

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MRS. SUSHMITA	IPD No.	:	
Age	: 34 Yrs 9 Mth	UHID	:	APH000018936
Gender	: FEMALE	Bill No.	:	APHHC230001393
Ref. Doctor	: MEDIWHEEL	Bill Date	:	14-12-2023 08:40:55
Ward	:	Room No.	:	
		Print Date	:	14-12-2023 10:59:07

WHOLE ABDOMEN:

Both the hepatic lobes are enlarged in size and shows moderate increase in parenchymal echogenicity S/O grade II fatty liver infiltration. (Liver measures 15.7 cm).

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

Portal vein is normal in calibre.

Gall bladder is post operative status. CBD is normal in calibre.

Pancreas is normal in size and echotexture.

Spleen is normal in size and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (11 cm), Left kidney (11 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is antverted (measures 8.2 x 5.8 x 4.7 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 (12.6 mm).

Both ovaries are normal in size and echotexture. Right ovary measures 2.8 x 2.2 cm, left ovary measures 2.9 x 2.2 cm.

No associated adnexal mass seen

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION: Mild hepatomegaly with grade II fatty infiltration.

Please correlate clinically.

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

Prepare By.
MD.SERAJ

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.

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	:	MRS. SUSHMITA	IPD No.	:	
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Gender	:	FEMALE	Bill No.	:	APHHC230001393
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	14-12-2023 08:40:55
Ward	:		Room No.	:	
			Print Date	:	14-12-2023 11:01:37

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.....

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FINAL REPORT

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Age / Gender	: 34 Yrs 9 Mth / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward	:
Sample ID	: APH23034357	Current Bed	:
	:	Reporting Date & Time	: 15-12-2023 10:36
	:	Receiving Date & Time	: 14/12/2023 16:16

CYTOPATHOLOGY REPORTING

Cytopathology No:C-155/23

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.

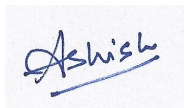
Non-Neoplastic Findings: Moderate neutrophilic infiltrates.

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

FINAL REPORT

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Patient Name	: MRS. SUSHMITA	UHID	: APH000018936
Age / Gender	: 34 Yrs 9 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034333	Current Ward / Bed	: /
		Receiving Date & Time	: 14-12-2023 13:49
		Reporting Date & Time	: 14-12-2023 14:49

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>	L	11	mg/dL	15 - 45
BUN (CALCULATED)	L	5.1	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>		92.0	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>		89.0	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	232	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Inhibition</small>		57	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	147	mg/dL	0 - 100
S. TRIGLYCERIDES <small>(GPO - POD)</small>	H	349	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	175.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.1		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		2.6		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	H	70	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>		0.52	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>		0.08	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.44	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.6	g/dL	6 - 8.1

FINAL REPORT

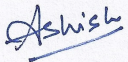
Bill No.	: APHHC230001393	Bill Date	: 14-12-2023 08:40
Patient Name	: MRS. SUSHMITA	UHID	: APH000018936
Age / Gender	: 34 Yrs 9 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034333	Current Ward / Bed	: /
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ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		3.7	g/dL	
S.GLOBULIN		2.9	g/dL	2.8-3.8
A/G RATIO	L	1.28		1.5 - 2.5
ALKALINE PHOSPHATASE <small>IFCC AMP BUFFER</small>		91.5	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) <small>(IFCC)</small>		29.2	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) <small>(IFCC)</small>	H	41.4	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE <small>(IFCC)</small>	H	47.6	IU/L	7 - 35
LACTATE DEHYDROGENASE <small>(IFCC; L-P)</small>		208.5	IU/L	0 - 248
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.6	g/dL	6 - 8.1
URIC ACID <small>Uricase - Trinder</small>		4.5	mg/dL	2.6 - 7.2

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034333	Current Ward / Bed	: /
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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	5.3	%	4.0 - 6.2
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INTERPRETATION:

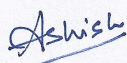
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- 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 ****

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Patient Name	: MRS. SUSHMITA	UHID	: APH000018936
Age / Gender	: 34 Yrs 9 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034275	Current Ward / Bed	: /
		Receiving Date & Time	: 14-12-2023 09:13
		Reporting Date & Time	: 14-12-2023 12:44

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

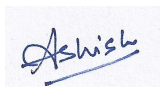
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.01	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		0.93	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	H	14.10	mIU/L	0.27-4.20

**** End of Report ****

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Age / Gender	: 34 Yrs 9 Mth / FEMALE	Patient Type	: OPD	If PHC	:
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /		
Sample ID	: APH23034272	Current Ward / Bed	: /		
		Receiving Date & Time	: 14-12-2023 09:13		
		Reporting Date & Time	: 14-12-2023 15:00		

BLOOD BANK REPORTING

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

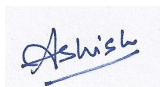
MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**** End of Report ****

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Age / Gender	: 34 Yrs 9 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034270	Current Ward / Bed	: /
		Receiving Date & Time	: 14-12-2023 09:13
		Reporting Date & Time	: 14-12-2023 12:42

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 <small>(Flow Cytometry)</small>		8.0	thousand/cumm	4 - 11
RED BLOOD CELL COUNT <small>(Hydro Dynamic Focussing)</small>		4.1	million/cumm	3.8 - 4.8
HAEMOGLOBIN <small>(SLS Hb Detection)</small>		13.3	g/dL	12 - 15
PACK CELL VOLUME <small>(Cumulative Pulse Height Detection)</small>		38.2	%	36 - 46
MEAN CORPUSCULAR VOLUME		93.7	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	H	32.5	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	H	34.7	g/dL	31.5 - 34.5
PLATELET COUNT <small>(Hydro Dynamic Focussing)</small>		210	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) <small>(Particle Size Distribution)</small>		43.9	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		13.0	%	11.6 - 14

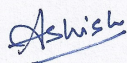
DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS	H	81	%	40 - 80
LYMPHOCYTES	L	14	%	20 - 40
MONOCYTES		3	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR <small>(Westergren)</small>	H	43	mm 1st hr	0 - 20

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Age / Gender	: 34 Yrs 9 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034431	Current Ward / Bed	: /
		Receiving Date & Time	: 15-12-2023 13:33
		Reporting Date & Time	: 15-12-2023 15:27

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

COLOUR	BROWN
CONSISTENCY	SEMI SOLID
BLOOD	NOT DETECTED
MUCOUS	ABSENT

MICROSCOPIC EXAMINATION

PUS CELLS	0-1
RBC's	NIL
TROPHOZOITES	NOT DETECTED
CYSTS	NOT DETECTED
OVA	NOT DETECTED

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY	30 mL		
COLOUR	Straw		Pale Yellow
TURBIDITY	Clear		

CHEMICAL EXAMINATION

PH <small>(Double pH indicator method)</small>	6.0		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>	L	1.005	1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES	2-3	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	4-5		
CASTS	Nil		
CRYSTALS	Nil		
OTHERS	Nil		

URINE-SUGAR	Negative
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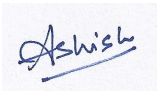
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