


FINAL REPORT

Bill No. : APHHC230000535	Bill Date : 02-05-2023 08:38
Patient Name : MR. AVINASH UDAY	UHID : APH000014713
Age / Gender : 38 Yrs 9 Mth / MALE	Patient Type : OPD IF PHC :
Ref. Consultant : mediweel	Ward / Bed : /
Sample ID : APH23010878	Current Ward / Bed : /
	Receiving Date & Time : 02-05-2023 20:14
	Reporting Date & Time : 02-05-2023 20:15

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>	L	14	mg/dL	15 - 45
BUN (CALCULATED)	L	6.5	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	117.0	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>		114.0	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	171	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Inhibition</small>		40	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	111	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		89	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	131.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.3		1/3 Average 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		2.8		1/3 Average 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		18	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:
 - Cigarette smoking.
 - Hypertension.
 - Family history of premature coronary heart disease.
 - Pre-existing coronary heart disease.

LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL <small>(DPO)</small>		0.63	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.11	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.52	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(DPO)</small>		7.0	g/dL	6 - 8.1

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. AVINASH UDAY	IPD No.	:	
Age	: 33 Yrs 8 Mth	UHID	:	APH000014713
Gender	: MALE	Bill No.	:	APHHC230000535
Ref. Doctor	: medirweel	Bill Date	:	02-05-2023 08:38:19
Ward	:	Room No.	:	
		Print Date	:	02-05-2023 11:37:54

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. AVINASH UDAY	IPD No.	:	
Age	: 38 Yrs 8 Mth	UHID	:	APH000014713
Gender	: MALE	Bill No.	:	APHHC230000535
Ref. Doctor	: mediweel	Bill Date	:	02-05-2023 08:38:19
Ward	:	Room No.	:	
		Print Date	:	02-05-2023 11:42:06

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 12.5 cm)
 No focal lesion seen. Intrahepatic biliary radicals are not dilated.
 Portal vein is normal in calibre (10.3 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 (8.3 cm) and echotexture.
 Both kidneys are normal in size and echotexture (Right kidney (9.4 cm), Left kidney (9.4 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.
 Urinary bladder appears normal.
 Prostate appears normal in size (Vol. 20.6 cc), outline and echotexture.
 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.....

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ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.0	g/dL	
S.GLOBULIN		3.0	g/dL	2.8-3.8
A/G RATIO	L	1.33		1.5 - 2.5
ALKALINE PHOSPHATASE IFCC AMP BUFFER		98.6	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)	H	45.3	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	H	72.6	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		19.9	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC, L-P)		238.9	IU/L	0 - 248
S.PROTEIN-TOTAL (Biuret)		7.0	g/dL	6 - 8.1
URIC ACID Uricase - Trinder	H	8.6	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

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Sample Type: EDTA Whole Blood, Plasma, Serum

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

HBA1C (Turbidimetric Immuno-inhibition)	6.0	%	4.0 - 6.2
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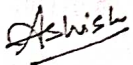
INTERPRETATION:

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 ****
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Ago / Gender	: 38 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: mediweel	Ward / Bed	: /
Sample ID	: APH23010780	Current Ward / Bed	: /
		Receiving Date & Time	: 02-05-2023 09:37
		Reporting Date & Time	: 02-05-2023 13:08

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)		6.2	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.8	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		13.3	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	39.6	%	40 - 50
MEAN CORPUSCULAR VOLUME	L	81.7	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		27.5	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.6	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		175	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		43.0	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.7	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		65	%	40 - 80
LYMPHOCYTES		26	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		3	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	42	mm 1st hr	0 - 10

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Age / Gender	: 38 Yrs 9 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: mediweel	Ward / Bed	: /
Sample ID	: APH23010877	Current Ward / Bed	: /
		Receiving Date & Time	: 02-05-2023 19:54
		Reporting Date & Time	: 02-05-2023 20:04

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
<i>Sample Type: Urine</i>				
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400				
URINE-SUGAR		NEGATIVE		

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Ref. Consultant	: mediweel	Ward / Bed	: /
Sample ID	: APH23010784	Current Ward / Bed	: /
		Receiving Date & Time	: 02-05-2023 09:37
		Reporting Date & Time	: 02-05-2023 18:43

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) (ECLIA)		2.75	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	H	2.02	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		3.28	mIU/L	0.27-4.20

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Bill No.	: APHHC230000536	Bill Date	: 02.05.2023 09:38
Patient Name	: MR. AVINASH UDAY	UHID	: APH000004713
Age / Gender	: 38 Yrs 9 Mth / MALE	Patient Type	: OPD WPHC
Ref. Consultant	: mediwheel	Ward / Bed	: /
Sample ID	: APH23010877	Current Ward / Bed	: /
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CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Reference Range
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Sample Type: Urine

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

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY		30		
COLOUR		Pale yellow		Straw (yellow)
TURBIDITY		Clear		

CHEMICAL EXAMINATION

PH (Double pH indicator method)		6.0		5.0 - 8.5
PROTEINS (Protein error of indoles)		Negative		Negative
SUGAR (GOD POB Method)		Negative		Negative
SPECIFIC GRAVITY, URINE (U-Tester 1Ka Charge)		1.020		1.010 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		1-2	HPF	0-5
RBC'S		Nil		
EPITHELIAL CELLS		0-1		
CASTS		Absent		
CRYSTALS		Absent		
URINE-SUGAR		NEGATIVE		

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