

FINAL REPORT

Bill No.	: APHHC230000257	Bill Date	: 04-03-2023 11:21
Patient Name	: MR. PRASHANT PRIYADARSHI	UHID	: APH000013762
Age / Gender	: 36 Yrs 5 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23005247	Current Ward / Bed	: /
		Receiving Date & Time	: 04-03-2023 12:07
		Reporting Date & Time	: 04-03-2023 22:43

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		25 mL	
COLOUR		Pale Straw	Pale Yellow
TURBIDITY		Clear	

CHEMICAL EXAMINATION

PH (Double pH Indicator method)		7.0	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		2-3	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		1-3/HPF		
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

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23005246	Current Ward / Bed	: /
		Receiving Date & Time	: 04-03-2023 12:07
		Reporting Date & Time	: 04-03-2023 16:02

BLOOD BANK REPORTING

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

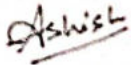
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**** End of Report ****

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Age / Gender	: 36 Yrs 5 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23005249	Current Ward / Bed	: /
		Receiving Date & Time	: 04-03-2023 12:07
		Reporting Date & Time	: 04-03-2023 16:15

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_MALE(BELOW-40)@2400

BLOOD UREA <small>Urease-GLDH,Kinetic</small>		20	mg/dL	15 - 45
BUN (CALCULATED)		9.3	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	L	0.8	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		93.0	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-POD)</small>	H	221	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>		43	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	166	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>	H	208	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	178.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.1		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		3.9		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	H	42	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>(BPO)</small>	H	1.18	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(BPO)</small>		0.16	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	1.02	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.3	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.4	g/dL	
S.GLOBULIN		2.9	g/dL	2.8-3.8
A/G RATIO		1.52		1.5 - 2.5

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ALKALINE PHOSPHATASE (IFCC AMP BUFFER)	104.5	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)	29.2	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	32.4	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)	20.4	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)	178.1	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)	7.3	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)	5.2	mg/dL	2.6 - 7.2

**** End of Report ****

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Age / Gender	: 36 Yrs 5 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23005249	Current Ward / Bed	: /
		Receiving Date & Time	: 04-03-2023 12.07
		Reporting Date & Time	: 04-03-2023 16:15

Sample Type: EDTA Whole Blood, Serum

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

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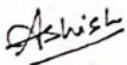
INTERPRETATION:

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	: 36 Yrs 5 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23005245	Current Ward / Bed	: /
		Receiving Date & Time	: 04-03-2023 12:07
		Reporting Date & Time	: 04-03-2023 15:33

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)		7.5	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		5.5	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		15.0	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		44.6	%	40 - 50
MEAN CORPUSCULAR VOLUME	L	80.8	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		27.2	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.7	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		204	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		40.5	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	152.0	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		60	%	40 - 80
LYMPHOCYTES		32	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	25	mm 1st hr	0 - 10

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DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. PRASHANT PRIYADARSHI	IPD No.	:	
Age	: 36 Yrs 4 Mth	UHID	:	APH000013762
Gender	: MALE	Bill No.	:	APHHC230000257
Ref. Doctor	: MEDIWHEEL	Bill Date	:	04-03-2023 11:21:10
Ward	:	Room No.	:	
		Print Date	:	04-03-2023 16:15:16

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

CONSULTANT RADIOLOGIST,

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. PRASHANT PRIYADARSHI	IPD No.	:
Age	: 36 Yrs 4 Mth	UHID	: APH000013762
Gender	: MALE	Bill No.	: APHHC230000257
Ref. Doctor	: MEDIWHEEL	Bill Date	: 04-03-2023 11:21:10
Ward	:	Room No.	:
		Print Date	: 04-03-2023 15:48:01

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and shows mild increase in parenchymal echogenicity
S/O grade I fatty liver infiltration. (Liver measures 13.0 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 and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.9 x 4.9 cm), Left kidney (10.3 x 5.6 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 18.5 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 I fatty changes in liver, Rest is insignificant.

Please correlate clinically.

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

Prepare By.
MD.SALMAN

CONSULTANT RADIOLOGIST,

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NON INVASIVE CARDIOLOGY

Patient Name	: MR. PRASHANT PRIYADARSHI	IPD No.	:
Age	: 36 Yrs 4 Mth	UHID	: APH000013762
Gender	: MALE	Bill No.	: APHHC230000257
Ref. Doctor	: MEDIWHEEL	Bill Date	: 04-03-2023 11:21:10
Ward	:	Room No.	:
		Procedure Date	: 04-03-2023 13:10:52

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	38	(mm)	Left Atrium	34	(mm)
ESD:	26	(mm)	Aortic Root	31	(mm)
IVS Thickness (D/S)	1.1/1.5	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	0.9/2.0	(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 ²)	REGURGITATION
MV E/A	0.68/0.49			MR:-NIL
AV	1.28	6.57		AR:- NIL
TV	1.38	7.65		TR:- NIL
PV	1.29	6.65		PR:- NIL

IMPRESSION: -

No RWMA.
Mild Concentric LVH.
Grade I LV DD.
Normal Cardiac Chamber Dimensions.
Normal LV/RV Systolic Function, LVEF-62%.
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

DR.ADITYA KUMAR.
MD, DM (CARDIOLOGY)