



## NON INVASIVE CARDIOLOGY

Patient Name	: MR. TAPESHWAR KUMAR ANAND	IPD No.	:	
Age	: 38 Yrs 4 Mth	UHID	:	APH000014176
Gender	: MALE	Bill No.	:	APHHC230000392
Ref. Doctor	: MEIDWHEEL	Bill Date	:	30-03-2023 09:37:36
Ward	:	Room No.	:	
		Procedure Date	:	31-03-2023 15:11:54

### ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

#### M MODE STUDY (MEASUREMENTS)

##### Left Ventricle:-

EDD:	41	(mm)	Left Atrium	29	(mm)
ESD:	28	(mm)	Aortic Root	26	(mm)
IVS Thickness (D/S)	1.2/1.6	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	1.2/1.5	(mm)	Pericardium		NORMAL
LVEF	62	(%)			

##### 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 (mm Hg)	Orifice Area (cm <sup>2</sup> )	REGURGITATION
MV E/A	0.58/0.80			MR:-NIL
AV	1.19	5.66		AR:- NIL
TV	1.11	4.93		TR:- NIL
PV	1.06	4.52		PR:- NIL

#### IMPRESSION: -

No RWMA.  
Normal Cardiac Chamber Dimensions.  
Normal LV/RV Systolic Function, LVEF-62%.  
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

DR. ADITYA KUMAR.  
MD, DM (CARDIOLOGY)  
CONSULTANT CARDIOLOGIST



## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. TAPESHWAR KUMAR ANAND	IPD No.	:	
Age	: 38 Yrs 4 Mth	UHID	:	APH000014176
Gender	: MALE	Bill No.	:	APHHC230000392
Ref. Doctor	: MEIDWHEEL	Bill Date	:	30-03-2023 09:37:36
Ward	:	Room No.	:	
		Print Date	:	30-03-2023 12:08:29

### CHEST PA VIEW:

Tiny calcified focus seen in right lower zone.

Cardiac shadow appears normal.

Rest of the 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	: MRS. PRITI KUMARI	IPD No.	:
Age	: 27 Yrs 10 Mth	UHID	: APH000014175
Gender	: FEMALE	Bill No.	: APHHC230000391
Ref. Doctor	: MEDIWHEEL	Bill Date	: 30-03-2023 09:30:28
Ward	:	Room No.	:
		Print Date	: 30-03-2023 10:37:53

### WHOLE ABDOMEN:


Both the hepatic lobes are normal in size and echotexture (Liver measures 11.3 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 (10.1 cm) and echotexture.  
 Both kidneys are normal in size and echotexture (Right kidney (9.7 cm), Left kidney (7.7 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.  
 Urinary bladder appears normal.  
 Uterus is anteverted (measures 8.2 x 4.7 x 3.6 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 (6.3 mm).  
 Both ovaries are normal in size and echotexture. Right ovary measures 2.8 x 1.4 cm, left ovary measures 2.9 x 1.2 cm.  
 No free fluid or collection seen. No pleural effusion seen.  
 No significant lymphadenopathy seen.  
 No dilated bowel loop seen.

### IMPRESSION: Normal study.

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.

**Patient Details** Date: 30-Mar-23 Time: 1:19:27 PM

Name: MR.TAPESHWAR KUMAR ANAND ID: APH000014176

Age: 38 y Sex: M Height: 160 cms Weight: 66 Kgs

**Clinical History:**
**Medications:**
**Test Details**

<b>Protocol:</b> Bruce	<b>Pr.MHR:</b> 182 bpm	<b>THR:</b> 163 (90 % of Pr.MHR) bpm
<b>Total Exec. Time:</b> 7 m 7 s	<b>Max. HR:</b> 173 (95% of Pr.MHR) bpm	<b>Max. Mets:</b> 10.20
<b>Max. BP:</b> 140 / 90 mmHg	<b>Max. BP x HR:</b> 24220 mmHg/min	<b>Min. BP x HR:</b> 7040 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 : 16	1.0	0	0	88	120 / 80	-0.76 aVR	1.27 V2
Standing	0 : 10	1.0	0	0	91	120 / 80	-1.01 aVR	1.27 II
Hyperventilation	0 : 10	1.0	0	0	96	120 / 80	-1.01 aVR	1.27 II
1	3 : 0	4.6	2.7	10	146	130 / 80	-2.78 aVR	5.91 II
2	3 : 0	7.0	4	12	162	140 / 90	-1.77 aVR	5.91 II
Peak Ex	1 : 7	10.2	5.4	14	173	140 / 90	-1.27 aVR	4.64 II
Recovery(1)	2 : 0	1.8	1.6	0	125	140 / 90	-2.53 aVR	5.49 II
Recovery(2)	2 : 0	1.0	0	0	114	123 / 80	-1.52 aVR	4.22 II
Recovery(3)	0 : 28	1.0	0	0	112	123 / 80	-1.01 aVR	2.11 II

