

Patient Details **Date:** 25-Feb-23 **Time:** 2:52:44 PM

Name: MR.PRABHAT KUMAR SUMAN **ID:** APH000013674

Age: 34 y

Sex: M

Height: 168 cms.

Weight: 65 Kg.

Clinical History:
Medications:
Test Details
Protocol: Bruce

Pr.MHR: 186 bpm

THR: 167 (90 % of Pr.MHR) bpm

Total Exec. Time: 5 m 39 s

Max. HR: 181 (97% of Pr.MHR)bpm

Max. Mets: 7.00

Max. BP: 140 / 90 mmHg

Max. BP x HR: 25340 mmHg/min

Min. BP x HR: 9360 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 : 23	1.0	0	0	118	120 / 80	-1.01 aVR	1.69 V2
Standing	0 : 13	1.0	0	0	117	120 / 80	-1.01 aVR	1.69 V2
Hyperventilation	0 : 10	1.0	0	0	117	120 / 80	-1.01 aVR	1.27 II
1	3 : 0	4.6	2.7	10	150	130 / 80	-1.52 aVR	4.22 V2
Peak Ex	2 : 39	7.0	4	12	181	140 / 90	-1.01 III	5.49 V2
Recovery(1)	2 : 0	1.8	1.6	0	145	140 / 90	-2.78 aVR	5.91 II
Recovery(2)	2 : 0	1.0	0	0	123	130 / 80	-2.03 aVR	5.91 V2
Recovery(3)	1 : 0	1.0	0	0	126	120 / 80	-1.01 aVR	2.11 V2
Recovery(4)	0 : 7	1.0	0	0	131	120 / 80	-1.01 aVR	2.11 V2

Interpretation
COMMENTS

- :- FAIR EXERCISE (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.) GIN : U74099DL2007PTC150674

FINAL REPORT

Bill No.	: APHHC230000226	Bill Date	: 25-02-2023 11:17
Patient Name	: MR. PRABHAT KUMAR SUMAN	UHID	: APH000013674
Age / Gender	: 34 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004660	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 18:52
		Reporting Date & Time	: 25-02-2023 19:52

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 yellow	Pale Yellow
TURBIDITY	Clear	

CHEMICAL EXAMINATION

PH (Double pH indicator method)	6.0	5.0 - 8.5
PROTEINS (Protein-error-of-indicators)	Negative	Negative
SUGAR (GOD-POD Method)	Negative	Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.030	1.005 - 1.030

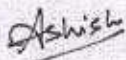
MICROSCOPIC EXAMINATION

LEUCOCYTES	1-2	/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



DR. ASHISH RANJAN SINGH

MBBS, MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000226	Bill Date	: 25-02-2023 11:17
Patient Name	: MR. PRABHAT KUMAR SUMAN	UHID	: APH000013674
Age / Gender	: 34 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004652	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 17:41
		Reporting Date & Time	: 25-02-2023 18:35

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_MALE(BELOW-40)@2400

BLOOD UREA <small>Urease-GLDH,Kinetic</small>		24	mg/dL	15 - 45
BUN <small>(CALCULATED)</small>		11.2	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe's Kinetic)</small>	L	0.7	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		105.0	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>		122.0	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-PGD)</small>	H	194	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immuno-inhibition</small>		43	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	139	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO-PGD)</small>	H	166	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	151.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.5		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		3.2		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		33	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>	H	1.05	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.17	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	0.88	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		6.6	g/dL	6 - 8.1

FINAL REPORT

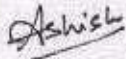
Bill No.	: APHHC230000226	Bill Date	: 25-02-2023 11:17
Patient Name	: MR. PRABHAT KUMAR SUMAN	UHID	: APH000013674
Age / Gender	: 34 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004652	Current Ward / Bed	: /
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		Reporting Date & Time	: 25-02-2023 18:35

ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.0	g/dL	
S.GLOBULIN	L	2.6	g/dL	2.6-3.8
A/G RATIO		1.54		1.5 - 2.5
ALKALINE PHOSPHATASE (IPEC AMP-BUFFER)		107.2	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IPEC)		28.5	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IPEC)	H	52.1	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IPEC)		21.7	IU/L	11 - 50
LACTATE DEHYDROGENASE (IPEC; L-P)		150.6	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		6.6	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		3.7	mg/dL	2.6 - 7.2

