

25.08.2022 11:23:55
ASIAN FIDELIS HOSPITAL
SEC-88 FARIDABAD HARYANA
RPS CITY

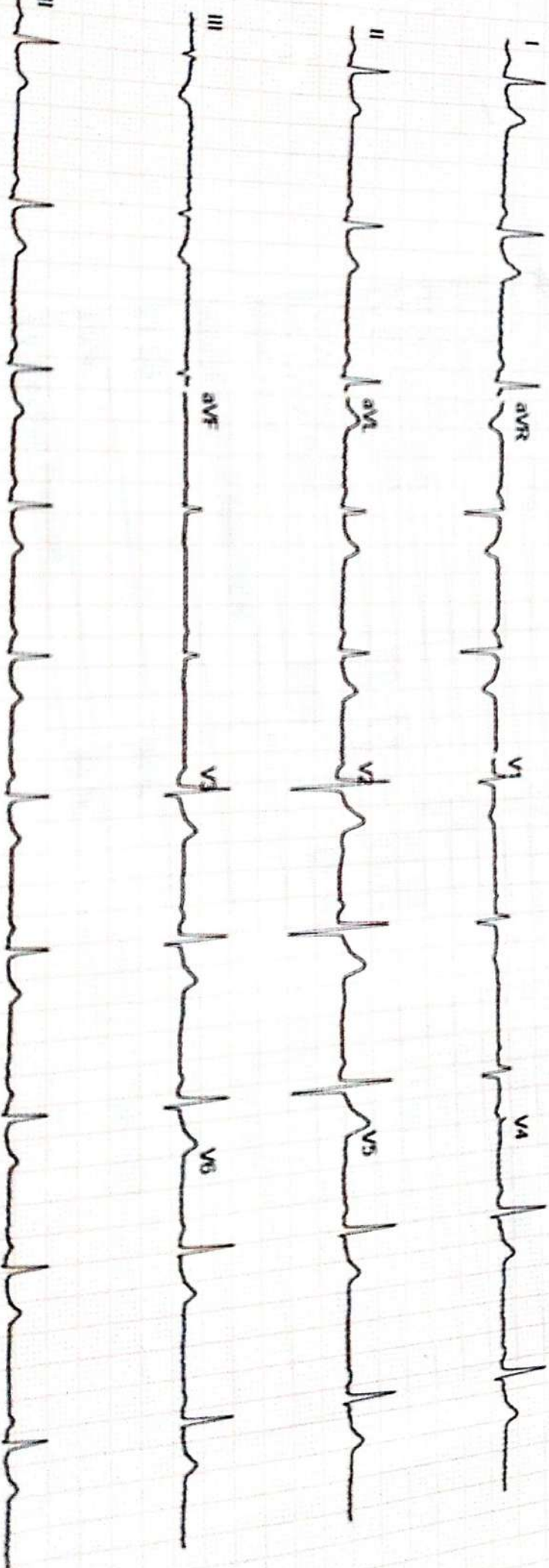
Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Technician:
Ordering ph:
Referring ph:
Attending ph:

61 bpm
-- / -- mmHg

QT/QTcBaz 80 ms
PR 412 / 414 ms
P 144 ms
RR/PP 94 ms
P/ORS/T 990 / 983 ms
28 / 19 / 0 degrees

Normal sinus rhythm with sinus arrhythmia
Possible inferior infarct. age undetermined
Abnormal ECG



GE MAC2000 1 1 12SL™ V241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 4x2.5x3_25_R1

Unconfirmed

NON INVASIVE CARDIOLOGY

Patient Name	: MR. ADITYA KUMAR	IPD No.	:
Age	: 33 Yrs 2 Mth	UHID	: AFD000014445
Gender	: MALE	Bill No.	: AFDHC220000467
Ref. Doctor	: SELF	Bill Date	: 27-08-2022 10:08:36
Ward	:	Room No.	:
		Procedure Date	: 27-08-2022 12:32:14

