

smart Health Report

An Insightful Health Analytics Report
for Easier Understanding



Prepared For

Ms SUMAN SINGH

F 58

Name
Ms SUMAN SINGH

Patient ID
1_3501228

Gender
F

Age
58

Health Summary



BLOOD COUNTS

Test Name	Result
Abs. Lymphocyte Count	3.2
Please Watchout	



THYROID PROFILE

Test Name	Result
TSH	5.47
Please Watchout	



LIPID PROFILE

Test Name	Result
Total Cholesterol	260
Triglycerides	390.5
LDL Cholesterol	123.3
+ 2 tests Please Watchout	



DIABETES MONITORING

Test Name	Result
Blood Sugar (Fasting)	143.6
Please Watchout	



KIDNEY PROFILE

Test Name	Result
BUN : Creatinine ratio	20.03
Please Watchout	



LIVER PROFILE

Test Name	Result
GGT	59.2
AST / ALT Ratio	0.69
Please Watchout	



ELECTROLYTES AND MINERALS

Everything looks good



ANEMIA STUDIES

Test Name	Result
RDW-SD	44.1
Please Watchout	



VITAMIN PROFILE

Test Name	Result
Vitamin D (25-Hydroxy)	18.57
Please Watchout	



MINERAL PROFILE

Everything looks good



Patient Name : Ms SUMAN SINGH	Bill Date : Mar 11, 2023, 12:09 PM
DOB/Age/Gender : 58 Y/Female	Sample Collected : Mar 12, 2023, 07:00 AM
Patient ID / UHID : 1_3501228/RCL2821163	Sample Received : Mar 12, 2023, 01:20 PM
Referred By : Dr.	Report Date : Mar 12, 2023, 01:31 PM
Sample Type : Whole blood EDTA	Barcode No : HT198163
Client : HOME COLLECTION - MEERUT	Report Status : Final Report

Test Description	Value(s)	Unit(s)	Reference Range
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HEMATOLOGY REPORT
Smart Full Body Check up with Vitamin D
Complete Blood Count (CBC)

RBC PARAMETERS

Hemoglobin	13.0	g/dL	13.0 - 17.0
Method : colorimetric			
RBC Count	4.2	10 ⁶ /μl	3.8 - 4.8
Method : Electrical impedance			
PCV	38.3	%	36 - 46
Method : Calculated			
MCV	90.2	fl	83 - 101
Method : Calculated			
MCH	30.2	pg	27 - 32
Method : Calculated			
MCHC	33.5	g/dL	31.5 - 34.5
Method : Calculated			
RDW (CV)	13.5	%	11.6 - 14.0
Method : Calculated			
RDW-SD	44.1	fl	35.1 - 43.9
Method : Calculated			

WBC PARAMETERS

TLC	8	10 ³ /μl	4 - 10
Method : Electrical impedance and microscopy			

DIFFERENTIAL LEUCOCYTE COUNT

Neutrophils	53	%	40-80
Lymphocytes	40	%	20-40
Monocytes	5	%	2-10
Eosinophils	2	%	1-6
Basophils	0	%	<2

Absolute leukocyte counts

Method : Calculated

Neutrophils*	4.24	10 ³ /μl	2 - 7
Lymphocytes*	3.2	10 ³ /μl	1 - 3
Monocytes*	0.4	10 ³ /μl	0.2 - 1.0
Eosinophils*	0.16	10 ³ /μl	0.02 - 0.5
Basophils*	0	10 ³ /μl	0.02 - 0.5

PLATELET PARAMETERS

Platelet Count	274	10 ³ /μl	150 - 410
Method : Electrical impedance and microscopy			
Mean Platelet Volume (MPV)	12.7	fL	9.3 - 12.1
Method : Calculated			



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PCT Method : Calculated	0.3	%	0.17 - 0.32
PDW Method : Calculated	15.3	fL	8.3 - 25.0
P-LCR Method : Calculated	46.1	%	18 - 50
P-LCC Method : Calculated	127	%	44 - 140
Mentzer Index Method : Calculated	21.48	%	

Interpretation:

CBC provides information about red cells, white cells and platelets. Results are useful in the diagnosis of anemia, infections, leukemias, clotting disorders and many other medical conditions.



