

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MRS. PRATIVA KUMARI	IPD No.	:	
Age	: 37 Yrs 10 Mth	UHID	:	APH000013448
Gender	: FEMALE	Bill No.	:	APHHC230000156
Ref. Doctor	: MEDIWHEEL	Bill Date	:	11-02-2023 09:51:13
Ward	:	Room No.	:	
		Print Date	:	11-02-2023 15:28:46

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.
SHASHANK.S

DR. SHASHANK SHEKHAR, M.D
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.

FINAL REPORT

Bill No.	: APHHC230000156	Bill Date	: 11-02-2023 09:51
Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 10 Mth / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward	:
Sample ID	: APH23003449	Current Bed	:
	:	Reporting Date & Time	: 13-02-2023 09:51
	:	Receiving Date & Time	: 11/02/2023 16:55

CYTOPATHOLOGY REPORTING

Cytopathology No: C- 18/23

Reporting System: BETHESDA 2014

Material Adequacy: Satisfactory for evaluation. Endocervical/Transformation zone component present.

Microscopic Examination: Mostly Superficial cells, Intermediate cells with moderate inflammation.No dysplasia or malignancy seen in the smears examined.

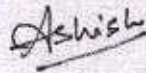
Non-Neoplastic Findings: Moderate inflammation seen

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

Bill No.	: APHHC230000156	Bill Date	: 11-02-2023 09:51
Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 11 Mth / FEMALE	Patient Type	: OPD IF PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23003370	Current Ward / Bed	: /
		Receiving Date & Time	: 11-02-2023 10:55
		Reporting Date & Time	: 11-02-2023 13:20

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)

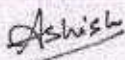
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.2	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	11.8	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	35.5	%	36 - 46
MEAN CORPUSCULAR VOLUME		84.8	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.2	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.3	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		227	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		45.8	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.2	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		58	%	40 - 80
LYMPHOCYTES		35	%	20 - 40
MONOCYTES		5	%	2 - 10
EOSINOPHILS		2	%	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.	: APHHC230000156	Bill Date	: 11-02-2023 09:51
Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 11 Mth / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23003374	Current Ward / Bed	: /
		Receiving Date & Time	: 11-02-2023 10:55
		Reporting Date & Time	: 11-02-2023 16:15

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

T3 TOTAL (ELFA)		1.54	nmol/l	0.95-2.5
T4 TOTAL (ELFA)		84.97	nmol/l	60-120
THYROID STIMULATING HORMONE (ELFA)	H	5.95	μIU/mL	0.25-5

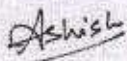
TESTS	RESULTS	EXPECTED VALUES
THYROID PROFILE TOTAL (T3,T4,TSH TOTAL)		
Thyroid-Stimulating Hormone (TSH)		0.25-5μIU/ml
Serum Triiodothyronine (T3 TOTAL)		0.95-2.5nmol/l
Serum Thyroxine (T4 TOTAL)		60-120nmol/l

Wallach's reference range for Thyroid for neonates and children

Age	TSH (μIU/ml)	TT4(nmol/l)	TT3(nmol/l)
1-4 days	1-39	142-277	1.5-11.4
1-4 wks	1.7-9.1	106-221	1.6-5.3
1-12 mon	0.8-8.2	76-210	1.6-3.8
1-5 yrs	0.7-5.7	94-193	1.6-4.1
6-10 yrs	0.7-5.7	82-171	1.4-3.7
11-15 yrs	0.7-5.7	71-151	1.3-3.3
15-18 yrs	0.7-5.7	54-152	1.2-3.2

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

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DR. ASHISH RANJAN SINGH

FINAL REPORT

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Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 11 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23003374	Current Ward / Bed	: /
	:	Receiving Date & Time	: 11-02-2023 10:55
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MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000156	Bill Date	: 11-02-2023 09:51
Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 11 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23003376	Current Ward / Bed	: /
		Receiving Date & Time	: 11-02-2023 10:56
		Reporting Date & Time	: 11-02-2023 16:17

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>		18	mg/dL	15 - 45
BUN (CALCULATED)		8.4	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe's Kinetic)</small>		0.6	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>	H	107.0	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-P00)</small>	H	201	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic ImmunoInhibition</small>		49	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	139	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - P00)</small>		145	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	152.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.1		1/3 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		2.8		1/3 Average 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		29	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>(DPO)</small>		0.56	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.09	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.47	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		6.6	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.1	g/dL	
S.GLOBULIN	L	2.5	g/dL	2.8-3.8
A/G RATIO		1.64		1.5 - 2.5