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENTS	ABSOLUTE VALUE	NORMAL VALUE
Aortic Root Diameter	2.6	2.0-3.7cm < 2.2cm/M2
Aortic Valve Opening	N	1.5-2.6cm
Left Atrial Dimension	3.2	1.9-4.0cm < 2.2cm/M2
RV Dimensions	N	0.7-2.6cm
RV thickness	N	0.3-0.9cm
LV ED Dimension	3.9	3.7-5.6 cm < 3.2cm /M2
LV ES Dimension	2.7	2.2-4.0 cm
IVS thickness	ED - 0.9 ES-1.2	0.6-1.2cm
LVPW Thickness	ED - 1.0 ES-1.2	0.5-1.1cm
IVS/ LVPW Ratio	N	
Mitral Valve	DE-N EF -N	

INDICES OF LV FUNCTION		
EPSS		<9mm
FS%	30 %	24-42%
LV Ejection Fraction	60 %	60+/-6%

NON INVASIVE CARDIOLOGY

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IMAGING:

2D- imaging in PLAX.SAX and apical views revealed normal left ventricle. Movement of septum, posterior and lateral walls are normal. Global LVEF is 60%. Mitral valve opening is normal. No evidence of mitral valve prolapse is seen. Aortic valve has three cusps and its opening is not restricted. Tricuspid valve leaflets move normally, Pulmonary valve is normal. Interatrial and Interventricular septal are intact, No intracardiac mass or thrombus is seen. No pericardial pathology is observed.

MORPHOLOGICAL DATA

Mitral Valve : AML PML	Normal	Interatrial Septum	Intact
Aortic Valve	Normal	Interventricular Septum	Intact
Tricuspid Valve	Normal	Pulmonary Artery	Normal
Pulmonary Valve	Normal	Aorta	Normal
Right Ventricle	Normal	Right Atrium	Normal
Left Ventricle	Normal	Left Atrium	Normal

DOPPLER STUDY

	m/s	m/s	
MITRAL VELOCITY	E-0.6	A-0.4	MR 0/4
TRICUSPID VELOCITY	1.3 m/s		TR 0/4
AORTIC VELOCITY	0.8 m/s		AR 0/4
PULMONARY VELOCITY	1.0 m/s		PR 0/4
PA Pressure	25+RAP		



NON INVASIVE CARDIOLOGY

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COLOUR FLOW MAPPING

Mild mitral regurgitation.
Trace tricuspid regurgitation.

FINAL IMPRESSION

1. No RWMA, LVEF-60%.
2. Normal cardiac chamber dimension.
3. Normal cardiac valves.
4. Mild mitral regurgitation.
5. Normal mitral inflow pattern.
6. No pulmonary artery hypertension.
7. No clot/mass/vegetation/PE

DR. MITHILESH KUMAR
MD, DNB (Cardiology).
Consultant Cardiologist
HMC-HN19723

For The perusal of a medical professional only
The content of this report is only an opinion based on images and is therefore subject to inherent technical limitations.

It is not the diagnosis & must be correlated clinically.

NOT FOR MEDICOLEGAL PURPOSES

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

Prepare By.
RAJNI.KAPOOR


FINAL REPORT

Bill No.	: AFDHC220000467	Bill Date	: 27-08-2022 10:08
Patient Name	: MR. ADITYA KUMAR	UHID	: AFD000014445
Age / Gender	: 33 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22015010	Current Ward / Bed	: /
		Receiving Date & Time	: 29-08-2022 11:52
		Reporting Date & Time	: 29-08-2022 15:47

HAEMATOLOGY REPORTING

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

MEDIWHEEL PKG FOR MALE BELOW 40YRS
CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		9.3	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.9	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		15.0	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		43.8	%	40 - 50
MEAN CORPUSCULAR VOLUME		89.8	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		30.7	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		34.2	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		150	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	56.0	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.9	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		59	%	40 - 80
LYMPHOCYTES		33	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)		7	mm 1st hr	0 - 10

MANUAL PLATELET COUNT
**** End of Report ****
IMPORTANT INSTRUCTIONS

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

Test marked with * is not under NABL scope.