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Referred By	: Dr.	Report Date	: Mar 12, 2023, 02:08 PM
Sample Type	: Whole blood EDTA	Barcode No	: HT198163
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Test Description	Value(s)	Unit(s)	Reference Range
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HEMATOLOGY REPORT
Smart Full Body Check up with Vitamin D
Erythrocyte Sedimentation Rate (ESR)

ESR - Erythrocyte Sedimentation Rate	30	mm/hr	0 - 19
Method : MODIFIED WESTERGREN			

Interpretation:

Indicates presence and intensity of an inflammatory process; never diagnostic of a specific disease. ESR is increased in chronic inflammatory diseases, especially collagen and vascular diseases. Decreased ESR is seen in congestive heart failure, cachexia and after high dose of adrenal steroids.



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Referred By	: Dr.	Report Date	: Mar 12, 2023, 02:31 PM
Sample Type	: FLUORIDE F	Barcode No	: BH500288
Client	: HOME COLLECTION - MEERUT	Report Status	: Final Report

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY REPORT
Smart Full Body Check up with Vitamin D
Glucose Fasting (BSF)

GLUCOSE FASTING Method : Hexokinase	143.6	mg/dL	< 100 mg/dL: Normal 100–125 mg/dL: Prediabetes >=126 mg/dL: Diabetes
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Interpretation:

Normal: 70-99
 Impaired Tolerance: 100-125
 Diabetes mellitus: >= 126
 (on more than one occasion) (American diabetes association guidelines 2018)



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Referred By	: Dr.	Report Date	: Mar 12, 2023, 02:34 PM
Sample Type	: Serum	Barcode No	: BH500289
Client	: HOME COLLECTION - MEERUT	Report Status	: Final Report

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY REPORT

Smart Full Body Check up with Vitamin D

Liver Function Test (LFT)

BILIRUBIN TOTAL Method : Photometric	0.2	mg/dL	0.2 - 1.2
BILIRUBIN DIRECT Method : Diazonium	0.1	mg/dL	0.0 - 0.5
BILIRUBIN INDIRECT Method : Calculation (T Bil - D Bil)	0.1	mg/dL	0.1 - 1.0
SGOT/AST Method : IFCC without P5P	7.2	U/L	5 - 35
SGPT/ALT Method : IFCC without P5P	10.4	U/L	5 - 45
SGOT/SGPT Ratio	0.69	-	-
ALKALINE PHOSPHATASE Method : p-nitrophenyl Phosphate, AMP buffer	97	U/L	20-130
TOTAL PROTEIN Method : Biuret	7.0	g/dL	6.0 - 7.8
ALBUMIN Method : BCG	4.1	gm/dL	3.8 - 5.0
GLOBULIN Method : Calculation (T.P - Albumin)	2.9	g/dL	2.3 - 3.5
ALBUMIN : GLOBULIN RATIO Method : Calculation (Albumin/Globulin)	1.41	-	1.0 - 2.1
GAMMA GLUTAMYL TRANSFERASE (GGT) Method : ENZYMATIC	59.2	U/L	5-40

Interpretation:

The liver filters and processes blood as it circulates through the body. It metabolizes nutrients, detoxifies harmful substances, makes blood clotting proteins, and performs many other vital functions. The cells in the liver contain proteins called enzymes that drive these chemical reactions. When liver cells are damaged or destroyed, the enzymes in the cells leak out into the blood, where they can be measured by blood tests. Liver tests check the blood for two main liver enzymes. Aspartate aminotransferase (AST), SGOT: The AST enzyme is also found in muscles and many other tissues besides the liver. Alanine aminotransferase (ALT), SGPT: ALT is almost exclusively found in the liver. If ALT and AST are found together in elevated amounts in the blood, liver damage is most likely present. Alkaline Phosphatase and GGT: Another of the liver's key functions is the production of bile, which helps digest fat. Bile flows through the liver in a system of small tubes (ducts), and is eventually stored in the gallbladder, under the liver. When bile flow is slow or blocked, blood levels of certain liver enzymes rise: Alkaline phosphatase Gamma-utamil transpeptidase (GGT) Liver tests may check for any or all of these enzymes in the blood. Alkaline phosphatase is by far the most commonly tested of the three. If alkaline phosphatase and GGT are elevated, a problem with bile flow is most likely present. Bile flow problems can be due to a problem in the liver, the gallbladder, or the tubes connecting them. Proteins are important building blocks of all cells and tissues. Proteins are necessary for your body's growth, development, and health. Blood contains two classes of protein, albumin and globulin. Albumin proteins keep fluid from leaking out of blood vessels. Globulin proteins play an important role in your immune system. Low total protein may indicate: 1.bleeding 2.liver disorder 3.malnutrition 4.agammaglobulinemia High Protein levels 'Hyperproteinemia: May be seen in dehydration due to inadequate water intake or to excessive water loss (eg, severe vomiting, diarrhea, Addison's disease and diabetic acidosis) or as a result of increased production of proteins Low albumin levels may be caused by: 1.A poor diet (malnutrition). 2.Kidney disease. 3.Liver disease. High albumin levels may be caused by: Severe dehydration.



