# **DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING**

Report: ULTRASOUND

Patient Name	:	MRS. RENU DEVI	IPD No.	:	
Age	:	38 Yrs 6 Mth	UHID	:	APH000017338
Gender	:	FEMALE	Bill No.	:	APHHC230001094
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	27-09-2023 08:16:55
Ward	:		Room No.	:	
			Print Date	:	27-09-2023 11:06:12

## **WHOLE ABDOMEN:**

Both the hepatic lobes are normal in size and echotexture (Liver measures 14.7 cm)

No focal lesion seen. Intrahepatic biliary radicals are not dilated.

Portal vein is normal in calibre.

Gall bladder is well distended. Wall thickness is normal. No calculus seen.

CBD is normal in calibre.

Pancreas is normal in size and echotexture.

Spleen is normal in size (7.6 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.2 cm), Left kidney (11.0 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 7.9 x 4.4 x 3.5 cm) and appears normal in size and echotexture. No focal lesion seen. Cervix and vagina are unremarkable.

Endometrial echo is central and normal in thickness (7.9 mm).

Both ovaries are normal in size and echotexture. Right ovary measures  $2.4 \times 1.5$  cm, left ovary measures  $2.5 \times 1.3$  cm.

No free fluid or collection seen. No basal pleural effusion seen.

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION: Normal study.	
Please correlate clinically	
End of Report	
Prepare By. MD.SALMAN	DR. MUHAMMAD SERAJ, MD,FRCR (London) Radiodiagnosis

**Note:** The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation.

CONSULTANT

# **DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING**

Report : XRAY

Patient Name	:	MRS. RENU DEVI	IPD No.	:	
Age	:	38 Yrs 6 Mth	UHID	T:	APH000017338
Gender	:	FEMALE	Bill No.	:	APHHC230001094
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	27-09-2023 08:16:55
Ward	:		Room No.	:	
			Print Date	:	27-09-2023 11:11:08

#### **CHEST PA VIEW:**

Cardiac shadow appears normal.

Both lung fields appear clear.

Both domes of diaphragm and both CP angles are clear.

Both hila appear normal.

Soft tissues and bony cage appear normal.

Please correlate clinically.

.....End of Report......

Prepare By. MD.SALMAN DR. MUHAMMAD SERAJ, MD,FRCR (London) Radiodiagnosis CONSULTANT

**Note:** The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation.

Bill No.	: APHHC230001094	Bill Date : 27-09-2023 08:16
Patient Name	: MRS. RENU DEVI	UHID : APH000017338
Age / Gender	: 38 Yrs 6 Mth / FEMALE	Patient Type : OPD
Ref. Consultant	: MEDIWHEEL	Ward :
Sample ID	: APH23026095	Current Bed :
	:	<b>Reporting Date &amp; Time</b> : 04-10-2023 09:31
		Receiving Date & Time : 27/09/2023 17:01

#### **CYTOPATHOLOGY REPORTING**

Cytopathology No: C-129/23

Material Received: PAP smear. Two unstained slide received.

Reporting System: BETHESDA 2014

Material Adequacy: Satisfactory for evaluation.

Endocervical/Transformation zone component present.

Microscopic Examination: Mostly Superficial cells, Intermediate cells & few Para-basal cells and basal

cells.

Non-Neoplastic Findings: Moderate neutrophilic infiltrates.

Specific Infections: Nil.

Epithelial cell abnormality (Squamous cells): Nil Squamous cell abnormality (Glandular cells): Nil.

Impression: Inflammatory smear. Negative for Intraepithelial lesion or Malignancy.(NILM).

