

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MRS. MAHIMA KAPOOR	IPD No.	:
Age	: 35 Yrs	UHID	: APH000014216
Gender	: FEMALE	Bill No.	: APHHC230000406
Ref. Doctor	: MEDIWHEEL	Bill Date	: 01-04-2023 09:48:56
Ward	:	Room No.	:
		Print Date	: 01-04-2023 12:22:47

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,FRCP
(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.

NON INVASIVE CARDIOLOGY

Patient Name	: MRS. MAHIMA KAPOOR	IPD No.	:
Age	: 35 Yrs	UHID	: APH000014216
Gender	: FEMALE	Bill No.	: APHHC230000406
Ref. Doctor	: MEDIWHEEL	Bill Date	: 01-04-2023 09:48:56
Ward	:	Room No.	:
		Procedure Date	: 01-04-2023 16:03:46

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	53	(mm)	Left Atrium	30	(mm)
ESD:	33	(mm)	Aortic Root	27	(mm)
IVS Thickness (D/S)	0.9/1.3	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	0.9/1.4	(mm)	Pericardium		NORMAL
LVEF	65	(%)			

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
		(mm Hg)				
MV E/A	0.77/0.46					MR:-NIL
AV	1.19	5.66				AR:- NIL
TV	0.96	3.42				TR:- NIL
PV	1.16	5.36				PR:- NIL

IMPRESSION:-

No RWMA.
Normal Cardiac Chamber Dimensions.
Normal LV/RV Systolic Function, LVEF-65%.
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

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

Nic
01/4/23

FINAL REPORT

Bill No.	: APHHC230000406	Bill Date	: 01-04-2023 09:48
Patient Name	: MRS. MAHIMA KAPOOR	UHID	: APH000014216
Age / Gender	: 35 Yrs / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward	:
Sample ID	: APH23007921	Current Bed	:
	:	Reporting Date & Time	: 01-04-2023 16:09
	:	Receiving Date & Time	: 01/04/2023 16:07

CYTOPATHOLOGY REPORTING

Cytopathology No:C-50/23

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: Mild shift in flora

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

FINAL REPORT

Bill No.	: APHHC230000406	Bill Date	: 01-04-2023 09:48
Patient Name	: MRS. MAHIMA KAPOOR	UHID	: APH000014216
Age / Gender	: 35 Yrs / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23007876	Current Ward / Bed	: /
		Receiving Date & Time	: 01-04-2023 10:16
		Reporting Date & Time	: 01-04-2023 11:46

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_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

Ashish

DR. ASHISH RANJAN SINGH
MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APH11G230000400	Bill Date	: 01-04-2023 09:48
Patient Name	: MRS. MAHIMA KAPOOR	UHID	: APH000014216
Age / Gender	: 35 Yrs / FEMALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23007870	Current Ward / Bed	: /
		Receiving Date & Time	: 01-04-2023 10:16
		Reporting Date & Time	: 01-04-2023 11:45

SEROLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (TCLIA)		2.68	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (TCLIA)		1.12	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (TCLIA)		1.86	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.	: APHHC230000406	Bill Date	: 01-04-2023 09:48
Patient Name	: MRS. MAHIMA KAPOOR	UHID	: APH000014216
Age / Gender	: 35 Yrs / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23007878	Current Ward / Bed	: /
		Receiving Date & Time	: 01-04-2023 10:16
		Reporting Date & Time	: 01-04-2023 13:01

BIOCHEMISTRY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

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	0.5	mg/dL	0.6 - 1.1
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)

LIPID PROFILE

CHOLESTROL-TOTAL <small>(CHO-POD)</small>	H	191	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Inhibition</small>	L	40	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	126	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		124	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	151.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.8		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		3.2		½Average 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		25	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>		0.42	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>		0.06	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.36	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.1	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		3.9	g/dL	
S.GLOBULIN		3.2	g/dL	2.8-3.8
A/G RATIO	L	1.22		1.5 - 2.5



FINAL REPORT

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Age / Gender	: 35 Yrs / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23007878	Current Ward / Bed	: /
		Receiving Date & Time	: 01-04-2023 10:16
		Reporting Date & Time	: 01-04-2023 13:01

ALKALINE PHOSPHATASE (IFCC AMP BUFFER)	59.0	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)	12.9	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	10.4	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)	13.9	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC; L-P)	118.3	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)	7.1	g/dl	6 - 8.1
URIC ACID (Uricase - Trinder)	3.2	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.	: APHHC230000406	Bill Date	: 01-04-2023 09:48
Patient Name	: MRS. MAHIMA KAPOOR	UHID	: APH000014216
Age / Gender	: 35 Yrs / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23007878	Current Ward / Bed	: /
		Receiving Date & Time	: 01-04-2023 10:16
		Reporting Date & Time	: 01-04-2023 13:01

Sample Type: EDTA Whole Blood, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HbA1C (Turbidimetric Immuno-inhibition)	H	6.5	%	4.0 - 6.2
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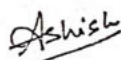
INTERPRETATION:

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



 DR. ASHISH RANJAN SINGH
 MBBS, MD
 CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000406	Bill Date	: 01-04-2023 09:40
Patient Name	: MRS. MAHIMA KAPOOR	UHID	: APH000014210
Age / Gender	: 35 Yrs / FEMALE	Patient Type	: OPD If PICC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23007875	Current Ward / Bed	: /
		Receiving Date & Time	: 01-04-2023 10:16
		Reporting Date & Time	: 01-04-2023 12:45