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Referred By	: Dr.	Report Date	: Mar 12, 2023, 02:26 PM
Sample Type	: Serum	Barcode No	: BH500289
Client	: HOME COLLECTION - MEERUT	Report Status	: Final Report

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY REPORT

Smart Full Body Check up with Vitamin D

Kidney Function Test (KFT)

BLOOD UREA Method : Urea GLDH	30	mg/dL	16.6 - 48.5
CREATININE Method : Modified Jaffe	0.7	mg/dL	0.6 - 1.2
BUN Method : Urease	14.02	mg/dL	6 - 20
BUN/CREATININE RATIO	20.03		
UREA / CREATININE RATIO	42.86		
URIC ACID Method : Uricase	5.7	mg/dL	3.5 - 7.2
CALCIUM Serum Method : O-Cresolphthalein Complex	8.9	mg/dL	8.9 - 10.7
PHOSPHORUS Method : Colorimetric - Phosphomolybdate Formation	4.7	mg/dL	2.3 - 4.7
SODIUM Method : ISE	136.6	mmol/L	135.0 - 145.0
POTASSIUM Method : Direct ISE	4.6	mmol/L	3.5 - 5.0
CHLORIDE Method : Indirect ISE	104.2	mmol/L	95 - 107

Interpretation:

SUMMARY:-

Kidney function tests is a collective term for a variety of individual tests and procedures that can be done to evaluate how well the kidneys are functioning. Many conditions can affect the ability of the kidneys to carry out their vital functions. Some lead to a rapid (acute) decline in kidney function, others lead to a gradual (chronic) decline in function. Both result in a buildup of toxic waste substances done on urine samples, as well as on blood samples. A number of symptoms may indicate a problem with your kidneys. These include: high blood pressure, blood in urine, frequent urges to urinate, difficulty beginning urination, painful urination, swelling in the hands and feet due to a buildup of fluids in the body. A single symptom may not mean something serious. However, when occurring simultaneously, these symptoms suggest that your kidneys are not working properly. Kidney function tests can help determine the reason. Electrolytes (sodium, potassium, and chloride) are present in the human body and the balancing act of the electrolytes in our bodies is essential for normal function of our cells and organs. There has to be a balance. Ionized calcium this test if you have signs of kidney or parathyroid disease. The test may also be done to monitor progress and treatment of these diseases.



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Referred By : Dr.	Report Date : Mar 12, 2023, 02:34 PM
Sample Type : Serum	Barcode No : BH500289
Client : HOME COLLECTION - MEERUT	Report Status : Final Report

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY REPORT

Smart Full Body Check up with Vitamin D

Lipid Profile

TOTAL CHOLESTEROL Method : Enzymatic - Cholesterol Oxidase	260	mg/dL	Desirable : <200 Borderline : 200-239 High : >240
TRIGLYCERIDES Method : Colorimetric - Lip/Glycerol Kinase	390.5	mg/dL	Normal : <150 Borderline : 150-199 High : 200-499 Very high : >500
HDL CHOLESTEROL Method : Phosphotungstic acid- Enzymatic	58.6	mg/dL	35 - 60
NON HDL CHOLESTEROL Method : Calculated	201.4	mg/dL	<130
LDL CHOLESTEROL Method : Calculated	123.3	mg/dL	Optimal <100 Near optimal/above optimal 100-129 Borderline high 130-159 High 160-189 Very high =190
V.L.D.L CHOLESTEROL Method : Calculated	78.1	mg/dL	< 30
CHOL/HDL Ratio Method : Calculated	4.44	-	3.5 - 5.0
HDL/ LDL RATIO Method : Calculated	0.48	-	Desirable : 0.5 - 3.0 Borderline : 3.1 - 6.0 High : > 6.0
LDL/HDL Ratio Method : Calculated	2.1	-	-

