DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	:	MRS. KAVITA KUMARI	IPD No.	:	
Age	:	32 Yrs 5 Mth	UHID	:	APH000021282
Gender	:	FEMALE	Bill No.	:	APHHC240000399
Ref. Doctor	:	MEDIWHEL	Bill Date	:	09-03-2024 09:16:10
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 11:40:18

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 13.4 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 (8.1 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.8 cm), Left kidney (9.8 cm). Corticomedullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 9.5 x 5.5 x 4.7 cm) and appears normal in size and echotexture. No focal lesion seen. Cervix and vagina are unremarkable.

Endometrial echo is central and normal in thickness (8.0 mm).

Both ovaries are normal in size however show multiple small peripherally arranged follicles with increase stromal echogenicity suggesting likely polycystic ovaries. No dominant follicle seen. Right ovary measures 3.6 x 1.9 cm, left ovary measures 3.7 x 2.0 cm. (Suggested Biochemical correlation)

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 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	:	MRS. KAVITA KUMARI	IPD No.	:	
Age	:	32 Yrs 5 Mth	UHID	:	APH000021282
Gender	:	FEMALE	Bill No.	:	APHHC240000399
Ref. Doctor	:	MEDIWHEL	Bill Date	:	09-03-2024 09:16:10
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 13:03:44

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 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.	: APHHC240000399	Bill Date	:	09-03-2024 09:16
Patient Name	: MRS. KAVITA KUMARI	UHID	:	APH000021282
Age / Gender	: 32 Yrs 5 Mth / FEMALE	Patient Type	:	OPD
Ref. Consultant	: MEDIWHEL	Ward	:	
Sample ID	: APH24008643	Current Bed	:	
	:	Reporting Date & Time	:	12-03-2024 10:25
	· ·	Receiving Date & Time	:	09/03/2024 17:25

CYTOPATHOLOGY REPORTING

Cytopathology No:c-39/24

Material Received: PAP smear. Two unstained slide received.

Reporting System: BETHESDA 2014

Material Adequacy: Satisfactory for evaluation. Endocervical/Transformation zone component present.

Microscopic Examination: Mostly Superficial cells, Intermediate cells & few Para-basal cells and basal cells.

Non-Neoplastic Findings: Moderate neutrophilic infiltrates.

Specific Infections: Shift in flora s/o bacterial vaginosis.

Epithelial cell abnormality (Squamous cells): Nil Squamous cell abnormality (Glandular cells): Nil.

Impression: Shift in flora s/o bacterial vaginosis; Negative for Intraepithelial lesion or Malignancy.(NILM).

*** End of Report ***

Ashish

Bill No.	: APHHC240000399	Bill Date	:	09-03-2024 09:16
Patient Name	: MRS. KAVITA KUMARI	UHID	:	APH000021282
Age / Gender	: 32 Yrs 5 Mth / FEMALE	Patient Type	:	OPD
Ref. Consultant	: MEDIWHEL	Ward	:	
Sample ID	: APH24008643	Current Bed	:	
	:	Reporting Date & Time	:	12-03-2024 10:25
	· ·	Receiving Date & Time	:	09/03/2024 17:25

CYTOPATHOLOGY REPORTING

Cytopathology No:c-39/24

Material Received: PAP smear. Two unstained slide received.

Reporting System: BETHESDA 2014

Material Adequacy: Satisfactory for evaluation. Endocervical/Transformation zone component present.

Microscopic Examination: Mostly Superficial cells, Intermediate cells & few Para-basal cells and basal cells.

Non-Neoplastic Findings: Moderate neutrophilic infiltrates.

Specific Infections: Shift in flora s/o bacterial vaginosis.

Epithelial cell abnormality (Squamous cells): Nil Squamous cell abnormality (Glandular cells): Nil.

Impression: Shift in flora s/o bacterial vaginosis; Negative for Intraepithelial lesion or Malignancy.(NILM).

