



**FINAL REPORT**

Bill No.	: APHHC230000432	Bill Date	: 08-04-2023 08:24
Patient Name	: MR. SANTOSH KUMAR	UHID	: APH000014333
Age / Gender	: 34 Yrs 11 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> IF PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23008587	Current Ward / Bed	: /
		Receiving Date & Time	: 08-04-2023 11:25
		Reporting Date & Time	: 08-04-2023 16:53

**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

*Ashish*

**DR. ASHISH RANJAN SINGH**  
MBBS,MD  
CONSULTANT

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Patient Name : MR. SANTOSH KUMAR	UHID : APH000014333
Age / Gender : 34 Yrs 11 Mth / MALE	Patient Type : OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant : MEDIWHEEL	Ward / Bed : /
Sample ID : APH23008586	Current Ward / Bed : /
	Receiving Date & Time : 08-04-2023 11:25
	Reporting Date & Time : 08-04-2023 14:41

**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)**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		7.5	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.6	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		14.3	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		41.7	%	40 - 50
MEAN CORPUSCULAR VOLUME		90.3	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		31.0	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		34.3	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		163	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		45.9	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.3	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
NEUTROPHILS		68	%	40 - 80
LYMPHOCYTES		22	%	20 - 40
MONOCYTES		7	%	2 - 10
EOSINOPHILS		3	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	22	mm 1st hr	0 - 10

**\*\* End of Report \*\***

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Ref. Consultant	:: MEDIWHEEL	Ward / Bed	:: /
Sample ID	:: APH230008589	Current Ward / Bed	:: /
		Receiving Date & Time	:: 08-04-2023 11:25
		Reporting Date & Time	:: 08-04-2023 15:40

ALKALINE PHOSPHATASE (PCC-WP-BUFFER)	L	51.3	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (PCC)		34.4	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (PCC)	H	53.4	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (PCC)		22.8	IU/L	11 - 50
LACTATE DEHYDROGENASE (PCC, L-F)		209.7	IU/L	0 - 248
S.PROTEIN-TOTAL (Bund)		6.5	g/dL	6 - 8.1
URIC ACID (Uricase - Trade)		4.1	mg/dL	2.6 - 7.2

\*\* End of Report \*\*

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Age / Gender :	34 Yrs 11 Mth / MALE	Patient Type :	OPD <span style="float:right">If PHC :</span>
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23008589	Current Ward / Bed :	/
		Receiving Date & Time :	08-04-2023 11:25
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## 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>		19	mg/dL	15 - 45
BUN <small>(CALCULATED)</small>		8.9	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	<b>L</b>	0.6	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		87.0	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>		157	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Inhibition</small>	<b>L</b>	39	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	<b>H</b>	101	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		80	mg/dL	0 - 160
NON-HDL CHOLESTROL		118.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.0		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 <1.0 Average Risk 1.0-3.6 2 Times Average Risk 3.7-6.3 3 Times Average Risk 6.4-8.0
CHOLESTROL-VLDL		16	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>		0.90	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.18	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.72	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		6.5	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.4	g/dL	
S.GLOBULIN	<b>L</b>	2.1	g/dL	2.8-3.8
A/G RATIO		2.10		1.5 - 2.5



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Sample Type: EDTA Whole Blood, Serum

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400**

HBA1C (Turbidimetric Immuno-inhibition)	5.7	%	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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Age / Gender	: 34 Yrs 11 Mth / MALE	Patient Type	: OPD <span style="float:right">If PHC : :</span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23008590	Current Ward / Bed	: /
		Receiving Date & Time	: 08-04-2023 11:25
		Reporting Date & Time	: 08-04-2023 16:47

**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)**

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.22	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.33	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	<b>H</b>	<b>5.14</b>	mIU/L	0.27-4.20

**\*\* End of Report \*\***

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Age / Gender	: 34 Yrs 11 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23008608	Current Ward / Bed	: /
		Receiving Date & Time	: 08-04-2023 12:47
		Reporting Date & Time	: 08-04-2023 17:33

**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		20		
COLOUR		Pale yellow		Pale Yellow
TURBIDITY		Clear		

CHEMICAL EXAMINATION

PH (Double pH indicator method)		6.5		5.0 - 8.5
PROTEINS (Protein-error-of-indicators)		Negative		Negative
SUGAR (GOD POD Method)		Negative		Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)		1.015		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		1-2	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		2-4		
CASTS		Absent		
CRYSTALS		Absent		
URINE-SUGAR		NEGATIVE		

**\*\* End of Report \*\***

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## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. SANTOSH KUMAR	IPD No.	:
Age	: 34 Yrs 10 Mth	UHID	: APH000014333
Gender	: MALE	Bill No.	: APHHC230000432
Ref. Doctor	: MEDIWEEL	Bill Date	: 08-04-2023 08:24:09
Ward	:	Room No.	:
		Print Date	: 08-04-2023 12:24:56

### 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.SERAJ

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.



## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MR. SANTOSH KUMAR	IPD No.	:
Age	: 34 Yrs 10 Mth	UHID	: APH000014333
Gender	: MALE	Bill No.	: APHHC230000432
Ref. Doctor	: MEDIWEEL	Bill Date	: 08-04-2023 08:24:09
Ward	:	Room No.	:
		Print Date	: 08-04-2023 11:44:38

### 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 ( 7.6 cm) and echotexture.

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

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 18.1 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 infiltration of liver.

Please correlate clinically.....

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

Prepare By.  
MD.SERAJ

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.