

Patient Details

Date: 18-Mar-23

Time: 12:26:30 PM

Name: MR.RAUSHAN KUMAR ID: APH000013957

Age: 39 y

Sex: M

Height: 172 cms

Weight: 76 Kgs

Clinical History:

Medications:

Test Details

Protocol: Bruce

Pr.MHR: 181 bpm

THR: 162 (90 % of Pr.MHR) bpm

Total Exec. Time: 8 m 56 s

Max. HR: 147 (81% of Pr.MHR) bpm

Max. Mets: 10.20

Max. BP: 150 / 90 mmHg

Max. BP x HR: 22050 mmHg/min

Min. BP x HR: 6080 mmHg/min

Test Termination Criteria:

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (Km/h)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 20	1.0	0	0	78	120 / 80	-1.01 III	2.53 V2
Standing	0 : 19	1.0	0	0	79	120 / 80	-1.01 III	2.11 V2
Hyperventilation	0 : 9	1.0	0	0	76	120 / 80	-0.76 III	2.53 V2
1	3 : 0	4.6	2.7	10	102	130 / 80	-1.52 III	3.38 V2
2	3 : 0	7.0	4	12	129	140 / 90	-1.52 III	3.80 V2
Peak Ex	2 : 56	10.2	5.4	14	147	150 / 90	-1.52 V3	4.22 V2
Recovery(1)	2 : 0	1.8	1.6	0	103	150 / 90	-2.03 III	3.38 V2
Recovery(2)	2 : 0	1.0	0	0	90	140 / 90	-1.52 aVF	1.69 V2
Recovery(3)	1 : 0	1.0	0	0	97	130 / 80	-0.76 aVF	1.27 I
Recovery(4)	0 : 12	1.0	0	0	85	130 / 80	-1.01 III	2.53 V2

Interpretation

COMMENTS

- : FAIR EXERCISE (10.20 METS) TOLERANCE.
- : NORMAL BP RESPONSE TARGET HEART RATE ACHIEVED.
- : NO SIGNIFICANT ST-T SEGMENT CHANGES SEEN IN LEADS.
- : THE TEST TERMINATED DUE TO -HEART RATE ACHIEVED.

IMPRESSION :- THE TEST IS NEGATIVE FOR INDUCIBLE ISCHAEMIA.

Ref. Doctor: DR.NITISH KUMAR RANJAN.

Doctor: Dr.NITISH KUMAR RANJAN

(Summary Report edited by user)

Schiller CS-20 V 1.9

Asian City Hospital (A unit of Blue Sapphire Healthcare Pvt. Ltd.) CIN : 1174999DI 2007PTC159674



DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. ROUSHAN KUMAR	IPD No.	:	
Age	: 39 Yrs 2 Mth	UHID	:	APH000013957
Gender	: MALE	Bill No.	:	APHHC230000309
Ref. Doctor	: MEDIWHEEL	Bill Date	:	18-03-2023 09:01:15
Ward	:	Room No.	:	
		Print Date	:	18-03-2023 10:16:40

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.

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MR. ROUSHAN KUMAR	IPD No.	:
Age	: 39 Yrs 2 Mth	UHID	: APH000013957
Gender	: MALE	Bill No.	: APHHC230000309
Ref. Doctor	: MEDIWHEEL	Bill Date	: 18-03-2023 09:01:15
Ward	:	Room No.	:
		Print Date	: 18-03-2023 10:55:51

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and shows moderate increase in parenchymal echogenicity S/O grade II fatty liver infiltration. (Liver measures 13.1 cm).

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

Portal vein is normal in calibre (10.9 mm).

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 (8.8 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.6 cm), Left kidney (9.8 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 21 cc), outline and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION:

- Grade II fatty infiltration of liver.

Please correlate clinically.

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



Prepare By.
MD.SALMAN

DR. MUHAMMAD SERAF, 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.

FINAL REPORT

Bill No.	: APHHC230000309	Bill Date	: 18-03-2023 09:01
Patient Name	: MR. ROUSHAN KUMAR	UHID	: APH000013957
Age / Gender	: 39 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006434	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 13:52
		Reporting Date & Time	: 18-03-2023 15:10

BIOCHEMISTRY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD UREA <small>Urease-GLDH, Kinetic</small>		28	mg/dL	15 - 45
BUN (CALCULATED)		13.1	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	L	0.8	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>	H	166.0	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) <small>(UV Hexokinase)</small>	H	188.0	mg/dL	70 - 140
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 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 <small>(CHO-POD)</small>	H	221	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>		42	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	146	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>	H	223	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	179.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.3		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		3.5		½Average Risk <1.0 Average Risk 1.0-3.6 2 Times Average Risk 3.7-6.3 3 Times Average Risk 6.4-8.0
CHOLESTROL-VLDL	H	45	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 <small>(DPD)</small>		0.86	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>		0.14	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.72	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.7	g/dL	6 - 8.1

