DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: ULTRASOUND

Patient Name	:	MR. NIRAJ KUMAR	IPD No.	:	
Age	:	49 Yrs 8 Mth	UHID	:	APH000021290
Gender		MALE	Bill No.	:	APHHC240000407
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-03-2024 09:35:56
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 11:24:49

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 14 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 (11 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.8 cm), Left kidney (11.1 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 24 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 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. NIRAJ KUMAR	IPD No.	:	
Age	:	49 Yrs 8 Mth	UHID	:	APH000021290
Gender	:	MALE	Bill No.	:	APHHC240000407
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-03-2024 09:35:56
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 13:14:18

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.

Bill No.	1:	APHHC240000407	Bill Date	:	09-03-2024 09:35		
Patient Name	1	MR. NIRAJ KUMAR	UHID	:	APH000021290		
Age / Gender	1	49 Yrs 8 Mth / MALE	Patient Type	:	OPD	If PHC	:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	:	1		
Sample ID	:	APH24008565	Current Ward / Bed	:	1		
	:		Receiving Date & Time	-	09-03-2024 11:39		
	Τ		Reporting Date & Time	:	09-03-2024 17:42		

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)	"A"
RH TYPE	POSITIVE

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000407	Bill Date	:	09-03-2024 09:35		
Patient Name	:	MR. NIRAJ KUMAR	UHID		APH000021290		
Age / Gender		49 Yrs 8 Mth / MALE	Patient Type	[·	OPD If PHC :		
Ref. Consultant		MEDIWHEEL	Ward / Bed		1		
Sample ID	:	APH24008617	Current Ward / Bed	1	1		
	:		Receiving Date & Time	:	09-03-2024 14:00		
			Reporting Date & Time		09-03-2024 17:33		

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
SUGAR (GOD POD Method)	+++	Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.010	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		+++					

** End of Report **

IMPORTANT INSTRUCTIONS
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DR. ASHISH RANJAN SINGH

Bill No.	1	APHHC240000407	Bill Date		09-03-2024 09:35	
Patient Name	1	MR. NIRAJ KUMAR	UHID		APH000021290	
Age / Gender	1:	49 Yrs 8 Mth / MALE	Patient Type		OPD	If PHC :
Ref. Consultant	1:	MEDIWHEEL	Ward / Bed		1	
Sample ID	1	APH24008568	Current Ward / Bed	1	1	
	1:		Receiving Date & Time		09-03-2024 11:39	
	Τ		Reporting Date & Time		09-03-2024 22:39	

SEROLOGY REPORTING

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

MEDIVALE	EL FOLL BODT HEALTH CHECKUP _INI	ALE(A	BOVE 40)@2330		
PROST	ATIC SPECIFIC ANTIGEN(TOTAL) (ELFA)		0.54	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 **

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Patient Name	:	MR. NIRAJ KUMAR	UHID	F	APH000021290		
Age / Gender	F	49 Yrs 8 Mth / MALE	Patient Type		OPD	If PHC	:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed		1		
Sample ID	1	APH24008568	Current Ward / Bed		1		
	1		Receiving Date & Time		09-03-2024 11:39		
			Reporting Date & Time		09-03-2024 22:39		

Sample Type: Serum

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

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.91	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.02	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	1.95	mIU/L	0.27-4.20

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Bill No.	F	APHHC240000407	Bill Date	:	09-03-2024 09:35	
Patient Name	Г	MR. NIRAJ KUMAR	UHID		APH000021290	
Age / Gender	Г	49 Yrs 8 Mth / MALE	Patient Type	[·	OPD	If PHC :
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed		1	
Sample ID		APH24008637	Current Ward / Bed		1	
	F		Receiving Date & Time	:	09-03-2024 15:52	
	Г		Reporting Date & Time		09-03-2024 16:42	