 DR. RICHA KAUSHIK MISHRA
 MBBS, DNB
 CONSULTANT

FINAL REPORT

Bill No.	: AFDHC220000467	Bill Date	: 27-08-2022 10:08
Patient Name	: MR. ADITYA KUMAR	UHID	: AFD000014445
Age / Gender	: 33 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22015037	Current Ward / Bed	: /
		Receiving Date & Time	: 29-08-2022 14:49
		Reporting Date & Time	: 30-08-2022 09:33

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Stool, Urine

MEDIWHEEL PKG FOR MALE BELOW 40YRS
STOOL ROUTINE EXAMINATION
PHYSICAL EXAMINATION

COLOUR	PALE YELLOW
CONSISTENCY	SEMI SOLID
BLOOD	ABSENT
MUCOUS	ABSENT

MICROSCOPIC EXAMINATION

PUS CELLS	0-1
RBC's	NIL
TROPHOZOITES	NOT DETECTED
CYSTS	NOT DETECTED
OVA	NOT DETECTED

URINE, ROUTINE EXAMINATION
PHYSICAL EXAMINATION

QUANTITY	40 mL		
COLOUR	Yellow		Pale Yellow
TURBIDITY	Slight turbid		

CHEMICAL EXAMINATION

PH	6.0		5.0 - 8.5
PROTEINS	Negative		Negative
SUGAR	Negative		Negative
SPECIFIC GRAVITY, URINE	1.030		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES	2-3	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	2-3		
CASTS	Nil		
CRYSTALS	Nil		

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

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LABORATORY REPORT



FINAL REPORT

No.	: AFDHC220000467	Bill Date	: 27-08-2022 10:08
Patient Name	: MR. ADITYA KUMAR	UHID	: AFD000014445
Age / Gender	: 33 Yrs 2 Mth / MALE	Patient Type	: OPD
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22015011	Current Ward / Bed	: /
		Receiving Date & Time	: 29-08-2022 11:52
		Reporting Date & Time	: 29-08-2022 13:05

Test (Methodology)

BLOOD BANK REPORTING

Sample Type: EDTA Whole Blood	Flag	Result	UOM	Biological Reference Interval
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MEDIWHEEL PKG FOR MALE BELOW 40YRS

BLOOD GROUP (ABO & RH)

ABO GROUP

RH TYPE

"O"

POSITIVE

Forward grouping done by slide method.

**** End of Report ****

IMPORTANT INSTRUCTIONS

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

Test marked with * is not under NABL scope.

Richa Kaushik

DR. RICHA KAUSHIK MISHRA

MBBS, DNB
CONSULTANT

FINAL REPORT

Sample ID	: AFDHC220000467	Bill Date	: 27-08-2022 10:08
Name	: MR. ADITYA KUMAR	UHID	: AFD000014445
Gender	: 33 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC :
Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22015012	Current Ward / Bed	: /
		Receiving Date & Time	: 29-08-2022 11:52
		Reporting Date & Time	: 29-08-2022 12:57

Sample Type: Serum

MEDIWHEEL PKG FOR MALE BELOW 40YRS

GLUCOSE-PLASMA (FASTING) (UV Hexokinase)	90.7	mg/dL	70 - 100
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Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.
(As per American Diabetes Association recommendation)

KFT/RFT- KIDNEY/RENAL PANEL 1

BLOOD UREA (Urease-GLDH,Kinetic)	23	mg/dL	15 - 45
CREATININE-SERUM (Modified Jaffe s Kinetic)	L 0.8	mg/dL	0.9 - 1.3
SODIUM-SERUM (Indirect Ion-Selective Electrode)	140	m.mol/L	135 - 145
POTASSIUM-SERUM (Indirect Ion-Selective Electrode)	4.5	m.mol/L	3.5 - 5.1
CHLORIDE-SERUM (Indirect Ion-Selective Electrode)	104	m.mol/L	98 - 107

**** End of Report ****

IMPORTANT INSTRUCTIONS

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

DR. RICHA KAUSHIK MISHRA
MBBS, DNB
CONSULTANT



FINAL REPORT

Bill No.	: AFDHC220000467	Bill Date	: 27-08-2022 10:08
Patient Name	: MR. ADITYA KUMAR	UHID	: AFD000014445
Age / Gender	: 33 Yrs 2 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22015049	Current Ward / Bed	: /
		Receiving Date & Time	: 29-08-2022 16:12
		Reporting Date & Time	: 29-08-2022 17:24

BIOCHEMISTRY REPORTING

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

MEDIWHEEL PKG FOR MALE BELOW 40YRS

GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)		112.5	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)

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low
Test marked with * is not under NABL scope.