Interpretation:

Lipid level assessments must be made following 9 to 12 hours of fasting, otherwise assay results might lead to erroneous interpretation. NCEP recommends of 3 different samples to be drawn at intervals of 1 week for harmonizing biological variables that might be encountered in single assays.

NATIONAL LIPID ASSOCIATION RECOMMENDATIONS (NLA-2014)	TOTAL CHOLESTEROL in mg/dL	TRIGLYCERIDE in mg/dL	LDL CHOLESTEROL in mg/dL	NON HDL CHOLESTEROL in mg/dL
Optimal	<200	<150	<100	<130
Above Optimal			100-129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220



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Patient ID / UHID : 1_3501228/RCL2821163	Sample Received : Mar 12, 2023, 01:20 PM
Referred By : Dr.	Report Date : Mar 12, 2023, 04:25 PM
Sample Type : Serum	Barcode No : BH500289
Client : HOME COLLECTION - MEERUT	Report Status : Final Report

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY REPORT
Smart Full Body Check up with Vitamin D
Vitamin D 25 Hydroxy

Vitamin D 25 - Hydroxy Method : CMIA	18.57	ng/mL	Deficiency : <30 ng/mL
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Interpretation:

25-Hydroxy vitamin D represents the main body reservoir and transport form. Mild to moderate deficiency is associated with Osteoporosis / Secondary Hyperparathyroidism while severe deficiency causes Rickets in children and Osteomalacia in adults. Prevalence of Vitamin D deficiency is approximately >50% specially in the elderly. This assay is useful for diagnosis of vitamin D deficiency and Hypervitaminosis D. It is also used for differential diagnosis of causes of Rickets & Osteomalacia and for monitoring Vitamin D replacement therapy.



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Referred By : Dr.	Report Date : Mar 12, 2023, 04:25 PM
Sample Type : Serum	Barcode No : BH500289
Client : HOME COLLECTION - MEERUT	Report Status : Final Report

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY REPORT

Smart Full Body Check up with Vitamin D

Thyroid Profile Total

TRIIODOTHYRONINE (T3) Method : CMIA	124.9	ng/dL	35 - 193
TOTAL THYROXINE (T4) Method : CMIA	6.65	µg/dL	4.87 - 11.2
THYROID STIMULATING HORMONE (Ultrasensitive) Method : CMIA	5.47	mIU/L	0.35 - 4.94

Interpretation:

Primary malfunction of the thyroid gland may result in excessive (hyper) or below normal (hypo) release of T3 or T4. In addition as TSH directly affects thyroid function, malfunction of the pituitary or the hypo - thalamus influences the thyroid gland activity. Disease in any portion of the thyroid-pituitary-hypothalamic system may influence the levels of T3 and T4 in the blood. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in the Euthyroid Sick Syndrome, multiple alterations in serum thyroid function test findings have been recognized in patients with a wide variety of non-thyroidal illnesses (NTI) without evidence of preexisting thyroid or hypothalamic-pituitary diseases. Thyroid Binding Globulin (TBG) concentrations remain relatively constant in healthy individuals. However, pregnancy, excess estrogen's, androgen's, antibiotic steroids and glucocorticoids are known to alter TBG levels and may cause false thyroid values for Total T3 and T4 tests.

