

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. RAJ SHEKHAR	IPD No.	:	
Age	: 33 Yrs 3 Mth	UHID	:	APH000014100
Gender	: MALE	Bill No.	:	APHHC230000365
Ref. Doctor	: MEDIWHEEL	Bill Date	:	26-03-2023 11:37:20
Ward	:	Room No.	:	
		Print Date	:	27-03-2023 11:00:30

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. RAJ SHEKHAR	IPD No.	:	
Age	: 33 Yrs 3 Mth	UHID	:	APH000014100
Gender	: MALE	Bill No.	:	APHHC230000365
Ref. Doctor	: MEDIWHEEL	Bill Date	:	26-03-2023 11:37:20
Ward	:	Room No.	:	
		Print Date	:	30-03-2023 11:55:53

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 13.7 cm).

Tiny simple hepatic cyst of size ~ 14.3 x 10 mm seen in segment VI. Intrahepatic biliary radicals are not dilated.

Portal vein is normal in calibre (8.3 mm).

Gall bladder is post-operative status.

CBD is normal in calibre (5.3 mm).

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 (10.8 cm), Left kidney (10.2 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 11.2 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 with tiny simple hepatic cyst in segment VI.

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 Details Date: 30-Mar-23 Time: 12:02:29 PM
 Name: MR.RAJ SHEKHAR ID: APH000014100
 Age: 33 y Sex: M Height: 172 cms. Weight: 101 Kg.
 Clinical History:

Medications:

Test Details

Protocol: Bruce Pr.MHR: 187 bpm THR: 168 (90 % of Pr.MHR) bpm
 Total Exec. Time: 7 m 44 s Max. HR: 155 (83% of Pr.MHR) bpm Max. Mets: 10.20
 Max. BP: 140 / 90 mmHg Max. BP x HR: 21700 mmHg/min Min. BP x HR: 6320 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 : 23	1.0	0	0	84	120 / 80	-1.01 aVR	1.27 I
Standing	0 : 13	1.0	0	0	85	120 / 80	-1.01 aVR	1.27 I
Hyperventilation	0 : 9	1.0	0	0	79	120 / 80	-1.01 aVR	1.27 I
1	3 : 0	4.6	2.7	10	127	130 / 80	-1.52 aVR	2.11 II
2	3 : 0	7.0	4	12	138	140 / 90	-1.77 V1	-4.64 V1
Peak Ex	1 : 44	10.2	5.4	14	155	140 / 90	-1.77 aVF	5.49 V4
Recovery(1)	2 : 0	1.8	1.6	0	106	140 / 90	-2.28 V4	5.91 V4
Recovery(2)	2 : 0	1.0	0	0	101	120 / 80	-1.27 aVR	2.53 II
Recovery(3)	0 : 11	1.0	0	0	92	120 / 80	-1.01 aVR	1.27 I

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.ADITYA KUMAR

Doctor: Dr.ADITYA KUMAR

(Summary Report edited by user)

Schiller CS-20 V 1.9

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

FINAL REPORT

Bill No.	APHHC230000365	Bill Date	26-03-2023 11:37
Patient Name	MR. RAJ SHEKHAR	UHID	APH000014100
Age / Gender	33 Yrs 4 Mth / MALE	Patient Type	OPD <input type="checkbox"/> IPHC <input type="checkbox"/>
Ref. Consultant	MEDIWHEEL	Ward / Bed	/
Sample ID	APH23007274	Current Ward / Bed	/
		Receiving Date & Time	26-03-2023 12:41
		Reporting Date & Time	26-03-2023 16:00

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-Indicators)		Negative		Negative
SUGAR (GOD POD Method)		Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)		1.010		1.005 - 1.030

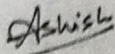
MICROSCOPIC EXAMINATION

LEUCOCYTES		2-3	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		0-1		
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. :	APHHC230000365	Bill Date :	26-03-2023 11:37
Patient Name :	MR. RAJ SHEKHAR	UHID :	APH000014100
Age / Gender :	33 Yrs 4 Mth / MALE	Patient Type :	OPD If PHC :
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23007283	Current Ward / Bed :	/
		Receiving Date & Time :	26-03-2023 15:14
		Reporting Date & Time :	26-03-2023 15:57

