DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: XRAY

Patient Name	:	MR. ASHOK KUMAR	IPD No.	:	
Age	:	50 Yrs 1 Mth	UHID	T:	APH000014331
Gender	:	MALE	Bill No.	:	APHHC240000396
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-03-2024 09:06:26
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 13:22:08

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.

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г	ICasc	COLLE	iait c	mma	ıγ.

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

Prepare By. MD.SALMAN

DR. MUHAMMAD SERAJ, MD Radiodiagnosis, FRCR (London) BCMR/46075 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. ASHOK KUMAR	IPD No.	:	
Age	:	50 Yrs 1 Mth	UHID	:	APH000014331
Gender	:	MALE	Bill No.	:	APHHC240000396
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-03-2024 09:06:26
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 10:39:33

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 13 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 (8.9 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.5 cm), Left kidney (11.4 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal. (Pre void Vol. 146.3 cc, Post void Vol. 26.5 cc)

Prostate appears mildly enlarged in size (Vol. 36.6 cc), and normal in echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

Please correlate clinically	
	End of Report

Prepare By. MD.SALMAN

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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.

Bill No.	T:	APHHC240000396	Bill Date		:	09-03-2024 09:06			
Patient Name	:	MR. ASHOK KUMAR	UHID		:	APH000014331			
Age / Gender		50 Yrs 1 Mth / MALE	Patient Type		:	OPD	If PHC	1:1	
Ref. Consultant	:	MEDIWHEEL	Ward / Bed		:	1			
Sample ID	:	APH24008595	Current Ward / Bed		:	1			
	:		Receiving Date & Time	•	:	09-03-2024 13:32			
	Г		Reporting Date & Time	Э	:	09-03-2024 17:24			

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

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)	1.015	1.005 - 1.030

MICROSCOPIC EXAMINATION

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

**	[*] End	of F	Report	**

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

DR. ASHISH RANJAN SINGH

Bill No.	F	APHHC240000396	Bill Date	:	09-03-2024 09:06		
Patient Name	Γ	MR. ASHOK KUMAR	UHID	1	APH000014331		
Age / Gender	Г	50 Yrs 1 Mth / MALE	Patient Type		OPD	If PHC :	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed		1		
Sample ID		APH24008589	Current Ward / Bed		1		
	F		Receiving Date & Time	:	09-03-2024 13:29		
	Т		Reporting Date & Time	:	09-03-2024 15:39		

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
				Interval

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

BLOOD UREA Urease-GLDH,Kinetic		21	mg/dL	15 - 45
BUN (CALCULATED)		9.8	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.7	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)	Н	181.0	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)	Н	346.0	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-POD)	Н	178	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	31	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	130	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		113	mg/dL	0 - 160
NON-HDL CHOLESTROL	Н	147.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.7		1/2Average 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		4.2		1/2Average 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		23	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)	0.79	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	0.15	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	0.64	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	8.0	g/dL	6 - 8.1

:	APHHC240000396			Bill Date		:	09-03-2024 09:06		
:	MR. ASHOK KUMAR			UHID		:	APH000014331		
:	50 Yrs 1 Mth / MALE			Patient Type		:	OPD If PHC :		
:	MEDIWHEEL			Ward / Bed		:	1		
:	APH24008589			Current Ward / Bed		:	1		
:				Receiving Date & Tin	1e	:	09-03-2024 13:29		
Г				Reporting Date & Tin	1e	:	09-03-2024 15:39		
JΜ	(Dye Binding-Bromocresol Green)		4.5	5	g/dL				
			3.5	5	g/dL		2.8-3.8		
		L	1.	29			1.5 - 2.5		
SF	PHATASE IFCC AMP BUFFER		11	3.6	IU/L		53 - 128		
4II	NO TRANSFERASE (SGOT) (IFCC)		15	.8	IU/L		10 - 42		
0	TRANSFERASE(SGPT) (IFCC)		23	.6	IU/L		10 - 40		
١M	YLTRANSPEPTIDASE (IFCC)		28	.3	IU/L		11 - 50	11 - 50	
ſD	ROGENASE (IFCC; L-P)		12	9.5	IU/L		0 - 248		
т л			- Q (1	a/dl		6 8 1		
1 P	AL (Biuret)		10.0	,	g/uL		0 - 0.1		
se -	Trinder		5.2	2	mg/d	IL	2.6 - 7.2		
	SF 4III O M	: APHHC240000396 : MR. ASHOK KUMAR : 50 Yrs 1 Mth / MALE : MEDIWHEEL : APH24008589 : JM (Dye Binding-Bromocresol Green) SPHATASE IFCC AMP BUFFER MINO TRANSFERASE (SGOT) (IFCC) O TRANSFERASE(SGPT) (IFCC) MYLTRANSPEPTIDASE (IFCC) //DROGENASE (IFCC; L-P) TAL (Biuret)	: MR. ASHOK KUMAR : 50 Yrs 1 Mth / MALE : MEDIWHEEL : APH24008589 : JM (Dye Binding-Bromocresol Green) L SPHATASE IFCC AMP BUFFER MINO TRANSFERASE (SGOT) (IFCC) O TRANSFERASE(SGPT) (IFCC) MYLTRANSPEPTIDASE (IFCC) //DROGENASE (IFCC; L-P) TAL (Biuret)	: MR. ASHOK KUMAR : 50 Yrs 1 Mth / MALE : MEDIWHEEL : APH24008589 : JM (Dye Binding-Bromocresol Green) 4.5 L 1. SPHATASE IFCC AMP BUFFER 111 MINO TRANSFERASE (SGOT) (IFCC) 15 O TRANSFERASE(SGPT) (IFCC) 23 MYLTRANSPEPTIDASE (IFCC) 28 //DROGENASE (IFCC; L-P) 12 TAL (Biuret) 8.0	: MR. ASHOK KUMAR UHID : 50 Yrs 1 Mth / MALE Patient Type : MEDIWHEEL Ward / Bed : APH24008589 Current Ward / Bed : Receiving Date & Tin Reporting Date & Tin JM (Dye Binding-Bromocresol Green) 4.5 3.5 L L 1.29 SPHATASE IFCC AMP BUFFER 113.6 MINO TRANSFERASE (SGOT) (IFCC) 15.8 O TRANSFERASE(SGPT) (IFCC) 23.6 MYLTRANSPEPTIDASE (IFCC) 28.3 /DROGENASE (IFCC; L-P) 129.5 TAL (Bluret) 8.0	∴ MR. ASHOK KUMAR UHID ∴ 50 Yrs 1 Mth / MALE Patient Type ∴ MEDIWHEEL Ward / Bed ∴ APH24008589 Current Ward / Bed ∴ Receiving Date & Time Reporting Date & Time JM (Dye Binding-Bromocresol Green) 4.5 g/dL JM (Dye Binding-Bromocresol Green) 4.5 g/dL L 1.29 L 11.29 SPHATASE IFCC AMP BUFFER 113.6 IU/L MINO TRANSFERASE (SGOT) (IFCC) 15.8 IU/L O TRANSFERASE(SGPT) (IFCC) 23.6 IU/L MYLTRANSPEPTIDASE (IFCC) 28.3 IU/L MYLTRANSPEPTIDASE (IFCC) 129.5 IU/L TAL (Biuret) 8.0 g/dL	MR. ASHOK KUMAR	MR. ASHOK KUMAR	

