

FINAL REPORT

Bill No.	: APHHC240000756	Bill Date	: 13-04-2024 11:24
Patient Name	: MRS. SHRISHTI KUMARI	UHID	: APH000022480
Age / Gender	: 32 Yrs 1 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH24014611	Current Ward / Bed	: /
		Receiving Date & Time	: 13-04-2024 13:51
		Reporting Date & Time	: 13-04-2024 19:21

BIOCHEMISTRY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD UREA <small>Urease-GLDH,Kinetic</small>	L	14	mg/dL	15 - 45
BUN (CALCULATED)	L	6.5	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	L	0.3	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		70.0	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)

LIPID PROFILE

CHOLESTROL-TOTAL <small>(CHO-POD)</small>	H	228	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>		55	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	145	mg/dL	0 - 100
S. TRIGLYCERIDES <small>(GPO - POD)</small>	H	214	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	173.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.1		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 <1.5 Average Risk 1.5-3.2 2 Times Average Risk 3.3-5.0 3 Times Average Risk 5.1-6.1
CHOLESTROL-VLDL	H	43	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 <small>(DPD)</small>		0.70	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>		0.11	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.59	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>	L	5.9	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		3.3	g/dL	
S.GLOBULIN	L	2.6	g/dL	2.8-3.8

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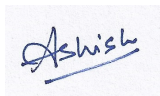
A/G RATIO	L	1.27		1.5 - 2.5
ALKALINE PHOSPHATASE <small>IFCC AMP BUFFER</small>		91.2	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) <small>(IFCC)</small>		37.9	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) <small>(IFCC)</small>	H	44.6	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE <small>(IFCC)</small>		13.3	IU/L	7 - 35
LACTATE DEHYDROGENASE <small>(IFCC; L-P)</small>		205.3	IU/L	0 - 248
S.PROTEIN-TOTAL <small>(Biuret)</small>	L	5.9	g/dL	6 - 8.1
URIC ACID <small>Uricase - Trinder</small>		4.6	mg/dL	2.6 - 7.2

** End of Report **

IMPORTANT INSTRUCTIONS

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

Laboratory test results are to be clinically correlated.
Storage and discard of Specimen shall be as per AIMS specimen retention policy.
Test results are not valid for Medico - Legal purposes.



DR. ASHISH RANJAN SINGH

MBBS,MD

CONSULTANT

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MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	5.5	%	4.0 - 6.2
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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

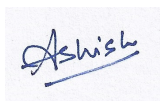
- Note:
- 1.A three monthly monitoring is recommended in diabetics.
 2. Since HbA1c concentration represents the integrated values for blood glucose over the preceding 6 - 10 weeks and is not affected by daily glucose fluctuation, exercise and recent food intake, it is a more useful tool for monitoring diabetics.

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Age / Gender	: 32 Yrs 1 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH24014591	Current Ward / Bed	: /
		Receiving Date & Time	: 13-04-2024 13:44
		Reporting Date & Time	: 13-04-2024 16:18

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@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

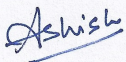
LEUCOCYTES		2-3	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		0-1		
CASTS		Nil		
CRYSTALS		Nil		
URINE-SUGAR		NEGATIVE		

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Age / Gender	: 32 Yrs 1 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH24014609	Current Ward / Bed	: /
		Receiving Date & Time	: 13-04-2024 13:51
		Reporting Date & Time	: 13-04-2024 22:58

BLOOD BANK REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

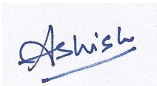
BLOOD GROUP (ABO)	"AB"
RH TYPE	POSITIVE

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Age / Gender	: 32 Yrs 1 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH24014608	Current Ward / Bed	: /
		Receiving Date & Time	: 13-04-2024 13:51
		Reporting Date & Time	: 13-04-2024 17:04

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		9.4	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	L	3.4	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	10.0	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	31.6	%	36 - 46
MEAN CORPUSCULAR VOLUME		92.9	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.4	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		31.6	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		180	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	62.6	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	19.2	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS	H	81	%	40 - 80
LYMPHOCYTES	L	14	%	20 - 40
MONOCYTES		3	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	110	mm 1st hr	0 - 20

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Age / Gender	: 32 Yrs 1 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH24014612	Current Ward / Bed	: /
		Receiving Date & Time	: 13-04-2024 13:51
		Reporting Date & Time	: 14-04-2024 03:01

SEROLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

THYROID PROFILE (FT3+FT4+TSH)

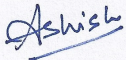
FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.50	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.08	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		1.10	mIU/L	0.27-4.20

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MBBS,MD
CONSULTANT

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MRS. SHRISHTI KUMARI	IPD No.	:	
Age	: 32 Yrs 1 Mth	UHID	:	APH000022480
Gender	: FEMALE	Bill No.	:	APHHC240000756
Ref. Doctor	: MEDIWHEEL	Bill Date	:	13-04-2024 11:24:59
Ward	:	Room No.	:	
		Print Date	:	13-04-2024 12:51:15

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 14.9 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 (9.3 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (11.4 cm), Left kidney (10.7 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is gravid and show single live intrauterine fetus of ~ 24w3d gestation.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION: No significant abnormality detected in abdomen.

Declaration of the doctor doing ultrasound examination:

I Dr. Muhammad Seraj the undersigned declare that while conducting the ultrasound on Mrs. Shrishti Kumari , I have neither detected nor disclosed the sex of the fetus to anyone in any manner.

Please correlate clinically.....

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

Prepare By.
MD.SERAJ

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.