

## NON INVASIVE CARDIOLOGY

Patient Name	: MR. NAGMANI JAISWAL	IPD No.	:	
Age	: 37 Yrs 7 Mth	UHID	:	APH000013977
Gender	: MALE	Bill No.	:	APHHC230000318
Ref. Doctor	: MEDWHEEL	Bill Date	:	20-03-2023 08:46:32
Ward	:	Room No.	:	
		Procedure Date	:	20-03-2023 14:00:44

### ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

#### M MODE STUDY (MEASUREMENTS)

**Left Ventricle:-**

EDD:	51	(mm)	Left Atrium	34	(mm)
ESD:	36	(mm)	Aortic Root	34	(mm)
IVS Thickness (D/S)	1.3/1.6	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	1.3/1.8	(mm)	Pericardium		NORMAL
LVEF	56	(%)			

**WALL MOTION STUDY : NO RWMA**


MV	: NORMAL	TV	: NORMAL
AV	: NORMAL	PV	: NORMAL
LAS	: NORMAL	IVS	: NORMAL

#### DOPPLER STUDY (PW/CW AND COLOUR FLOW IMAGING)

VALVES	V max(m/sec)	PG MG EDG (mm Hg)	Orifice Area (cm <sup>2</sup> )	REGURGITATION
MVE/A	0.84/0.56			
AV	1.28	6.58		MR:-NIL
TV	2.28	20.81		AR:- NIL
PV	1.18	3.22		TR:-MILD PR:- NIL

**IMPRESSION:-**

No RWMA.  
Mild Concentric LVH.  
Mild TR.  
Normal Cardiac Chamber Dimensions.  
Normal LV/RV Systolic Function, LVEF-56%.  
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

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

## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. NAGMANI JAISWAL	IPD No.	:
Age	: 37 Yrs 7 Mth	UHID	: APH000013977
Gender	: MALE	Bill No.	: APHHC230000318
Ref. Doctor	: MEDIWHEEL	Bill Date	: 20-03-2023 08:46:32
Ward	:	Room No.	:
		Print Date	: 20-03-2023 11:08:11

### 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.SERAJ

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. NAGMANI JAISWAL	IPD No.	:
Age	: 37 Yrs 7 Mth	UHID	: APH000013977
Gender	: MALE	Bill No.	: APHHC230000318
Ref. Doctor	: MEDIWHEEL	Bill Date	: 20-03-2023 08:46:32
Ward	:	Room No.	:
		Print Date	: 20-03-2023 10:33:29

### WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 10.9 cm)

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

Portal vein is normal in calibre (8.4 mm).

**Gall bladder is well distended and shows few tiny echogenic calculi/ organized sludge in lumen (size ~ 3.5 mm). Wall thickness is normal.**

CBD is normal in calibre (measures 5.9 mm).

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 (9.7 cm), Left kidney (10.0 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 22.3 cc), outline and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

**IMPRESSION: Gall bladder is well distended and shows few tiny echogenic calculi/ organized sludge in lumen (size ~ 3.5 mm). Wall thickness is normal.**

*Please correlate clinically.*

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



Prepare By.  
MD.SERAJ

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

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Patient:

Mr. NAGMANI JAISWAL

APH013977

37 Year / M

..... cm / ..... kg

HR 65/min

Intervals:

RR 930 ms

P 86 ms

PR 136 ms

QRS 88 ms

QT 342 ms

QTc 356 ms

Axis: SINUS RHYTHM  
NORMAL ECG

P 38°

QRS 56°

T 53°

P (II) 0.10 mV

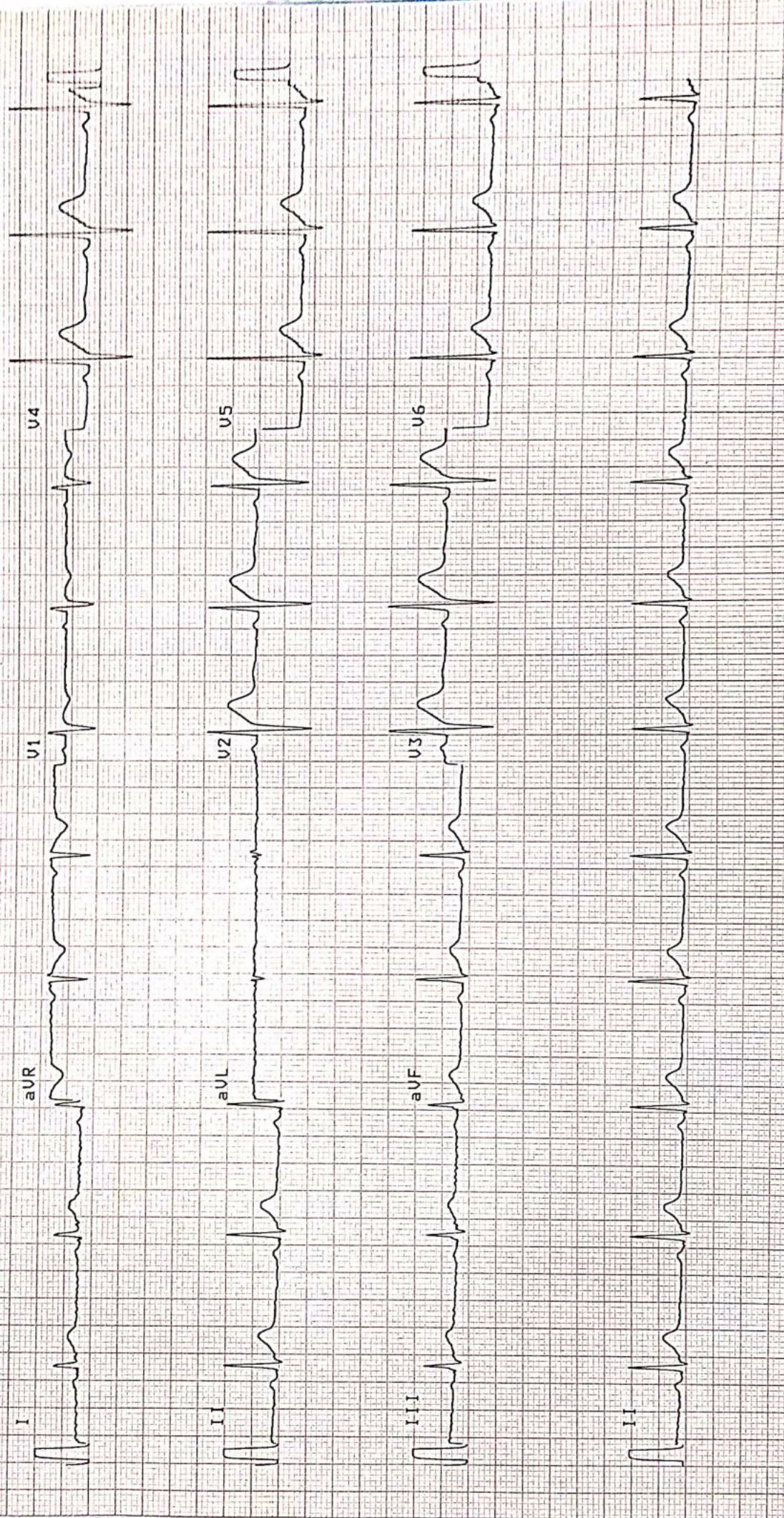
S (V1) -0.61 mV

R (V5) 2.22 mV

Sokol. 3.38 mV

10 mm/mV

10 mm/mV



25 mm/s

0.05-25Hz

F50 SSF SBS

Mo 20-MAR-23

14:01:57

ASIAN CITY HOSPITAL PATNA

AT-2Plus 4.14 CM

SCHILLER

Part No.2.157017N

182

**FINAL REPORT**

Bill No.	: APHHC230000318	Bill Date	: 20-03-2023 08:46
Patient Name	: MR. NAGMANI JAISWAL	UHID	: APH000013977
Age / Gender	: 37 Yrs 7 Mth / MALE	Patient Type	: OPD <span style="float: right;">If PHC :  </span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006556	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 09:23
		Reporting Date & Time	: 20-03-2023 12:28

**BLOOD BANK REPORTING**

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

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400**

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**\*\* 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.	: APHHC230000318	Bill Date	: 20-03-2023 08:46
Patient Name	: MR. NAGMANI JAISWAL	UHID	: APH000013977
Age / Gender	: 37 Yrs 7 Mth / MALE	Patient Type	: OPD <span style="float:right">If PHC :</span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006559	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 09:23
		Reporting Date & Time	: 20-03-2023 12:33

**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)		3.46	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.47	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		3.51	miU/L	0.27-4.20

**\*\* 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.	: APHHC230000318	Bill Date	: 20-03-2023 08:46
Patient Name	: MR. NAGMANI JAISWAL	UHID	: APH000013977
Ago / Gender	: 37 Yrs 7 Mth / MALE	Patient Type	: OPD      If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006555	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 09:23
		Reporting Date & Time	: 20-03-2023 12:29

**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)**

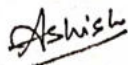
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		8.1	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		5.3	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		15.0	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		46.8	%	40 - 50
MEAN CORPUSCULAR VOLUME		87.7	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.1	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.1	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		174	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	47.4	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.2	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**

NEUTROPHILS		53	%	40 - 80
LYMPHOCYTES		33	%	20 - 40
MONOCYTES		5	%	2 - 10
EOSINOPHILS	H	9	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	25	mm 1st hr	0 - 10

**\*\* End of Report \*\***
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**FINAL REPORT**

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Patient Name	: MR. NAGMANI JAISWAL	UHID	: APH000013977
Age / Gender	: 37 Yrs 7 Mth / MALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006585	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 13:06
		Reporting Date & Time	: 20-03-2023 13:32