FINAL REPORT

Bill No.	: APHHC230000309	Bill Date	: 18-03-2023 09:01
Patient Name	: MR. ROUSHAN KUMAR	UHID	: APH000013957
Age / Gender	: 39 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC : <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006434	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 13:52
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ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.4	g/dL	
S.GLOBULIN	L	2.3	g/dL	2.8-3.8
A/G RATIO		1.91		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		86.7	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		28.5	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	H	47.4	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		20.0	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)		155.9	IU/L	0 - 248
S.PROTEIN-TOTAL (Biuret)		6.7	g/dL	6 - 8.1
URIC ACID Uricase - Trinder		5.6	mg/dL	2.6 - 7.2

**** End of Report ****

IMPORTANT INSTRUCTIONS

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

Ashish

DR. ASHISH RANJAN SINGH
MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000309	Bill Date	: 18-03-2023 09:01
Patient Name	: MR. ROUSHAN KUMAR	UHID	: APH000013957
Age / Gender	: 39 Yrs 2 Mth / MALE	Patient Typo	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006434	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 13:52
		Reporting Date & Time	: 18-03-2023 15:10

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

HBA1C (Turbidimetric Immuno-Inhibition)	H	7.0	%	4.0 - 6.2
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INTERPRETATION:

HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, 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
MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000309	Bill Date	: 18-03-2023 09:01
Patient Name	: MR. ROUSHAN KUMAR	UHID	: APH000013967
Age / Gender	: 39 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006402	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 09:58
		Reporting Date & Time	: 18-03-2023 11:16

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

CBC -1 (COMPLETE BLOOD COUNT)

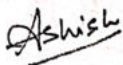
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.8	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.5	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		13.0	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	38.5	%	40 - 50
MEAN CORPUSCULAR VOLUME		86.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.1	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.7	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		161	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		45.3	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.6	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		49	%	40 - 80
LYMPHOCYTES		39	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS	H	6	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	65	mm 1st hr	0 - 10

**** End of Report ****
IMPORTANT INSTRUCTIONS

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FINAL REPORT

Bill No.	: APHHC230000309	Bill Date	: 18-03-2023 09:01
Patient Name	: MR. ROUSHAN KUMAR	UHID	: APH000013957
Age / Gender	: 39 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006423	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 11:48
		Reporting Date & Time	: 18-03-2023 13:03

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Urine
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400
URINE, ROUTINE EXAMINATION
PHYSICAL EXAMINATION

QUANTITY	30 mL		
COLOUR	Pale Straw		Pale Yellow
TURBIDITY	Clear		

CHEMICAL EXAMINATION

PH (Double pH Indicator method)	5.0		5.0 - 8.5
PROTEINS (Protein-error-of-indicators)	Negative		Negative
SUGAR (GOD POD Method)	Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.010		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES	1-2	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	1-2		
CASTS	Nil		
CRYSTALS	Nil		

URINE-SUGAR	NEGATIVE
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**** End of Report ****
IMPORTANT INSTRUCTIONS

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


DR. ASHISH RANJAN SINGH
 MBBS,MD
 CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000309	Bill Date	: 18-03-2023 09:01
Patient Name	: MR. ROUSHAN KUMAR	UHID	: APH000013957
Age / Gender	: 39 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006403	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 09:56
		Reporting Date & Time	: 18-03-2023 13:24

BLOOD BANK REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"O"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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DR. ASHISH RANJAN SINGH
MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000309	Bill Date	: 18-03-2023 09:01
Patient Name	: MR. ROUSHAN KUMAR	UHID	: APH000013957
Age / Gender	: 39 Yrs 2 Mth / MALE	Patient Type	: OPD IF PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006406	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 09:56
		Reporting Date & Time	: 18-03-2023 12:30

SEROLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (EQJA)		3.13	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (EQJA)		1.39	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (EQJA)		3.39	mIU/L	0.27-4.20