**Interpretation**
**COMMENTS**

- : FAIR EXCERCISE (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 : U74999DL2007PTC159674



Patient: TAPESHWAR KR ANAND  
RPH014176  
38 year / M

HR 81/min  
Intervals:  
RR 742 ms  
P 106 ms  
PR 154 ms  
QR5 86 ms  
QT 338 ms  
QTc 393 ms

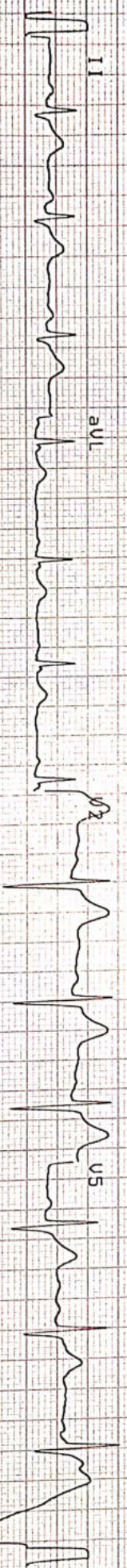
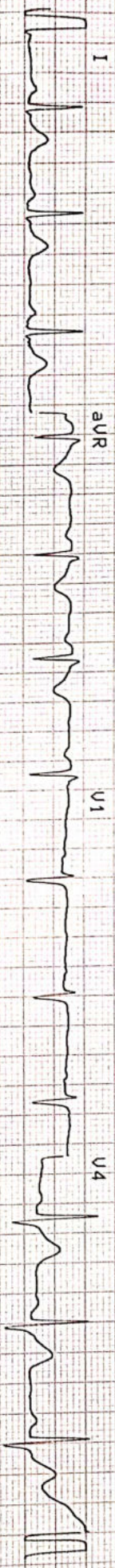
Axis: P 32°  
QR5 1°  
T 24°  
P (I1) 0.09 mV  
S (U1) -0.61 mV  
R (U5) 1.03 mV  
Sokol 2.58 mV

SINUS RHYTHM  
OTHERWISE NORMAL ECG  
5.62

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

10 mm/mV

10 mm/mV



25 mm/s

0.05-25Hz F50 SSF SBS TH 30-MAR-23 13:25:36

ASIRN CITY HOSPITAL PATNA

AT-2p/us 4.14 CM

SCHILLER

Part No 2 157017M

CE 0123

IBC




**FINAL REPORT**

Bill No. :	APHHC230000392	Bill Date :	30-03-2023 09:37
Patient Name :	MR. TAPESHWAR KUMAR ANAND	UHID :	APH000014176
Age / Gender :	38 Yrs 4 Mth / MALE	Patient Type :	OPD If PHC :
Ref. Consultant :	MEIDWHEEL	Ward / Bed :	/
Sample ID :	APH23007743	Current Ward / Bed :	/
		Receiving Date & Time :	30-03-2023 14:23
		Reporting Date & Time :	30-03-2023 15:59

**BIOCHEMISTRY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
--------------------	------	--------	-----	-------------------------------

Sample Type: EDTA Whole Blood, Plasma, Serum

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

BLOOD UREA (Urea) (J&K) (Kinetic)		22	mg/dL	15 - 45
BUN (CALCULATE)		10.3	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.8	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		103.0	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) (UV Hexokinase)		99.0	mg/dL	70 - 140
------------------------------------------------	--	------	-------	----------

 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 (CHO-POD)	H	240	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunobion		55	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	H	146	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO-POD)	H	197	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	185.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.4		1/2 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		2.7		1/2 Average Risk <1.0 Average Risk 1.0-3.3 2 Times Average Risk 3.7-6.3 3 Times Average Risk 6.4-8.0
CHOLESTROL-VLDL	H	39	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 (DPO)		0.94	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPO)		0.17	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.77	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Buret)		7.2	g/dL	6 - 8.1

**FINAL REPORT**

Bill No. : APHHC230000392	Bill Date : 30-03-2023 09:37
Patient Name : MR. TAPESHWAR KUMAR ANAND	UHID : APH000014176
Age / Gender : 38 Yrs 4 Mth / MALE	Patient Type : OPD If PHC :
Ref. Consultant : MEIDWHEEL	Ward / Bed : /
Sample ID : APH23007743	Current Ward / Bed : /
	Receiving Date & Time : 30-03-2023 14:23
	Reporting Date & Time : 30-03-2023 15:59

ALBUMIN-SERUM (The Binding Capacity Green)		4.3	g/dL	2.8-3.8
S.GLOBULIN		2.9	g/dL	1.5 - 2.5
A/G RATIO	L	1.48		
ALKALINE PHOSPHATASE (PCO AMP BUFFER)		112.8	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (PCO)	H	75.3	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (PCO)	H	96.3	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (PCO)	H	63.0	IU/L	11 - 50
LACTATE DEHYDROGENASE (PCO L-F)		243.6	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		7.2	g/dL	6 - 8.1
URIC ACID (Uricase - Turbid)		4.1	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.	: APHHC230000392	Bill Date	: 30-03-2023 09:37
Patient Name	: MR. TAPESHWAR KUMAR ANAND	UHID	: APH000014176
Age / Gender	: 38 Yrs 4 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEIDWHEEL	Ward / Bed	: /
Sample ID	: APH23007743	Current Ward / Bed	: /
		Receiving Date & Time	: 30-03-2023 14:23
		Reporting Date & Time	: 30-03-2023 15:59