**** End of Report ****

IMPORTANT INSTRUCTIONS

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FINAL REPORT

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Sample ID	: APH23004652	Current Ward / Bed	: /		
		Receiving Date & Time	: 25-02-2023 17:41		
		Reporting Date & Time	: 25-02-2023 18:35		

Sample Type: EDTA Whole Blood, Plasma, Serum

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

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

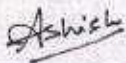
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- 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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FINAL REPORT

Bill No.	: APHHC230000226	Bill Date	: 25-02-2023 11:17
Patient Name	: MR. PRABHAT KUMAR SUMAN	UHID	: APH000013674
Age / Gender	: 34 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004632	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 13:31
		Reporting Date & Time	: 26-02-2023 17:54

BLOOD BANK REPORTING

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

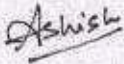
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



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MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000226	Bill Date	: 25-02-2023 11:17
Patient Name	: MR. PRABHAT KUMAR SUMAN	UHID	: APH000013674
Age / Gender	: 34 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004635	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 13:31
		Reporting Date & Time	: 25-02-2023 20:39

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum

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

T3 TOTAL (ELFA)		1.41	nmol/l	0.95-2.5
T4 TOTAL (ELFA)		95.38	nmol/l	60-120
THYROID STIMULATING HORMONE (ELFA)		1.31	μIU/mL	0.25-5

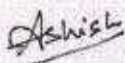
TESTS	RESULTS	EXPECTED VALUES
THYROID PROFILE TOTAL (T3,T4,TSH TOTAL)		
Thyroid-Stimulating Hormone (TSH)		0.25-5μIU/ml
Serum Triiodothyronine (T3 TOTAL)		0.95-2.5nmol/l
Serum Thyroxine (T4 TOTAL)		60-120nmol/l

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

Bill No.	: APHHC230000226	Bill Date	: 25-02-2023 11:17
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Age / Gender	: 34 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004635	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 13:31
		Reporting Date & Time	: 25-02-2023 20:39

MBBS,MD
CONSULTANT

NON INVASIVE CARDIOLOGY

Patient Name	: MR. PRABHAT KUMAR SUMAN	IPD No.	:
Age	: 34 Yrs 6 Mth	UHID	: APH000013674
Gender	: MALE	Bill No.	: APHHC230000226
Ref. Doctor	: MEDIWHEEL	Bill Date	: 25-02-2023 11:17:26
Ward	:	Room No.	:
		Procedure Date	: 25-02-2023 17:47:14

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	48	(mm)	Left Atrium	29	(mm)
ESD:	33	(mm)	Aortic Root	26	(mm)
IVS Thickness (D/S)	1.3/1.4	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	1.3/2.0	(mm)	Pericardium	NORMAL	
LVEF	60	(%)			

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	Orifice Area (cm ²)	REGURGITATION
		(mm Hg)				
MV E/A	0.71/0.62					MR:-NIL
AV	1.19	5.66				AR:- NIL
TV	0.96	3.42				TR:- NIL
PV	0.90	3.22				PR:- NIL

IMPRESSION:-

No RWMA.
MILD CONCENTRIC LVH.
GRADE 1 LV DD.
Normal Cardiac Chamber Dimensions.
Normal LV/RV Systolic Function, LVEF-60%.
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

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

Asian City Hospital (A unit of Blue Sapphire Healthcare Pvt. Ltd.) CIN : U74999DL2007PTC159674

Reg. Off.: 152, Mandakini Enclave, Alaknanda, New Delhi-110019, Add.: Behind P & M Mall, Patliputra Industrial Area, Patna - 800013 (Bihar)
Tel.: +91 6122260177 | ☎ 9696396896 | E-mail : info-pt@aimsindia.com | website : www.asianpatna.com

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. PRABHAT KUMAR SUMAN	IPD No.	:	
Age	: 34 Yrs 6 Mth	UHID	:	APH000013674
Gender	: MALE	Bill No.	:	APHHC230000226
Ref. Doctor	: MEDIWHEEL	Bill Date	:	25-02-2023 11:17:26
Ward	:	Room No.	:	
		Print Date	:	26-02-2023 12:08:58

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.....



CONSULTANT RADIOLOGIST,

Prepare By.
IMAGING.PT

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.