DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	:	MR. RISHU KUMAR RAJ	IPD No.	:	
Age	:	37 Yrs 1 Mth	UHID	:	APH000021092
Gender	:	MALE	Bill No.	:	APHHC240000351
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	04-03-2024 08:31:58
Ward	:		Room No.	:	
			Print Date	:	04-03-2024 11:09:59

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and shows mildly increase in parenchymal echogenicity S/O grade I 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 (10.6 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.9 cm), Left kidney (11 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 17.6 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 I fatty infiltration of liver.

Please correlate clinically…………………..

.......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 : XRAY

Patient Name	:	MR. RISHU KUMAR RAJ	IPD No.	:	
Age	:	37 Yrs 1 Mth	UHID	:	APH000021092
Gender	:	MALE	Bill No.	:	APHHC240000351
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	04-03-2024 08:31:58
Ward	:		Room No.	:	
			Print Date	:	04-03-2024 11:46:51

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.SALMAN

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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.

FINAL REPORT

Bill No.	:	APHHC240000351	Bill Date	:	04-03-2024 08:31		
Patient Name	:	**MR. RISHU KUMAR RAJ**	UHID	:	**APH000021092**		
Age / Gender	:	37 Yrs 1 Mth / MALE	Patient Type	:	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	:	/		
Sample ID	:	**APH24007787**	Current Ward / Bed	:	/		
	:		Receiving Date & Time	:	04-03-2024 14:42		
			Reporting Date & Time	:	04-03-2024 15:32		

BIOCHEMISTRY REPORTING

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

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

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
BLOOD UREA Urease-GLDH,Kinetic		22	mg/dL	15 - 45
BUN (CALCULATED)		10.3	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe s Kinetic)	**L**	**0.8**	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		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)

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)		133.0	mg/dL	70 - 140

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

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
CHOLESTROL-TOTAL (CHO-POD)		153	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	**L**	**39**	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	**H**	**102**	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		78	mg/dL	0 - 160
NON-HDL CHOLESTROL		114.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.9		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:
    1. Cigarette smoking.
    2. Hypertension.
    3. Family history of premature coronary heart disease.
    4. Pre-existing coronary heart disease.

LIVER FUNCTION TESTS (LFT)

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
BILIRUBIN-TOTAL (DPD)	**H**	**1.75**	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	**H**	**0.31**	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	**H**	**1.44**	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)		7.0	g/dL	6 - 8.1
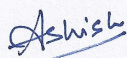
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Ref. Consultant	:	MEDIWHEEL	Ward / Bed		:	/		
Sample ID	:	**APH24007787**	Current Ward / Bed		:	/		
	:		Receiving Date & Time		:	04-03-2024 14:42		
			Reporting Date & Time		:	04-03-2024 15:32		

ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.6	g/dL		
S.GLOBULIN	L	**2.4**	g/dL		2.8-3.8
A/G RATIO		1.92			1.5 - 2.5
ALKALINE PHOSPHATASE IFCC AMP BUFFER		79.0	IU/L		53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		32.0	IU/L		10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	H	**44.5**	IU/L		10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		15.7	IU/L		11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)	H	**251.7**	IU/L		0 - 248
S.PROTEIN-TOTAL (Biuret)		7.0	g/dL		6 - 8.1
URIC ACID Uricase - Trinder		6.1	mg/dL		2.6 - 7.2

** 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.	:	APHHC240000351	**Bill Date**	:	04-03-2024 08:31
Patient Name	:	**MR. RISHU KUMAR RAJ**	**UHID**	:	APH000021092
Age / Gender	:	37 Yrs 1 Mth / MALE	**Patient Type**	:	OPD **If PHC** :
Ref. Consultant	:	MEDIWHEEL	**Ward / Bed**	:	/
Sample ID	:	APH24007787	**Current Ward / Bed**	:	/
	:		**Receiving Date & Time**	:	04-03-2024 14:42
			Reporting Date & Time	:	04-03-2024 15:32

Sample Type: EDTA Whole Blood, Plasma, Serum

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

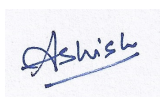| HBA1C (Turbidimetric Immuno-inhibition)	6.0	%	4.0 - 6.2

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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Patient Name	: **MR. RISHU KUMAR RAJ**	**UHID**	: **APH000021092**	
Age / Gender	: 37 Yrs 1 Mth / MALE	**Patient Type**	: OPD	**If PHC** :
Ref. Consultant	: MEDIWHEEL	**Ward / Bed**	: /	
Sample ID	: **APH24007706**	**Current Ward / Bed**	: /	
	:	**Receiving Date & Time**	: 04-03-2024 09:58	
		Reporting Date & Time	: 04-03-2024 20:31	

BLOOD BANK REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
Sample Type: EDTA Whole Blood				
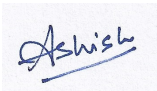
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"A"
RH TYPE	POSITIVE

** End of Report **

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FINAL REPORT

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Patient Name	:	**MR. RISHU KUMAR RAJ**	UHID	:	**APH000021092**		
Age / Gender	:	37 Yrs 1 Mth / MALE	Patient Type	:	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	:	/		
Sample ID	:	APH24007705	Current Ward / Bed	:	/		
	:		Receiving Date & Time	:	04-03-2024 09:58		
			Reporting Date & Time	:	04-03-2024 16:26		

HAEMATOLOGY REPORTING

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

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

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.8	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.6	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		13.8	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		41.5	%	40 - 50
MEAN CORPUSCULAR VOLUME		90.6	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		30.1	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.3	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)	**L**	**140**	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	**H**	**50.1**	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	**H**	**15.4**	%	11.6 - 14
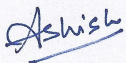
DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		70	%	40 - 80
LYMPHOCYTES		21	%	20 - 40
MONOCYTES		7	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	**H**	**34**	mm 1st hr	0 - 10

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Age / Gender	:	37 Yrs 1 Mth / MALE	**Patient Type**	:	OPD	**If PHC**	:
Ref. Consultant	:	MEDIWHEEL	**Ward / Bed**	:	/		
Sample ID	:	**APH24007738**	**Current Ward / Bed**	:	/		
	:		**Receiving Date & Time**	:	04-03-2024 12:18		
			Reporting Date & Time	:	04-03-2024 17:06		

CLINICAL PATH REPORTING

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

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

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY		30 mL		
COLOUR		Pale Straw		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)		1.020		1.005 - 1.030
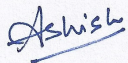
MICROSCOPIC EXAMINATION

LEUCOCYTES		2-4	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		2-3/HPF		
CASTS		Nil		
CRYSTALS		Nil		
URINE-SUGAR		NEGATIVE		

** End of Report **

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