Sample Type: EDTA Whole Blood, Plasma, Serum

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

HBA1C (Turbidimetric Immuno-inhibition)	5.7	%	4.0 - 6.2
-----------------------------------------	-----	---	-----------

**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.	: APHHC230000392	Bill Date	: 30-03-2023 09:37
Patient Name	: MR. TAPESHWAR KUMAR ANAND	UHID	: APH000014176
Age / Gender	: 38 Yrs 4 Mth / MALE	Patient Type	: OPD <span style="float:right">If PHC :</span>
Ref. Consultant	: MEIDWHEEL	Ward / Bed	: /
Sample ID	: APH23007724	Current Ward / Bed	: /
		Receiving Date & Time	: 30-03-2023 13:54
		Reporting Date & Time	: 30-03-2023 17:12

**CLINICAL PATH REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
--------------------	------	--------	-----	-------------------------------

Sample Type: Urine

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

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY	30 mL		
COLOUR	Pale Straw		
TURBIDITY	Clear		Pale Yellow

CHEMICAL EXAMINATION

PH (Double pH indicator method)	5.0		5.0 - 8.5
PROTEINS (Protein-error-of-Indicators)	Negative		Negative
SUGAR (GOD POD Method)	Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.010		1.005 - 1.030

MICROSCOPIC EXAMINATION

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

**\*\* 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	: APHHC230000392	Bill Date	: 30-03-2023 09:37
Patient Name	: MR. TAPESHWAR KUMAR ANAND	UHID	: APH000014176
Age / Gender	: 38 Yrs 4 Mth / MALE	Patient Type	: OPD <span style="float:right">If PHC : <input type="checkbox"/></span>
Ref. Consultant	: MEIDWHEEL	Ward / Bed	: /
Sample ID	: APH23007696	Current Ward / Bed	: /
		Receiving Date & Time	: 30-03-2023 10:38
		Reporting Date & Time	: 30-03-2023 15:04

**SEROLOGY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
--------------------	------	--------	-----	-------------------------------

Sample Type: Serum

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

**THYROID PROFILE (FT3+FT4+TSH)**

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.27	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.05	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	H	7.47	mIU/L	0.27-4.20

**\*\* 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.	: APHHC230000392	Bill Date	: 30-03-2023 09:37
Patient Name	: MR. TAPESHWAR KUMAR ANAND	UHID	: APH000014176
Age / Gender	: 38 Yrs 4 Mth / MALE	Patient Type	: OPD <span style="float: right;">If PHC :</span>
Ref. Consultant	: MEIDWHEEL	Ward / Bed	: /
Sample ID	: APH23007693	Current Ward / Bed	: /
		Receiving Date & Time	: 30-03-2023 10:38
		Reporting Date & Time	: 30-03-2023 15:07

**BLOOD BANK REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
--------------------	------	--------	-----	-------------------------------

Sample Type: EDTA Whole Blood

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

BLOOD GROUP (ABO)

"A"

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. : APHHC230000392	Bill Date : 30-03-2023 09:37
Patient Name : MR. TAPESHWAR KUMAR ANAND	UHID : APH000014176
Age / Gender : 38 Yrs 4 Mth / MALE	Patient Type : OPD If PHC :
Ref. Consultant : MEIDWHEEL	Ward / Bed : /
Sample ID : APH23007692	Current Ward / Bed : /
	Receiving Date & Time : 30-03-2023 10:38
	Reporting Date & Time : 30-03-2023 13:49

**HAEMATOLOGY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
--------------------	------	--------	-----	-------------------------------

Sample Type: EDTA Whole Blood

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

**CBC -1 (COMPLETE BLOOD COUNT)**

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.4	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Immun Dynamic Processing)		4.8	million/cumm	4.5 - 5.5
HAEMOGLOBIN (I.S.H. Detector)		14.1	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detector)		42.7	%	40 - 50
MEAN CORPUSCULAR VOLUME		88.3	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.2	Pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.1	g/dL	31.5 - 34.5
PLATELET COUNT (Immun Dynamic Processing)		166	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW)	H	47.4	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.0	%	11.6 - 14


**DIFFERENTIAL LEUCOCYTE COUNT**

NEUTROPHILS		73	%	40 - 80
LYMPHOCYTES	L	18	%	20 - 40
MONOCYTES		7	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	35	mm 1st hr	0 - 10

\*\* End of Report \*\*

**IMPORTANT INSTRUCTIONS**

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

  
 DR. ASHISH RANJAN SINGH  
 MBBS, MD  
 CONSULTANT