*** End of Report ***

Ashish

Bill No.	:	APHHC240000399	Bill Date	:	09-03-2024 09:16		
Patient Name	:	MRS. KAVITA KUMARI	UHID		APH000021282		
Age / Gender	:	32 Yrs 5 Mth / FEMALE	Patient Type		OPD If PHC :		
Ref. Consultant	:	MEDIWHEL	Ward / Bed		: /		
Sample ID	:	APH24008510	Current Ward / Bed		: /		
	:		Receiving Date & Time		: 09-03-2024 10:25		
			Reporting Date & Time		: 09-03-2024 16:57		

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.8	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.4	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)		12.2	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		38.8	%	36 - 46
MEAN CORPUSCULAR VOLUME		87.7	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		27.5	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	L	31.3	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)		43.6	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		13.9	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	40	mm 1st hr	0 - 20
BASOPHILS		0	%	0 - 1
EOSINOPHILS		2	%	1 - 5
MONOCYTES		4	%	2 - 10
LYMPHOCYTES		27	%	20 - 40
NEUTROPHILS		67	%	40 - 80

** End of Report **

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

Ashish

Bill No.	:	APHHC240000399	Bill Date	:	09-03-2024 09:16		
Patient Name	:	MRS. KAVITA KUMARI	UHID	:	APH000021282		
Age / Gender	:	32 Yrs 5 Mth / FEMALE	Patient Type	:	OPD If PHC :		
Ref. Consultant	:	MEDIWHEL	Ward / Bed	:	1		
Sample ID	:	APH24008631	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	09-03-2024 15:47		
			Reporting Date & Time	:	09-03-2024 16:41		

BIOCHEMISTRY REPORTING

est (Methodology)		Result	UOM	Biological Reference Interval				
ample Type: EDTA Whole Blood, Plasma, Serum	•		•					
MEDIWHEEL FULL BODY HEALTH CHECKUP_FE	MALE	BELOW40@2550						
BLOOD UREA Urease-GLDH,Kinetic		20	mg/dL	15 - 45				
BUN (CALCULATED)		9.3	mg/dL	7 - 21				
CREATININE-SERUM (Modified Jaffe s Kinetic)		0.6	mg/dL	0.6 - 1.1				
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		88.0	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)		81.0	mg/dL	70 - 140				

 GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)
 81.0
 mg/dL

 Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL. (As per American Diabetes Association recommendation)
 mg/dL
 ____81.0

LIPID PROFILE

CHOLESTROL-TOTAL (CHO-POD)	Н	198	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	39	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	141	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		117	mg/dL	0 - 160
NON-HDL CHOLESTROL	Н	159.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.1		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		3.6		1⁄2Average Risk <1.5 Average Risk 1.5-3.2 2 Times Average Risk 3.3-5.0 3 Times Average Risk 5.1-6.1
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)	Н	1.94	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	Н	0.32	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	Н	1.62	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)		7.3	g/dL	6 - 8.1

ill No.	:	APHHC240000399			Bill Date	:	:	09-03-2024 09:16	3	
atient Name	:	MRS. KAVITA KUMARI			UHID	:	:	APH000021282		
ge / Gender	:	32 Yrs 5 Mth / FEMALE			Patient Type	:	:	OPD	If PHC :	
ef. Consultant	:	MEDIWHEL			Ward / Bed	:	:	1		
ample ID : A :		APH24008631	PH24008631		Current Ward / Bed		:	1		
		:			Receiving Date & Tin	ne :	:	09-03-2024 15:47		
					Reporting Date & Tin	ne :	:	09-03-2024 16:41		
ALBUMIN-SER	ŪΜ	1 (Dye Binding-Bromocresol Green)		4.2		g/dL				
S.GLOBULIN				3.1		g/dL		2.8-3.8	8	
A/G RATIO			L	1.	35			1.5 - 3	2.5	
ALKALINE PHO	DSF	PHATASE IFCC AMP BUFFER		45	.8	IU/L		42 - 98	3	
ASPARTATE A	ΜI	NO TRANSFERASE (SGOT) (IFCC)		24	.8	IU/L		10 - 43	2	
ALANINE AMI	10	TRANSFERASE(SGPT) (IFCC)		17	.7	IU/L		10 - 40	C	
GAMMA-GLUT	AM	IYLTRANSPEPTIDASE (IFCC)		12.2		IU/L		7 - 35	7 - 35	
LACTATE DEH	ΥD	ROGENASE (IFCC; L-P)		15	2.8	IU/L		0 - 24	8	
S.PROTEIN-TO		(Biurat)		7:	3	g/dL		6 - 8	1	
			1			13			·	
URIC ACID Uric		Trinder		5.0)	mg/dL		2.6 -	7 0	