** End of Report **

IMPORTANT INSTRUCTIONS

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



DR. ASHISH RANJAN SINGH

MBBS,MD

CONSULTANT

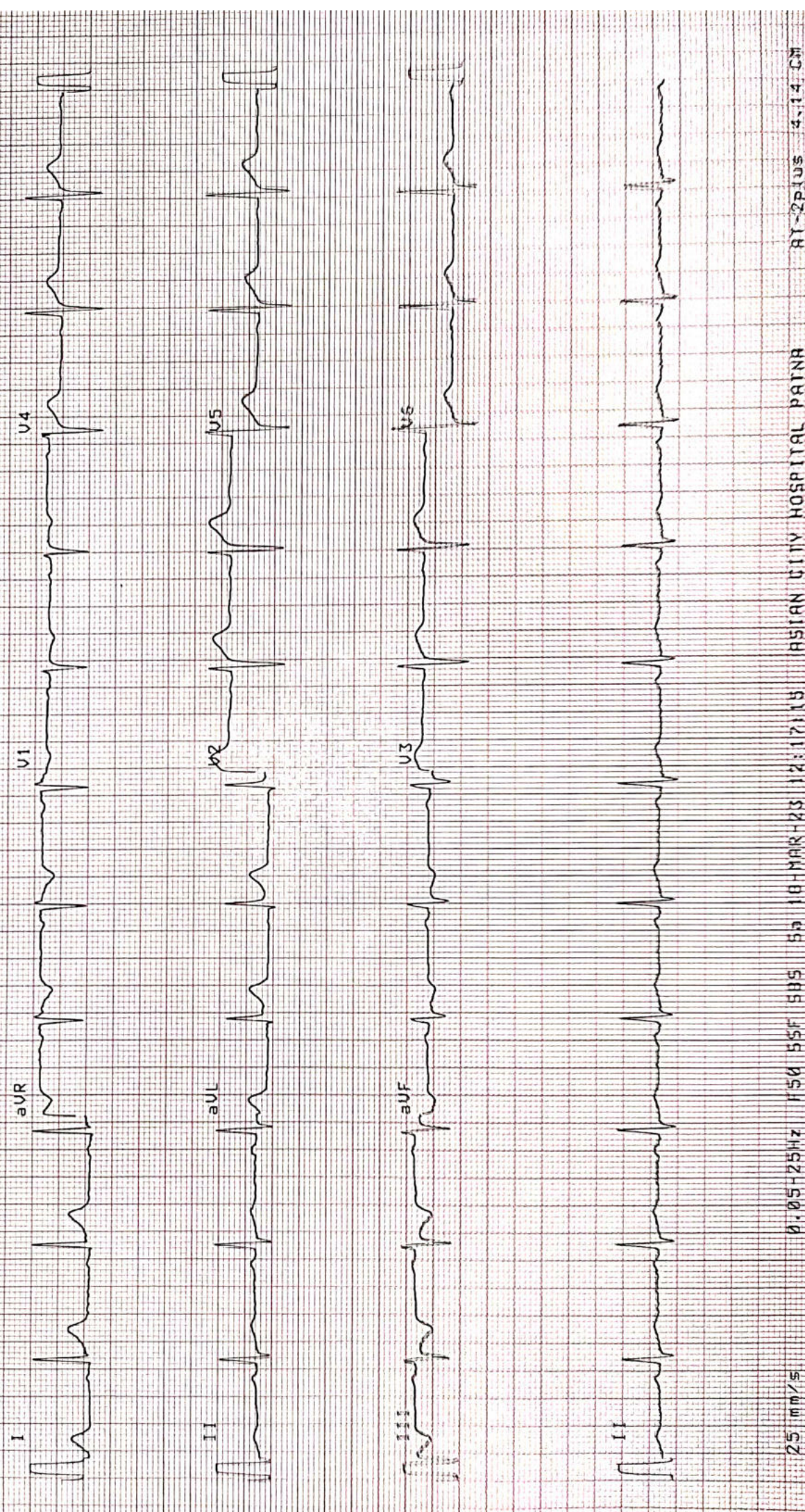
Patient: **Mr. RAUSHAN KUMAR**
 APH013957
 39 year / M
 cm / kg

HR 71/min
Axis: P 50°
QRS -1°
T -14°

Intervals:
RR 851 ms
P 90 ms
PR 154 ms
QRS 80 ms
QT 340 ms
QTc 370 ms

SINUS RHYTHM
LEFTWARD AXIS
SI & T ABNORMALITY, CONSIDER
INFERIOR ISCHEMIA OR LEFT VENTRICULAR STRAIN
ABNORMAL ECG

10 mm/mV
10 mm/mV



NON INVASIVE CARDIOLOGY

Patient Name	: MR. ROUSHAN KUMAR	IPD No.	:
Age	: 39 Yrs 2 Mth	UHID	: APH000013957
Gender	: MALE	Bed No.	: APHHC230000309
Ref. Doctor	: MEDIWHEEL	Bed Date	: 18-03-2023 09:01:15
Ward	:	Room No.	:
		Procedure Date	: 18-03-2023 15:59:33

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	39	(mm)	Left Atrium	29	(mm)
ESD:	32	(mm)	Aortic Root	26	(mm)
IVS Thickness (D/S)	0.9/1.1	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	0.9/1.1	(mm)	Pericardium		NORMAL
LVEF	60	(%)			

WALL MOTION STUDY : NO RWMA

MV	: NORMAL	TV	: NORMAL
AV	: NORMAL	PV	: NORMAL
IAS	: NORMAL	IVS	: NORMAL

DOPPLER STUDY (PW/CW AND COLOUR FLOW IMAGING)

VALVES	V max(m/sec)	PG	MG	EDG	Orifice Area (cm ²)	REGURGITATION
MV E/A	0.71/0.62					MR:-NIL
AV	1.19	5.66				AR:- NIL
TV	0.96	3.42				TR:- NIL
PV	0.90	3.22				PR:- NIL

IMPRESSION: -

No RWMA.
Normal Cardiac Chamber Dimensions.
Normal LV/RV Systolic Function, LVEF-60%.
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

MU
18/3/23

DR. NITISH KUMAR RANJAN
MD, DM (CARDIOLOGY)
CONSULTANT CARDIOLOGIST

Asian City Hospital (A unit of Blue Sapphire Healthcare Pvt. Ltd.) CIN : U74999DL2007PTC159674