	Method

CBC (COMPLETE BLOOD COUNT)				
Hb	15.0	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	5.10	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	46.5	%	36 - 45	Pulse height detection
MCV	91.2	fL	80 - 96	calculated
MCH	29.4	pg	27 - 33	Calculated
MCHC	32.3	g/dL	30 - 36	Calculated
RDW	13.9	%	11 - 15	RBC histogram derivation
RETIC	0.8 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	7690	/cmm	4000 - 10000	Floctometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	57	%	40 - 75	Flowcytometry
LYMPHOCYTES	40	%	25 - 45	Flowcytometry
EOSINOPHIL	1	%	1 - 6	Flowcytometry
MONOCYTE	2	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	201,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	201000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	4,383	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	3,076	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	77	/cmm	20-500	Calculated
Absolute Monocytes Count	154	/cmm	200-1000	Calculated
Mentzer Index	18			
Peripheral Blood Picture	:			

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



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MASTER HEALTH CHECKUP 4

Test Name	Result	Unit	Bio. Ref. Range	Method
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FASTING				
Blood Sugar Fasting	96.1	mg/dl	70 - 110	Hexokinase

NA+K+				
SODIUM Serum	143.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.0	MEq/L	3.5 - 5.5	ISE Direct

BLOOD UREA				
BLOOD UREA	23.90	mg/dl	15 - 45	Urease, UV, Serum

SERUM CREATININE				
CREATININE	0.90	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic

LIVER FUNCTION TEST				
TOTAL BILIRUBIN	0.70	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.30	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.40	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	76.70	U/L	30 - 120	PNPP, AMP Buffer
SGPT	13.5	U/L	5 - 40	UV without P5P
SGOT	14.8	U/L	5 - 40	UV without P5P

CHARAK



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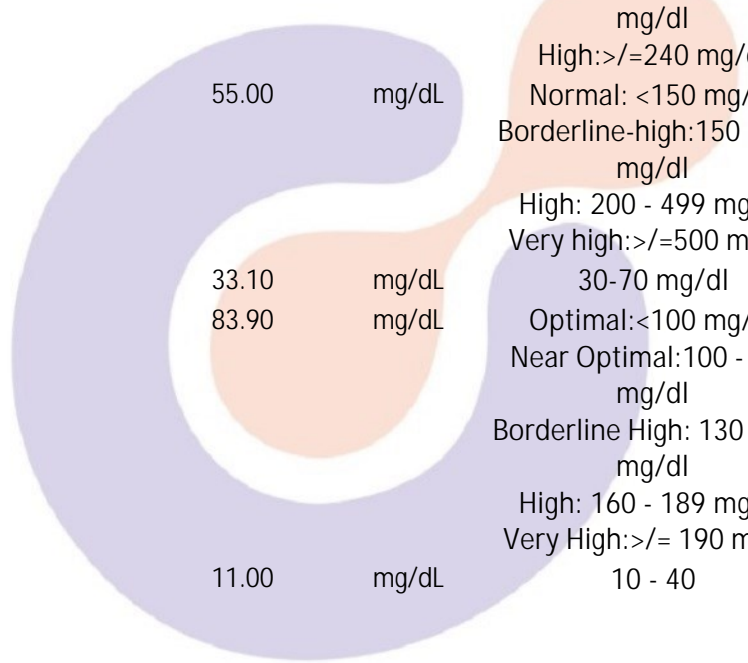
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Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID-PROFILE				
TOTAL CHOLESTEROL	128.00	mg/dL	Desirable: <200 mg/dl Borderline-high: 200-239 mg/dl High:>=240 mg/dl	CHOD-PAP
TRIGLYCERIDES	55.00	mg/dL	Normal: <150 mg/dl Borderline-high:150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>=500 mg/dl	Serum, Enzymatic, endpoint
H D L CHOLESTEROL	33.10	mg/dL	30-70 mg/dl	CHER-CHOD-PAP
L D L CHOLESTEROL	83.90	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	11.00	mg/dL	10 - 40	Calculated



CHARAK



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Test Name	Result	Unit	Bio. Ref. Range	Method

T3T4TSH				
T3	1.80	nmol/L	1.49-2.96	ECLIA
T4	120.00	n mol/l	63 - 177	ECLIA
TSH	8.60	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 ***



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