** End of Report **

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

Ashish

Bill No.	:	APHHC240000399	Bill Date	:	09-03-2024 09:16	i
Patient Name	:	MRS. KAVITA KUMARI	UHID	:	APH000021282	
Age / Gender	:	32 Yrs 5 Mth / FEMALE	Patient Type	:	OPD	If PHC :
Ref. Consultant	:	MEDIWHEL	Ward / Bed	:	1	
Sample ID	:	APH24008631	Current Ward / Bed	:	1	
	:		Receiving Date & Time		09-03-2024 15:47	,
			Reporting Date & Time	. :	09-03-2024 16:41	

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

	HBA1C (Turbidimetric Immuno-inhibition)	5.3	%	4.0 - 6.2
INTE	RPRETATION:			

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

Ashish

Bill No.	:	APHHC240000399	Bill Da	ite	:	09-03-2024 09:16		
Patient Name	:	MRS. KAVITA KUMARI	UHID		:	APH000021282		
Age / Gender	:	32 Yrs 5 Mth / FEMALE	Patien	t Type	:	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEL	Ward	Bed	:	1		
Sample ID	:	APH24008515	Curre	nt Ward / Bed	:	1		
	:		Receiv	/ing Date & Time	:	09-03-2024 10:25		
			Repor	ting Date & Time	:	09-03-2024 17:17		

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
--------------------	------	--------	-----	----------------------------------

Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.40	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.08	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	4.02	mIU/L	0.27-4.20

** End of Report **

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

Ashish

Bill No.	:	APHHC240000399	Bill Date	:	09-03-2024 09:16	
Patient Name	:	MRS. KAVITA KUMARI	UHID	:	APH000021282	
Age / Gender	:	32 Yrs 5 Mth / FEMALE	Patient Type	:	OPD	If PHC :
Ref. Consultant	:	MEDIWHEL	Ward / Bed	:	1	
Sample ID	:	APH24008511	Current Ward / Bed	:	1	
	:		Receiving Date & Time	:	09-03-2024 10:25	
			Reporting Date & Time	:	09-03-2024 17:40	

BLOOD BANK REPORTING

st (Methodology)	Flag	Result	UOM	Biological Reference Interval
nple Type: EDTA Whole Blood	-		I	I
DIWHEEL FULL BODY HEALTH CI	HECKUP_FEMALE	BELOW40@2550		
BLOOD GROUP (ABO)		BELOW40@2550		

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

Ashish

Bill No.	:	APHHC240000399	Bill Date	:	09-03-2024 09:16	
Patient Name	:	MRS. KAVITA KUMARI	UHID	:	APH000021282	
Age / Gender	:	32 Yrs 5 Mth / FEMALE	Patient Type		OPD	If PHC :
Ref. Consultant	:	MEDIWHEL	Ward / Bed	1	1	
Sample ID	:	APH24008606	Current Ward / Bed	:	1	
	:		Receiving Date & Time	1	09-03-2024 13:38	
			Reporting Date & Time	:	09-03-2024 17:25	

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
--------------------	------	--------	-----	----------------------------------

Sample Type: Urine

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY	25 mL	
COLOUR	Pale Straw	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)	1.010	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		NEGATIVE				

** End of Report **

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

Ashish