TSH	T4	T3	INTERPRETATION
High	Normal	Normal	Mild (subclinical) hypothyroidism
High	Low	Low or normal	Hypothyroidism
Low	Normal	Normal	Mild (subclinical) hyperthyroidism
Low	High or normal	High or normal	Hyperthyroidism
Low	Low or normal	Low or normal	Nonthyroidal illness; pituitary (secondary) hypothyroidism
Normal	High	High	Thyroid hormone resistance syndrome (a mutation in the thyroid hormone receptor decreases thyroid hormone function)



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Patient ID / UHID : 1_3501228/RCL2821163	Sample Received : Mar 12, 2023, 01:20 PM
Referred By : Dr.	Report Date : Mar 12, 2023, 02:54 PM
Sample Type : Spot Urine	Barcode No : CI013213
Client : HOME COLLECTION - MEERUT	Report Status : Final Report

Test Description	Value(s)	Unit(s)	Reference Range
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CLINICAL PATHOLOGY REPORT
Smart Full Body Check up with Vitamin D
Urine Routine and Microscopic Examination

PHYSICAL EXAMINATION

Volume	20	ml	
Colour	Pale yellow		Pale yellow
Transparency	Clear		Clear
Deposit	Absent		Absent

CHEMICAL EXAMINATION

Reaction (pH) Method : Double Indicator	5.0		4.5 - 8.0
Specific Gravity Method : Ion Exchange	1.010		1.010 - 1.030
Urine Glucose (sugar) Method : Oxidase / Peroxidase	Negative		Negative
Urine Protein (Albumin) Method : Acid / Base Colour Exchange	Negative		Negative
Urine Ketones (Acetone) Method : Legals Test	Negative		Negative
Blood Method : Peroxidase Hemoglobin	Negative		Negative
Leucocyte esterase Method : Enzymatic Reaction	Negative		Negative
Bilirubin Urine Method : Coupling reaction	Negative		Negative
Nitrite Method : Griess Test	Negative		Negative
Urobilinogen Method : Ehrlichs Test	Normal		Normal

MICROSCOPIC EXAMINATION

Method : Microscopy

Pus Cells (WBCs)	2-4	/hpf	0 - 5
Epithelial Cells	8 - 10	/hpf	0 - 4
Red blood Cells	Absent	/hpf	Absent
Crystals	Absent		Absent
Cast	Absent		Absent
Yeast Cells	Absent		Absent
Amorphous deposits	Absent		Absent
Bacteria	Absent		Absent
Protozoa	Absent		Absent



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CONDITIONS OF REPORTING

1. It is Presumed that specimen belongs to patient named or identified, such verification being carried out at the point of generation of said specimen

2. A test might not be performed due to following reason:

- Specimen Quantity not sufficient (Inadequate collection/spillage during transit)
- Specimen Quality not acceptable (Hemolysis/clotted/lipemic.)
- Incorrect sample type
- Test cancelled either on request of patient or doctor

In any of the above case a fresh specimen will be required for testing and reporting

3. The results of the tests may vary from lab to lab ; time to time for the same patient

4. The reported results are dependent on individual assay methods, equipment, method sensitivity, specificity and quality of the specimen received

5. Partial representation of report is not allowed

6. The reported tests are for the notification of the referring doctor, only to assist him/her in the diagnosis and management of the patient

7. If Sample collection date is not stated on test requisition form, the current date will be printed by default as the date of collection.

8. Report with status "Preliminary" means one or more test are yet to be reported

9. This report is not valid for Medico Legal Purpose

10. Applicable Jurisdiction will be of "Delhi" for any dispute/claim concerning the test(s) & results of the test (s)

Name

Ms SUMAN SINGH

Patient ID

1_3501228

Gender

F

Age

58

Health Advisory

● Normal (N) ● Low (L) ● Borderline (BL) ● High (H)



Liver Profile

One of the main functions of your liver is to make proteins that are secreted in your blood. It also makes enzymes which convert food into energy, and processes old muscles and cells. When your liver is damaged, enzymes leak into your blood and appear in the blood test

GGT: 59.2 U/L

● HIGH



Common reasons for abnormal results :



It rises whenever there is an obstruction in the passage between your liver and intestine.



Regular alcohol drinking increases GGT levels.

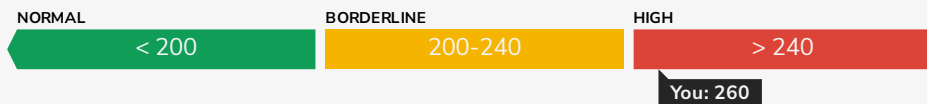


Lipid Profile

This panel measures the amount of *lipoprotein* - a type of fat required to produce energy in your body. Too much fat restricts oxygen ow to your heart, which may lead to heart disease.