\*\*\* End of Report \*\*\*

DR. ASHISH RANJAN SINGH MBBS,MD CONSULTANT

Bill No.	F	APHHC230001094	Bill Date	:	27-09-2023 08:16		
Patient Name	F	MRS. RENU DEVI	UHID		APH000017338		
Age / Gender	F	38 Yrs 6 Mth / FEMALE	Patient Type	[ ·	OPD	If PHC :	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed		1		
Sample ID	1	APH23026036	Current Ward / Bed		1		
	:		Receiving Date & Time	:	27-09-2023 09:17		
	Г		Reporting Date & Time		27-09-2023 10:32		

# **BLOOD BANK REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
Sample Type: EDTA Whole Blood				

# MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE BELOW40@2550

BLOOD GROUP (ABO)	"O"
RH TYPE	POSITIVE

# \*\* End of Report \*\*

# IMPORTANT INSTRUCTIONS CL - Critical Low, CH - Critical High, H - High, L - Low

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC230001094	Bill Date	:	27-09-2023 08:16			
Patient Name	:	MRS. RENU DEVI	UHID	1	APH000017338			
Age / Gender	:	38 Yrs 6 Mth / FEMALE	Patient Type	1	OPD If PHC :			
Ref. Consultant		MEDIWHEEL	Ward / Bed	1	1			
Sample ID	:	APH23026035	Current Ward / Bed	:	1			
	:		Receiving Date & Time	:	27-09-2023 09:17			
	П		Reporting Date & Time	:	27-09-2023 11:13			

# **HAEMATOLOGY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
Sample Type: EDTA Whole Blood				

# MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE BELOW40@2550

# **CBC -1 (COMPLETE BLOOD COUNT)**

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.1	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	L	3.3	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	10.6	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	32.1	%	36 - 46
MEAN CORPUSCULAR VOLUME		97.2	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		32.0	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.9	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		168	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	Н	54.9	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	15.7	%	11.6 - 14

#### **DIFFERENTIAL LEUCOCYTE COUNT**

ESR (Westergren)	Н	74	mm 1st hr	0 - 20
BASOPHILS		0	%	0 - 1
EOSINOPHILS		2	%	1 - 5
MONOCYTES		4	%	2 - 10
LYMPHOCYTES		32	%	20 - 40
NEUTROPHILS		62	%	40 - 80

# \*\* End of Report \*\*

# **IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low

DR. ASHISH RANJAN SINGH

Bill No.	F	APHHC230001094	Bill Date	:	27-09-2023 08:16		
Patient Name	F	MRS. RENU DEVI	UHID		APH000017338		
Age / Gender	F	38 Yrs 6 Mth / FEMALE	Patient Type		OPD	If PHC :	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed		1		
Sample ID	1	APH23026061	Current Ward / Bed		1		
	:		Receiving Date & Time	:	27-09-2023 12:08		
	Г		Reporting Date & Time		27-09-2023 12:37		

#### **BIOCHEMISTRY REPORTING**

Test (Methodology)		Result	UOM	Biological Reference	
				Interval	

Sample Type: EDTA Whole Blood, Plasma, Serum

#### MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE BELOW40@2550

BLOOD UREA Urease-GLDH,Kinetic	L	12	mg/dL	15 - 45
BUN (CALCULATED)	L	5.6	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.5	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		85.0	mg/dL	70 - 100

Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL. (As per American Diabetes Association recommendation)

GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)	106.0	mg/dL	70 - 140

Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL. (As per American Diabetes Association recommendation)

#### LIPID PROFILE

CHOLESTROL-TOTAL (CHO-POD)	Н	165	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	41	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	111	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		63	mg/dL	0 - 160
NON-HDL CHOLESTROL		124.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.0		½Average Risk <3.3 Average Risk 3.3 - 4.4 2 Times Average Risk 4.5 - 7.1 3 Times Average Risk 7.2-11.0
LDL CHOLESTROL / HDL CHOLESTROL		2.7		1/2Average Risk < 1.5 Average Risk 1.5-3.2 2 Times Average Risk 3.3-5.0 3 Times Average Risk 5.1-6.1
CHOLESTROL-VLDL		13	mg/dL	10 - 35

#### Comments:

- Disorders of Lipid metabolism play a major role in atherosclerosis and coronary heart disease.
- There is an established relationship between increased total cholesterol & LDL cholesterol and myocardial infarction.
- HDL cholesterol level is inversely related to the incidence of coronary artery disease.
  Major risk factors which adversely affect the lipid levels are:
- - 1. Cigarette smoking.
  - 2. Hypertension.
  - 3. Family history of premature coronary heart disease.
  - 4. Pre-existing coronary heart disease.

### LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL (DPD)	H 1.16 mg/dL		mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	0.20 mg/dL		mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	Н	0.96	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)		6.9	g/dL	6 - 8.1

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Age / Gender		38 Yrs 6 Mth / FEMALE			Patient Type		:	OPD If PHC :	
Ref. Consultant	:	MEDIWHEEL	Ward / Bed		:	1			
Sample ID	:	APH23026061			Current Ward / Bed		:	1	
					Receiving Date & Tin	ne	:	27-09-2023 12:08	
			Reporting Date & Time		1e	:	27-09-2023 12:37		
ALBUMIN-SERI	JΜ	(Dye Binding-Bromocresol Green)		3.9	9	g/dL			
S.GLOBULIN				3.0	)	g/dL		2.8-3.8	
A/G RATIO			L	1.	30			1.5 - 2.5	
ALKALINE PHO	SF	PHATASE IFCC AMP BUFFER		87	.8	IU/L		42 - 98	
ASPARTATE AN	MΙΙ	NO TRANSFERASE (SGOT) (IFCC)		26	.8	IU/L		10 - 42	
ALANINE AMIN	Ю	TRANSFERASE(SGPT) (IFCC)		20	.3	IU/L		10 - 40	
GAMMA-GLUTA	١M	YLTRANSPEPTIDASE (IFCC)		27	.3	IU/L		7 - 35	
LACTATE DEHY	ΥD	ROGENASE (IFCC; L-P)		16	9.2	IU/L		0 - 248	
C DROTEIN TO	Τ.Λ			16.9	1	a/d1		6 - 8.1	
S.PROTEIN-TO	I P	L (Biuret)		10.3	<u> </u>	g/dL		0 - 0.1	
URIC ACID Urica	se -	Trinder		3.8	3	mg/d	IL	2.6 - 7.2	

# \*\* End of Report \*\*

IMPORTANT INSTRUCTIONS
CL - Critical Low, CH - Critical High, H - High, L - Low

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC230001094	Bill Date	ŀ	27-09-2023 08:16		
Patient Name	:	MRS. RENU DEVI	UHID	ŀ	APH000017338		
Age / Gender	:	38 Yrs 6 Mth / FEMALE	Patient Type	F	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed		1		
Sample ID	:	APH23026061	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	27-09-2023 12:08		
			Reporting Date & Time	:	27-09-2023 12:37		

Sample Type: EDTA Whole Blood, Plasma, Serum

### MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	5.3	%	4.0 - 6.2

#### INTERPRETATION:

HbA1c %	Degree of Glucose Control							
>8% Action suggested due to high risk of developing long term complications like Retinop Nephropathy, Cardiopathy and Neuropathy								
7.1 - 8.0	Fair Control							
<7.0	Good Control							

Note:

- 1.A three monthly monitoring is recommended in diabetics.
- 2. Since HbA1c concentration represents the integrated values for blood glucose over the preceding 6 10 weeks and is not affected by daily glucose fluctuation, exercise and recent food intake, it is a more useful tool for monitoring diabetics.

# \*\* End of Report \*\*

IMPORTANT INSTRUCTIONS
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DR. ASHISH RANJAN SINGH

Bill No.	1:	APHHC230001094	Bill D	ate	1:	: 27-09-2023 08:16			
Patient Name	1	MRS. RENU DEVI	UHID		:	: APH000017338			
Age / Gender	1:	38 Yrs 6 Mth / FEMALE	Patie	nt Type	1	OPD	If PHC	:	
Ref. Consultant	1:	MEDIWHEEL	Ward	/ Bed	1	. 1			
Sample ID	1:	APH23026039	Curre	nt Ward / Bed	:	1			
	1:		Recei	ving Date & Time	:	27-09-2023 09:17			
	T		Repo	rting Date & Time	1:	27-09-2023 13:07			

# **SEROLOGY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
Sample Type: Serum				

# MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE BELOW40@2550

# THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.84	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.23	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	Н	6.49	mIU/L	0.27-4.20

# \*\* End of Report \*\*

IMPORTANT INSTRUCTIONS
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DR. ASHISH RANJAN SINGH