

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	:	MRS. MRIDULA RANJAN	IPD No.	:	
Age	:	27 Yrs 2 Mth	UHID	:	APH000018837
Gender	:	FEMALE	Bill No.	:	APHHC230001375
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-12-2023 09:40:05
Ward	:		Room No.	:	
			Print Date	:	09-12-2023 11:42:32

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
Radiodiagnosis, FRCR (London)
BCMR/46075
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.

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FINAL REPORT

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Patient Name	: MRS. MRIDULA RANJAN	UHID	: APH000018837
Age / Gender	: 27 Yrs 2 Mth / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward	:
Sample ID	: APH23034064	Current Bed	:
	:	Reporting Date & Time	: 12-12-2023 10:16
	:	Receiving Date & Time	: 12/12/2023 10:11

CYTOPATHOLOGY REPORTING

Cytopathology No: C-151/23

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.

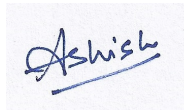
Non-Neoplastic Findings: Dense neutrophilic infiltrates.

Specific Infections: Nil.

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

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MRS. MRIDULA RANJAN	IPD No.	:	
Age	: 27 Yrs 2 Mth	UHID	:	APH000018837
Gender	: FEMALE	Bill No.	:	APHHC230001375
Ref. Doctor	: MEDIWHEEL	Bill Date	:	09-12-2023 09:40:05
Ward	:	Room No.	:	
		Print Date	:	09-12-2023 11:06:42

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 13.1cm)

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 (9.1 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.3 cm), Left kidney (10.9 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen in right kidney.

Mild hydronephrosis seen in left kidney with mildly dilated proximal ureter and rest of the ureter obscured by bowel gas. No renal calculus seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 8.3 x 4.9 x 3.1 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 (7.1 mm).

Anechoic thin walled cystic lesion having fine reticulation within and no internal vascularity of size ~ 4.5 x 3.8 cm seen in right adnexa likely hemorrhagic ovarian cyst/endometriotic cyst.

Similar another large cystic lesion of size ~ 6.1 x 3.7 cm having fine reticulation and thin septation within and no internal vascularity seen in left adnexa with left ovary not seen separately suggesting likely hemorrhagic ovarian cyst/ endometriotic cyst. (Suggested follow up)

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

Please correlate clinically.....

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

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Patient Name	: MRS. MRIDULA RANJAN	UHID	: APH000018837
Age / Gender	: 27 Yrs 2 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23033813	Current Ward / Bed	: /
		Receiving Date & Time	: 09-12-2023 11:16
		Reporting Date & Time	: 09-12-2023 17:49

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

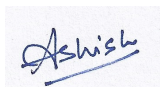
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.42	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.69	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	H	5.84	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

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Age / Gender	: 27 Yrs 2 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23033809	Current Ward / Bed	: /
		Receiving Date & Time	: 09-12-2023 11:16
		Reporting Date & Time	: 09-12-2023 15:03

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)		6.4	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.3	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	10.2	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	32.7	%	36 - 46
MEAN CORPUSCULAR VOLUME	L	75.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	23.6	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	L	31.3	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		218	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	49.6	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	18.2	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

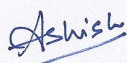
NEUTROPHILS		69	%	40 - 80
LYMPHOCYTES		22	%	20 - 40
MONOCYTES		7	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1

ESR (Westergren)	H	68	mm 1st hr	0 - 20
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** End of Report **

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Age / Gender	: 27 Yrs 2 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23033850	Current Ward / Bed	: /
		Receiving Date & Time	: 09-12-2023 12:14
		Reporting Date & Time	: 09-12-2023 17:27

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		20 mL		
COLOUR		Pale yellow		Pale Yellow
TURBIDITY		Clear		

CHEMICAL EXAMINATION

PH <small>(Double pH indicator method)</small>		6.5		5.0 - 8.5
PROTEINS <small>(Protein-error-of-indicators)</small>		Negative		Negative
SUGAR <small>(GOD POD Method)</small>		Negative		Negative
SPECIFIC GRAVITY, URINE <small>(Apparent pKa change)</small>		1.020		1.005 - 1.030

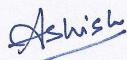
MICROSCOPIC EXAMINATION

LEUCOCYTES		2-4	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		4-6		
CASTS		Nil		
CRYSTALS		Nil		
URINE-SUGAR		NEGATIVE		

** End of Report **

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Age / Gender	: 27 Yrs 2 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23033894	Current Ward / Bed	: /
		Receiving Date & Time	: 09-12-2023 15:36
		Reporting Date & Time	: 09-12-2023 17:30

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_FEMALE BELOW40@2550

BLOOD UREA <small>Urease-GLDH,Kinetic</small>		15	mg/dL	15 - 45
BUN <small>(CALCULATED)</small>		7.0	mg/dL	7 - 21

CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	L	0.4	mg/dL	0.6 - 1.1
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GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		88.0	mg/dL	70 - 100
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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>		109.0	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	177	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immuno-inhibition</small>	L	44	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	119	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		132	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	133.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.0		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		2.7		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		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:
 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>		0.94	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>		0.20	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.74	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.5	g/dL	6 - 8.1

FINAL REPORT

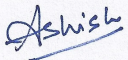
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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
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		Reporting Date & Time	: 09-12-2023 17:30

ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		3.9	g/dL	
S.GLOBULIN	L	2.6	g/dL	2.8-3.8
A/G RATIO		1.50		1.5 - 2.5
ALKALINE PHOSPHATASE <small>IFCC AMP BUFFER</small>		49.4	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) <small>(IFCC)</small>		23.8	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) <small>(IFCC)</small>		19.1	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE <small>(IFCC)</small>		11.6	IU/L	7 - 35
LACTATE DEHYDROGENASE <small>(IFCC; L-P)</small>		148.6	IU/L	0 - 248
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.5	g/dL	6 - 8.1
URIC ACID <small>Uricase - Trinder</small>	L	2.4	mg/dL	2.6 - 7.2

** End of Report **

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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	5.5	%	4.0 - 6.2
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INTERPRETATION:

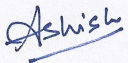
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- 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.

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Age / Gender	: 27 Yrs 2 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23033810	Current Ward / Bed	: /
		Receiving Date & Time	: 09-12-2023 11:16
		Reporting Date & Time	: 09-12-2023 20:06

BLOOD BANK REPORTING

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

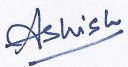
MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**** End of Report ****

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