Total Cholesterol: 260 mg/dL

● HIGH



Diet and Lifestyle Tips :



Eat a low-salt diet that emphasizes fruits, vegetables and whole grains.

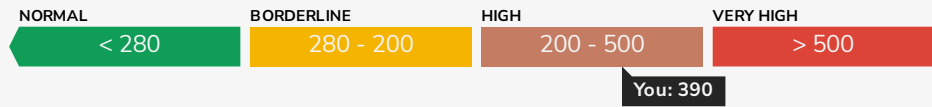


Regular aerobic exercise and weight loss (if obese) can bring your cholesterol levels in the normal healthy range.





Triglycerides: 390.5 mg/dL

● HIGH





Complications :


 High value: May contribute to hardening of the arteries or thickening of the artery walls (arteriosclerosis) — which increases the risk of stroke, heart attack and heart disease.


 Extremely high triglycerides can also cause acute inflammation of the pancreas (pancreatitis).

Diet and Lifestyle Tips :

 Exercise regularly. Aim for at least 30 minutes of physical activity on most or all days of the week. Try to incorporate more physical activity into your daily tasks — for example, climb the stairs at work or take a walk during breaks.

 Avoid sugar and refined carbohydrates.

 Lose weight. If you have mild to moderate hypertriglyceridemia, focus on cutting calories. Extra calories are converted to triglycerides and stored as fat.

 Limit how much alcohol you drink. Alcohol has a particularly potent effect on triglycerides. If you have severe hypertriglyceridemia, avoid drinking any alcohol.



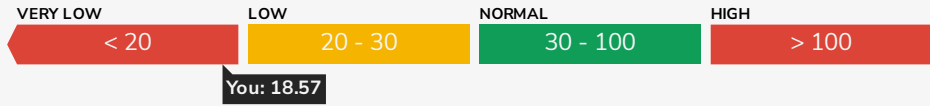


Vitamins Profile

Vitamins are considered essential nutrients because they perform hundreds of roles in your body. They help maintain bones, heal wounds, and strengthen your immune system. They also convert food into energy, and repair cellular damage

Vitamin D (25-Hydroxy): 18.57 ng/mL

● LOW



Diet and Lifestyle Tips :



Avoid very high-SPF sunscreen: Your skin naturally produces vitamin D on being exposed to sun but applying sunscreen on your skin can decrease this natural production. It is recommended that you should get a balanced amount of sunshine.



Consider supplements. Ask your doctor if Vitamin D supplements are right for you.

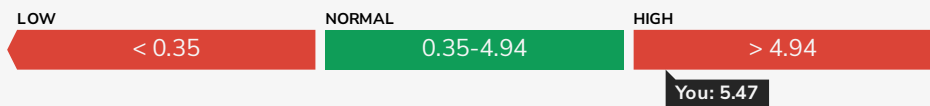


About Thyroid

This panel is used to check the imbalance in your thyroid gland. A healthy thyroid gland is very important for metabolism, controlling body temperature, regulation of mood, muscle strength and regulation of body weight

TSH: 5.47 mIU/L

● HIGH



Common reasons for abnormal results :



Hormonal changes from use of oral contraceptive pills.



Injury to the thyroid following radiation therapy



Autoimmune disorders such as Hashimoto's thyroiditis





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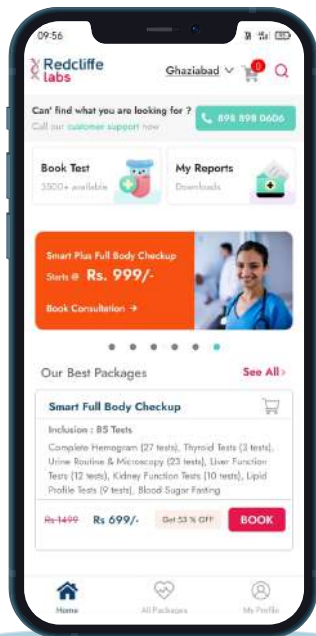
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