

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MR. ASHOK KUMAR CHAKRAVARTI	IPD No.	:	
Age	: 35 Yrs 5 Mth	UHID	:	APH000016010
Gender	: MALE	Bill No.	:	APHHC230000835
Ref. Doctor	: MEDIWHEEL	Bill Date	:	22-07-2023 08:41:16
Ward	:	Room No.	:	
		Print Date	:	22-07-2023 12:25:57

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and shows moderate increase in parenchymal echogenicity S/O grade II fatty liver infiltration. (Liver measures 12.9 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 (10.5 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.0 cm), Left kidney (10.6 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 14.0 cc), outline and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION:

- Grade II fatty infiltration of liver.

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.

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

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. ASHOK KUMAR CHAKRAVARTI	IPD No.	:	
Age	: 35 Yrs 5 Mth	UHID	:	APH000016010
Gender	: MALE	Bill No.	:	APHHC230000835
Ref. Doctor	: MEDIWHEEL	Bill Date	:	22-07-2023 08:41:16
Ward	:	Room No.	:	
		Print Date	:	22-07-2023 10:33:59

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.
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(London) Radiodiagnosis
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FINAL REPORT

Bill No. :	APHHC230000835	Bill Date :	22-07-2023 08:41
Patient Name :	MR. ASHOK KUMAR CHAKRAVARTI	UHID :	APH000016010
Age / Gender :	35 Yrs 5 Mth / MALE	Patient Type :	OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23019386	Current Ward / Bed :	/
:	:	Receiving Date & Time :	22-07-2023 16:05
:	:	Reporting Date & Time :	22-07-2023 16:52

Sample Type: EDTA Whole Blood, Plasma, Serum

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

HbA1C (Turbidimetric Immuno-inhibition)	6.0	%	4.0 - 6.2
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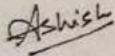
INTERPRETATION:

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 ****
IMPORTANT INSTRUCTIONS

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


DR. ASHISH RANJAN SINGH
 MBBS, MD
 CONSULTANT

FINAL REPORT

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ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.3	g/dL	
S.GLOBULIN	L	2.5	g/dL	2.8-3.8
A/G RATIO		1.72		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		64.4	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)	H	73.0	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	H	76.3	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		36.9	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)	H	250.2	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		6.8	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		5.8	mg/dL	2.6 - 7.2

** End of Report **

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Ashish

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FINAL REPORT

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Age / Gender	: 35 Yrs 5 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> IF PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23019386	Current Ward / Bed	: /
		Receiving Date & Time	: 22-07-2023 16:05
		Reporting Date & Time	: 22-07-2023 16:52

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 (Urease-GLO, Kinetic)		23	mg/dL	15 - 45
BUN (CALCULATED)		10.7	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe & Kinetic)	L	0.6	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		95.0	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)		136.0	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 (CHO-POC)	H	207	mg/dL	0 - 160
HDL CHOLESTROL (Enzymatic Immuno-inhibition)		42	mg/dL	>40
CHOLESTROL-LDL DIRECT (Enzymatic Selective Protection)	H	133	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO-POC)		104	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	165.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.9		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		3.2		1/2 Average 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		21	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)		0.87	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPO)		0.16	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.71	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (UREF)		6.8	g/dL	6 - 8.1

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Age / Gender	: 35 Yrs 5 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23019307	Current Ward / Bed	: /
		Receiving Date & Time	: 22-07-2023 09:44
		Reporting Date & Time	: 22-07-2023 16:01

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)		"O"		
RH TYPE		POSITIVE		

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Ashish

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CONSULTANT

FINAL REPORT

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Age / Gender :	35 Yrs 5 Mth / MALE	Patient Type :	OPD If PHC :
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23019306	Current Ward / Bed :	/
		Receiving Date & Time :	22-07-2023 09:44
		Reporting Date & Time :	22-07-2023 11:44

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)

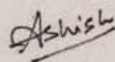
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		7.2	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	L	4.1	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		13.3	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	39.5	%	40 - 50
MEAN CORPUSCULAR VOLUME		95.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		32.0	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.6	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		168	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	49.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.5	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		63	%	40 - 80
LYMPHOCYTES		25	%	20 - 40
MONOCYTES		9	%	2 - 10
EOSINOPHILS		3	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	30	mm 1st hr	0 - 10

**** End of Report ****
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FINAL REPORT

Bill No.	: APHHC230000835	Bill Date	: 22-07-2023 08:41
Patient Name	: MR. ASHOK KUMAR CHAKRAVARTI	UHID	: APH000018010
Age / Gender	: 35 Yrs 5 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23019310	Current Ward / Bed	: /
		Receiving Date & Time	: 22-07-2023 09:44
		Reporting Date & Time	: 22-07-2023 13:29

SEROLOGY REPORTING

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

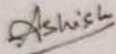
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

THYROID PROFILE (FT3+FT4+TSH)

Test (Methodology)	Result	UOM	Biological Reference Interval
FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.89	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.08	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	1.67	mIU/L	0.27-4.20

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Age / Gender :	35 Yrs 5 Mth / MALE	Patient Type :	OPD If PHC :
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23019355	Current Ward / Bed :	/
		Receiving Date & Time :	22-07-2023 13:20
		Reporting Date & Time :	22-07-2023 16:00

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	30 mL		
COLOUR	Pale yellow		Pale Yellow
TURBIDITY	Clear		

CHEMICAL EXAMINATION

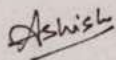
PH (Double pH indicator method)	6.0		5.0 - 8.5
PROTEINS (Protein-error-of-indicators)	Negative		Negative
SUGAR (GOD POD Method)	Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.030		1.005 - 1.030

MICROSCOPIC EXAMINATION

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

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