Patient Details SPECIALITY CAR **Date:** 11-Feb-23 **Time:** 11:43:40 AM
Name: MRS.PRATIVA KUMARI **ID:** APH000013448
Age: 38 y **Sex:** F **Height:** 164 cms. **Weight:** 65 Kg.
Clinical History:

Medications:

Test Details

Protocol: Bruce **Pr.MHR:** 182 bpm **THR:** 163 (90 % of Pr.MHR) bpm
Total Exec. Time: 7 m 1 s **Max. HR:** 188 (103% of Pr.MHR)bpm **Max. Mets:** 10.20
Max. BP: 140 / 90 mmHg **Max. BP x HR:** 26320 mmHg/min **Min. BP x HR:** 6000 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 : 12	1.0	0	0	75	120 / 80	-0.51 V1	1.69 II
Standing	0 : 8	1.0	0	0	77	120 / 80	-1.27 aVR	1.69 II
Hyperventilation	0 : 8	1.0	0	0	79	120 / 80	-1.27 aVR	1.27 II
1	3 : 0	4.6	2.7	10	150	130 / 80	-1.77 aVR	4.64 V1
2	3 : 0	7.0	4	12	180	140 / 90	-2.53 aVF	-5.06 V1
Peak Ex	1 : 1	10.2	5.4	14	188	140 / 90	-2.28 aVF	-3.38 V1
Recovery(1)	2 : 0	1.8	1.6	0	126	140 / 90	-2.03 aVR	5.91 II
Recovery(2)	1 : 2	1.0	0	0	84	120 / 80	-1.52 aVR	-5.06 III

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.NITISH KUMAR RANJAN.

(Summary Report edited by user)

Doctor: Dr.NITISH KUMAR RANJAN

Schiller CS-20 V-1.9

Asian City Hospital (A unit of Blue Sapphire Healthcare Pvt. Ltd.) CIN : 174939DI 2007/PTC159674

FINAL REPORT

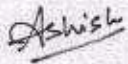
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Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 11 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23003376	Current Ward / Bed	: /
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ALKALINE PHOSPHATASE (IFCC AMP BUFFER)	77.7	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)	17.3	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	22.2	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)	18.5	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC; L-P)	162.1	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)	6.6	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)	2.6	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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 MBBS, MD
 CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000156	Bill Date	: 11-02-2023 09:51
Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 11 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23003376	Current Ward / Bed	: /
		Receiving Date & Time	: 11-02-2023 10:56
		Reporting Date & Time	: 11-02-2023 16:17

Sample Type: EDTA Whole Blood, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HbA1C (Turbidimetric Immuno-inhibition)

5.6

%

4.0 - 6.2

INTERPRETATION:

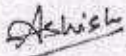
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- 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

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 MBBS, MD
 CONSULTANT

FINAL REPORT

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Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 11 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23003371	Current Ward / Bed	: /
		Receiving Date & Time	: 11-02-2023 10:55
		Reporting Date & Time	: 11-02-2023 17:13

BLOOD BANK REPORTING

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

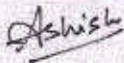
MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



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MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000156	Bill Date	: 11-02-2023 09:51
Patient Name	: MRS. PRATIVA KUMARI	UHID	: APH000013448
Age / Gender	: 37 Yrs 11 Mth / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23003443	Current Ward / Bed	: /
		Receiving Date & Time	: 11-02-2023 16:36
		Reporting Date & Time	: 11-02-2023 19:54

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 Straw		Pale Yellow
TURBIDITY	Clear		

CHEMICAL EXAMINATION

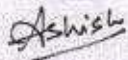
PH (Double pH indicator method)	7.5		5.0 - 8.5
PROTEINS (Protein-error-of-indicators)	Negative		Negative
SUGAR (GOD POD Method)	Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.010		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES	1-2	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	6-8		
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

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MRS. PRATIVA KUMARI	IPD No.	:
Age	: 37 Yrs 10 Mth	UHID	: APH000013448
Gender	: FEMALE	Bill No.	: APHHC230000156
Ref. Doctor	: MEDIWHEEL	Bill Date	: 11-02-2023 09:51:13
Ward	:	Room No.	:
		Print Date	: 11-02-2023 13:28:32

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 14.1cm)

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 (10.5cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.1 x 4.5cm), Left kidney (11.2 x 5.2 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Uterus is anteverted (measures 8.8 x 6.2 cm) and appears normal in size and echotexture. No focal lesion seen.

Endometrial echo is central and normal in thickness (4.0mm).

Cervix and vagina are unremarkable.

Both ovaries are normal in size and echotexture. Right ovary measures 2.9 x 1.9 cm, left ovary measures 2.2 x 1.5 cm.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION: *No obvious significant sonographic abnormality detected.*

Please correlate clinically.

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

Prepare By.
SHASHANK.S

DR. SHASHANK SHEKHAR, M.D
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.