Richa Kaushik

DR. RICHA KAUSHIK MISHRA
MBBS, DNB
CONSULTANT



FINAL REPORT

Patient Name	: AFDHC220000467	Bill Date	: 27-08-2022 10:08
Ref. Name	: MR. ADITYA KUMAR	UHID	: AFD000014445
Age / Gender	: 33 Yrs 2 Mth / MALE	Patient Type	: OPD IF PHC : :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22015012	Current Ward / Bed	: /
		Receiving Date & Time	: 29-08-2022 11:52
		Reporting Date & Time	: 29-08-2022 12:57

BIOCHEMISTRY REPORTING

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

MEDIWHEEL PKG FOR MALE BELOW 40YRS

CHOLESTROL-TOTAL (CHO-P00)	H	163	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>		48	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>		99	mg/dL	0 - 100
S.TRYGLYCERIDES (GPO - P00)	H	175	mg/dL	0 - 160
NON-HDL CHOLESTROL		115.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.4		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		2.1		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		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:
 1. Cigarette smoking.
 2. Hypertension.
 3. Family history of premature coronary heart disease.
 4. Pre-existing coronary heart disease.

LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL (DPD)	H	1.14	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	H	0.22	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	0.92	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Bluret)	H	9.0	g/dL	6 - 8.1
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.9	g/dL	
S.GLOBULIN	H	4.1	g/dL	2.8-3.8
A/G RATIO	L	1.20		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		80.5	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (IFCC)	H	48.6	IU/L	10 - 42
ALANINE AMINO TRANSFERASE (IFCC)	H	78.1	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTID (IFCC)	H	55.5	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)	H	253.0	IU/L	0 - 248

** End of Report **



DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. ADITYA KUMAR	IPD No.	:	
Age	: 33 Yrs 2 Mth	UHID	:	AFD000014445
Gender	: MALE	Bill No.	:	AFDHC220000467
Ref. Doctor	: SELF	Bill Date	:	27-08-2022 10:08:36
Ward	:	Room No.	:	
		Print Date	:	29-08-2022 16:25:46

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.
BHANOO


DR. BHANOO CHAUDHARY, MBBS, MD
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. ADITYA KUMAR	IPD No.	:	
Age	: 33 Yrs 2 Mth	UHID	:	AFD000014445
Gender	: MALE	Bill No.	:	AFDHC220000467
Ref. Doctor	: SELF	Bill Date	:	27-08-2022 10:08:36
Ward	:	Room No.	:	
		Print Date	:	29-08-2022 12:21:06

USG WHOLE ABDOMEN
FINDINGS:

- Liver is enlarged in size (longitudinal span 15.8 cm) and shows moderate fatty infiltration. No evidence of any focal lesion is seen. No dilated intrahepatic biliary radicles are seen. Common duct and portal vein are normal in course and caliber.
- The gall bladder is contracted (post-prandial status).
- Visualized Pancreas is normal in size and parenchymal echogenicity. Rest of the pancreas and retroperitoneal structures are obscured by overlying bowel gas shadows.
- Spleen is normal in size and echo pattern with no focal lesion.
- Both the kidneys are normal in size, shape and position. No evidence of any hydronephrosis is noted on either side. Normal corticomedullary differentiation is maintained bilaterally. The cortical thickness is within normal limits. The right kidney measures 9.0 x 4.2 cm. The left kidney measures 10.6 x 4.1 cm. No focal lesion/calculus noted in either kidney.
- The Urinary Bladder is well distended.
- Prostate is normal in size, shape and echotexture.
- No ascites/retroperitoneal lymphadenopathy/pleural effusion.

IMPRESSION:

- **Hepatomegaly with grade II fatty changes.**

Please correlate clinically.

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



 Prepare By.
BHANO
DR. BHANO CHAUDHARY, MBBS,MD
 CONSULTANT

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