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.7	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	11.3	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	34.3	%	36 - 46
MEAN CORPUSCULAR VOLUME	L	73.5	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	24.2	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.9	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		297	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	L	37.9	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.3	%	11.6 - 14

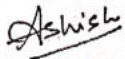
DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		58	%	40 - 80
LYMPHOCYTES		33	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		3	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	60	mm 1st hr	0 - 20

**** 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.	: APH000029777006	Bill Date	: 01-04-2023 09:48
Patient Name	: MRS. MAHIMA KAPOOR	UHID	: APH000014216
Age / Gender	: 35 Yrs / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MED/WHEEL	Ward / Bed	: /
Sample ID	: APH23007912	Current Ward / Bed	: /
		Receiving Date & Time	: 01-04-2023 14:12
		Reporting Date & Time	: 01-04-2023 15:05

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550
URINE, ROUTINE EXAMINATION
PHYSICAL EXAMINATION

QUANTITY		30 ml		
COLOUR		Straw		Pale Yellow
TURBIDITY		Clear		

CHEMICAL EXAMINATION

PHI (pH) (Standard Method)		6.0		5.0 - 8.5
PROTEIN (Standard Method)		Negative		Negative
SUGAR (Standard Method)		Negative		Negative
SPECIFIC GRAVITY, URINE (Standard Method)		1.010		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		1-2	/HPF	0 - 5
RBCs		Nil		
EPITHELIAL CELLS		2-5/HPF		
CASTS		Nil		
CRYSTALS		Nil		
URINE-SUGAR		NEGATIVE		

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

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


DR. ASHISH RANJAN SINGH
 MBBS, MD
 CONSULTANT

Patient Details

SPECIALITY CARE

Date: 01-Apr-23

Time: 11:16:30 AM

Name: Mrs.MAHIMA KAPOOR ID: APH000014216

Age: 35 y

Sex: F

Height: 170 cms

Weight: 75 Kgs

Clinical History:

Medications:

Test Details

Protocol: Bruce

Pr.MHR: 185 bpm

THR: 166 (90 % of Pr.MHR) bpm

Total Exec. Time: 7 m 12 s

Max. HR: 156 (84% of Pr.MHR) bpm

Max. Mets: 10.20

Max. BP: 140 / 90 mmHg

Max. BP x HR: 21840 mmHg/min

Min. BP x HR: 6240 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 : 22	1.0	0	0	78	120 / 80	-1.01 aVR	0.84 II
Standing	0 : 12	1.0	0	0	83	120 / 80	-1.01 aVR	0.84 II
Hyperventilation	0 : 11	1.0	0	0	82	120 / 80	-1.27 aVR	0.84 II
1	3 : 0	4.6	2.7	10	119	130 / 80	-1.27 aVR	2.53 II
2	3 : 0	7.0	4	12	141	140 / 90	-0.76 V6	2.11 II
Peak Ex	1 : 12	10.2	5.4	14	156	140 / 90	-1.01 aVF	2.95 II
Recovery(1)	2 : 0	1.8	1.6	0	94	140 / 90	-1.01 aVR	3.38 II
Recovery(2)	2 : 0	1.0	0	0	87	120 / 80	-0.76 aVR	1.69 II
Recovery(3)	0 : 20	1.0	0	0	102	120 / 80	-1.01 aVR	1.69 III

Interpretation
COMMENTS

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

IMPRESSION :- THE TEST IS NEGATIVE FOR INDUCIBLE ISCHAEMIA.

Ref. Doctor: Dr.ADITYA KUMAR

(Summary Report edited by user)

Doctor: Dr.ADITYA KUMAR

Schiller CS-20 V 1.9

Asian City Hospital (A unit of Blue Sapphire Healthcare Pvt. Ltd.) CIN : U71999DL2007PTC159674

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MRS. MAHIMA KAPOOR	IPD No.	:
Age	: 35 Yrs	UHID	: APH000014216
Gender	: FEMALE	Bill No.	: APHHC230000406
Ref. Doctor	: MEDIWHEEL	Bill Date	: 01-04-2023 09:48:56
Ward	:	Room No.	:
		Print Date	: 01-04-2023 12:22:13

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and shows mild increase in parenchymal echogenicity S/O grade I fatty liver infiltration. (Liver measures 12.9 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 (8.6 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.6 cm), Left kidney (10.4 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 8.8 x 5.0 x 4.2 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 (4.7 mm).

Both ovaries are normal in size and echotexture. Right ovary measures 1.8 x 1.5 cm, left ovary measures 2.1 x 1.4 cm.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.


IMPRESSION:

- Grade I fatty infiltration of liver.

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.

Patient:

MRS MAHINA KAPOOR

RP1000014216

55 year F H

..... cm / kg

HR 63/min

Intervals:

RR 945 ms

P 142 ms

PR 162 ms

QR5 82 ms

QT 400 ms

QTc 412 ms

10 mm/mV

Rxifs:

P 38 °

QR5 36 °

T 34 °

P (T1) 0.13 mV

S (U1) -0.72 mV

R (U5) 1.52 mV

Sokol 2.35 mV

SINUS RHYTHM
NO SPECIFIC ECG ABNORMALITIES

5.62

10 mm/mV