**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>		21	mg/dL	15 - 45
BUN (CALCULATED)		9.8	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>		0.9	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		99.0	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>		124.0	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	181	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immuno-inhibition</small>		49	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	107	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		98	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	132.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.7		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		2.2		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		20	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>(DPD)</small>		0.91	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>		0.15	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.76	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.3	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.1	g/dL	



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Age / Gender	: 37 Yrs 7 Mth / MALE	Patient Type	: OPD <span style="float:right">If PHC :  </span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006585	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 13:06
		Reporting Date & Time	: 20-03-2023 13:32

S.GLOBULIN	L	2.2	g/dL	2.8-3.8
A/G RATIO		1.86		1.5 - 2.5
ALKALINE PHOSPHATASE <small>IFCC AMP BUFFER</small>		64.6	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) <small>(IFCC)</small>		24.4	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) <small>(IFCC)</small>		12.0	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE <small>(IFCC)</small>		18.5	IU/L	11 - 50
LACTATE DEHYDROGENASE <small>(IFCC; L-P)</small>		163.4	IU/L	0 - 248
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.3	g/dL	6 - 8.1
URIC ACID <small>Uricase - Trinder</small>		5.5	mg/dL	2.6 - 7.2

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

**IMPORTANT INSTRUCTIONS**

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

*Ashish*

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MBBS,MD  
CONSULTANT

**FINAL REPORT**

Bill No.	: APHHC230000318	Bill Date	: 20-03-2023 08:46
Patient Name	: MR. NAGMANI JAISWAL	UHID	: APH000013977
Age / Gender	: 37 Yrs 7 Mth / MALE	Patient Type	: OPD <span style="float:right">If PHC : </span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006585	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 13:06
		Reporting Date & Time	: 20-03-2023 13:32

Sample Type: EDTA Whole Blood, Plasma, Serum

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400**

HbA1c (Turbidimetric Immuno-inhibition)	5.6	%	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**

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

*Ashish*

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**FINAL REPORT**

Bill No.	: APHHC230000318	Bill Date	: 20-03-2023 08:40
Patient Name	: MR. NAGMANI JAISWAL	UHID	: AP11000013977
Age / Gender	: 37 Yrs 7 Mth / MALE	Patient Type	: OPD   IIPHC
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006578	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 12:17
		Reporting Date & Time	: 20-03-2023 14:14

**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**

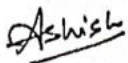
PH (Double pH Indicator method)		6.0		5.0 - 8.0
PROTEINS (Protein-error-of-indicators)		Negative		Negative
SUGAR (GOD POD Method)		Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)		1.015		1.005 - 1.030

**MICROSCOPIC EXAMINATION**

LEUCOCYTES		1-2	/HPF	0 - 6
RBC's		Nil		
EPITHELIAL CELLS		1-2 / HPF		
CASTS		Nil		
CRYSTALS		Nil		
URINE-SUGAR		NEGATIVE		

**\*\* End of Report \*\***
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**Patient Details**

UHID : APH000013977 Bill Date : 20-03-2023 08:46:32  
Patient Name : MR. NAGMANI JAISWAL Bill No. : APHHC230000318  
Age / Gender : 37 Yrs 7 Mth / MALE / 03-08-1985 Receipt No. :  
Company : ArcoFemi Healthcare Ltd  
Address : AT+PO-SIMRA, VIA-KURSFLA, Purnia (Purnea), BIHAR, INDIA

**Service Details**

S. No.	Investigation	Rooms	Remarks
1	MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40) @2400		
2	ESR		
3	CBC-1( COMPLETE BLOOD COUNT )		
4	URINE, ROUTINE EXAMINATION		
5	STOOL ROUTINE EXAMINATION		
6	BLOOD GROUP (ABO & RH)		
7	URINE-SUGAR		
8	GLUCOSE PLASMA (FASTING)		
9	GLUCOSE PLASMA (PP) POST PRANDIAL		
10	GLYCATED HAEMOGLOBIN (HBA1C)		
11	LIPID PROFILE		
12	URIC ACID		
13	BLOOD UREA -BU		
14	PROTEIN, SERUM - TOTAL		
15	CREATININE - SERUM		
16	LIVER FUNCTION TESTS (LFT)		
17	ECG		
18	2D ECHO DR. ADITYA KUMAR		
19	TMT DR. ADITYA KUMAR		
20	XRAY-CHEST P.A.		
21	USG-FOR WHOLE ABDOMEN		
22	OPD Consultation-Dental DR. AISHWARYA		
23	OPD Consultation-Internal Medicine DR. FAROGH HAIDRY		
24	OPD Consultation-Ophthal DR. FAROGH HAIDRY		
25	THYROID PROFILE (FT3+FT4+TSH)		

Prepared By : MR. SUNIL KUMAR

Employee ID  
Signature