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
0 1 7 507414/1 0 1 0				

Sample Type: EDTA Whole Blood, Plasma, Serum

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

BLOOD UREA Urease-GLDH,Kinetic		17	mg/dL	15 - 45
BUN (CALCULATED)		7.9	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	264.0	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	414.0	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	288	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	35	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	130	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)	Н	943	mg/dL	0 - 160
NON-HDL CHOLESTROL	Н	253.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		8.2		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		3.7		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	Н	189	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)	Н	1.10	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)		0.16	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	Н	0.94	mg/dL	0.2 - 0.8

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Ref. Consultan		:	MEDIWHEEL			Ward / Bed		:	1
Sample ID		:	APH24008637			Current Ward / Bed		:	1
		:				Receiving Date & Tim	ıe 📗	:	09-03-2024 15:52
	Re		Reporting Date & Tim	ıe	:	09-03-2024 16:42			
S.PROTEIN	-T0	TΑ	L (Biuret)		7.8	3	g/dL		6 - 8.1
ALBUMIN-S	ERI	JM	(Dye Binding-Bromocresol Green)		4.3	}	g/dL		
S.GLOBULI	N				3.5	j	g/dL		2.8-3.8
A/G RATIO				L	1.	23			1.5 - 2.5
ALKALINE I	PHC	SF	HATASE IFCC AMP BUFFER		12	6.0	IU/L		53 - 128
ASPARTATI	A1	MΙΙ	O TRANSFERASE (SGOT) (IFCC)	Н	66	5.8	IU/L		10 - 42
ALANINE A	MIN	Ю	TRANSFERASE(SGPT) (IFCC)	Н	82	2.1	IU/L		10 - 40
GAMMA-GL	UTA	١M	YLTRANSPEPTIDASE (IFCC)	Н	34	6.7	IU/L		11 - 50
LACTATE D	EH)	ΥD	ROGENASE (IFCC; L-P)		23	1.5	IU/L		0 - 248
S.PROTEIN	-TO	TΑ	L (Biuret)		7.8	}	g/dL		6 - 8.1
URIC ACID	Urica	se -	Trinder		5.0)	mg/d	L	2.6 - 7.2

** End of Report **

IMPORTANT INSTRUCTIONS
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DR. ASHISH RANJAN SINGH

Bill No.	T	APHHC240000407	Bill Date	1:	09-03-2024 09:35		
Patient Name	Г	MR. NIRAJ KUMAR	UHID	:	APH000021290		
Age / Gender	Г	49 Yrs 8 Mth / MALE	Patient Type	:	OPD If	f PHC	:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	1	APH24008637	Current Ward / Bed	1	1		
	F		Receiving Date & Time	:	09-03-2024 15:52		
	Т		Reporting Date & Time	:	09-03-2024 16:42		

Sample Type: EDTA Whole Blood, Plasma, Serum

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

HBA1C (Turbidimetric Immuno-inhibition)	Н	11.2	%	4.0 - 6.2

INTERPRETATION:

HbA1c %	Degree of Glucose Control					
>8% Action suggested due to high risk of developing long term complications like Revenue 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. NIRAJ KUMAR	UHID		APH000021290	
Age / Gender		49 Yrs 8 Mth / MALE	Patient Type	[·	OPD If PH	C :
Ref. Consultant		MEDIWHEEL	Ward / Bed	Г	1	
Sample ID	:	APH24008564	Current Ward / Bed	:	1	
	:		Receiving Date & Time		09-03-2024 11:39	
	П		Reporting Date & Time	Г	09-03-2024 17:06	

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)		7.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		5.2	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		14.9	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		46.6	%	40 - 50
MEAN CORPUSCULAR VOLUME		90.3	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.0	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.1	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)		45.8	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	14.1	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	18	mm 1st hr	0 - 10
BASOPHILS		0	%	0 - 1
EOSINOPHILS		3	%	1 - 5
MONOCYTES		5	%	2 - 10
LYMPHOCYTES		34	%	20 - 40
NEUTROPHILS		58	%	40 - 80

** End of Report **

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