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	0.7	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		94.0	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>		118.0	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	227	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immuno-inhibition</small>		49	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	148	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO-POD)</small>		129	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	178.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.6		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		3.0		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		26	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>(OPD)</small>		0.46	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(OPD)</small>		0.09	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.37	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		7.2	g/dL	6 - 8.1

FINAL REPORT

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Patient Name :	MR. RAJ SHEKHAR	UHID :	APH000014100
Age / Gender :	33 Yrs 4 Mth / MALE	Patient Type :	OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23007283	Current Ward / Bed :	/
		Receiving Date & Time :	26-03-2023 15:14
		Reporting Date & Time :	26-03-2023 15:57

ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.2	g/dL	
S.GLOBULIN		3.0	g/dL	2.8-3.8
A/G RATIO	L	1.40		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC, AMP BUFFER)		73.4	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		18.2	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)		23.9	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		17.9	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC, L-P)		168.8	IU/L	0 - 248
S.PROTEIN-TOTAL (Skand)		7.2	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		5.8	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. :	APHHC230000365	Bill Date :	26-03-2023 11:37
Patient Name :	MR. RAJ SHEKHAR	UHID :	APH000014100
Age / Gender :	33 Yrs 4 Mth / MALE	Patient Type :	OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23007283	Current Ward / Bed :	/
		Receiving Date & Time :	26-03-2023 15:14
		Reporting Date & Time :	26-03-2023 15:57

Sample Type: EDTA Whole Blood, Plasma, Serum

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

HBA1C (Turbidimetric Immuno-inhibition)	5.9	%	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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MBBS, MD
CONSULTANT

FINAL REPORT

Bill No. : APHHC230000365	Bill Date : 26-03-2023 11:37
Patient Name : MR. RAJ SHEKHAR	UHID : APH000014100
Age / Gender : 33 Yrs 4 Mth / MALE	Patient Type : OPD If PHC :
Ref. Consultant : MEDIWHEEL	Ward / Bed : /
Sample ID : APH23007264	Current Ward / Bed : /
	Receiving Date & Time : 26-03-2023 12:15
	Reporting Date & Time : 26-03-2023 16:02

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

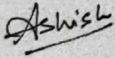
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.88	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.24	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		1.92	mIU/L	0.27-4.20

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



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FINAL REPORT

Bill No.	: APHHC230000365	Bill Date	: 26-03-2023 11:37
Patient Name	: MR. RAJ SHEKHAR	UHID	: APH000014100
Age / Gender	: 33 Yrs 4 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23007261	Current Ward / Bed	: /
		Receiving Date & Time	: 26-03-2023 12:15
		Reporting Date & Time	: 26-03-2023 15:58

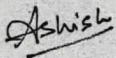
BLOOD BANK REPORTING

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)		"O"		
RH TYPE		POSITIVE		

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



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CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000365	Bill Date	: 26-03-2023 11:37
Patient Name	: MR. RAJ SHEKHAR	UHID	: APH000014100
Age / Gender	: 33 Yrs 4 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23007260	Current Ward / Bed	: /
		Receiving Date & Time	: 26-03-2023 12:15
		Reporting Date & Time	: 26-03-2023 16:00

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)		9.5	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		5.4	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		14.8	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		44.8	%	40 - 50
MEAN CORPUSCULAR VOLUME	L	82.2	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		27.1	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.0	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)		41.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.2	%	11.6 - 14

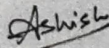
DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		60	%	40 - 80
LYMPHOCYTES		30	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		4	%	1 - 5
BASOPHILS		0	%	0 - 1

ESR (Westergren)	H	41	mm 1st hr	0 - 10
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**** End of Report ****
IMPORTANT INSTRUCTIONS

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