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000396	Bill Date	:	09-03-2024 09:06		
Patient Name	F	MR. ASHOK KUMAR	UHID	F	APH000014331		
Age / Gender	F	50 Yrs 1 Mth / MALE	Patient Type	F	OPD I	f PHC	:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed		1		
Sample ID	1	APH24008589	Current Ward / Bed	:	1		
	1		Receiving Date & Time	:	09-03-2024 13:29		
			Reporting Date & Time	:	09-03-2024 15:39		

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

HBA1C (Turbidimetric Immuno-inhibition)	Н	8.8	%	4.0 - 6.2

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

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DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000396	Bill Date	1:	09-03-2024 09:06		
Patient Name	Г	MR. ASHOK KUMAR	UHID	1:	APH000014331		
Age / Gender	Г	50 Yrs 1 Mth / MALE	Patient Type	1:	OPD	If PHC :	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed	1:	1		
Sample ID		APH24008496	Current Ward / Bed	1:	1		
	F		Receiving Date & Time	1	09-03-2024 09:46		
	Т		Reporting Date & Time	1:	09-03-2024 17:39		

BLOOD BANK REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	1:	APHHC240000396	Bill Date	i	09-03-2024 09:06		
Patient Name	F	MR. ASHOK KUMAR	UHID	1:	APH000014331		
Age / Gender	F	50 Yrs 1 Mth / MALE	Patient Type	1:	OPD	If PHC :	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed	1:	1		
Sample ID	1	APH24008499	Current Ward / Bed	1:	1		
	:		Receiving Date & Time	1	09-03-2024 09:46		
	Т		Reporting Date & Time	1	09-03-2024 17:10		

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum MEDIWHEEL FULL BODY HEALTH CHECKUP MALE(ABOVE 40)@2550

BIWHEEL TOLE BODY HEALTH CHECKET _MALE(ABOVE +0)@2000							
PROSTATIC SPECIFIC ANTIGEN(TOTAL) (ELFA)		0.75	ng/mL	0 - 4			

Note:

TPSA as a Tumor marker is used as an additional test for prognosis and monitoring of therapy for patients with diagnosed malignant tumors. It may offer a diagnostic value for screening patients with suspected malignancies, as high values may be experienced in situations like benign prostatic hyperplasia, prostatitis, bladder catheterisation, urinary retention, endoscopic examination. Value in between 4-10ng/ml may be an indication of Benign Prostate Hyperplasia or prostate Carcinoma, values greater than 10ng/ml may indicate high risk of Carcinoma.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.

** End of Report **

IMPORTANT INSTRUCTIONS
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DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000396	Bill Date	:	: 09-03-2024 09:06		
Patient Name	1	MR. ASHOK KUMAR	UHID	:	APH000014331		
Age / Gender	F	50 Yrs 1 Mth / MALE	Patient Type	Γ	OPD	If PHC	:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	Γ	1		
Sample ID	1	APH24008499	Current Ward / Bed	:	1		
	1		Receiving Date & Time	:	09-03-2024 09:46		
			Reporting Date & Time	:	09-03-2024 17:10		

Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	3.20	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.49	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	1.16	mIU/L	0.27-4.20

** End of Report **

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Bill No.	:	APHHC240000396	Bill Date	·	09-03-2024 09:06		
Patient Name	:	MR. ASHOK KUMAR	UHID	F	APH000014331		
Age / Gender		50 Yrs 1 Mth / MALE	Patient Type		OPD	If PHC	:
Ref. Consultant		MEDIWHEEL	Ward / Bed		1		
Sample ID	:	APH24008495	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	09-03-2024 09:46		
	Г		Reporting Date & Time	1:	09-03-2024 16:56		

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		5.3	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		5.4	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		15.0	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		46.3	%	40 - 50
MEAN CORPUSCULAR VOLUME		85.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		27.7	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.4	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		218	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		43.4	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	14.2	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		55	%	40 - 80
LYMPHOCYTES		32	%	20 - 40
MONOCYTES		9	%	2 - 10
EOSINOPHILS		4	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	Н	24	mm 1st hr	0 - 10

** End of Report **

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