DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	:	MR. SAURABH KUMAR	IPD No.	:	
Age	:	32 Yrs 1 Mth	UHID	:	APH000021751
Gender	:	MALE	Bill No.	:	APHHC240000528
Ref. Doctor	:	MEDHWHEEL	Bill Date	:	22-03-2024 08:50:54
Ward	:		Room No.	:	
			Print Date	:	23-03-2024 15:10:10

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.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.

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	:	MR. SAURABH KUMAR	IPD No.	:	
Age	:	32 Yrs 1 Mth	UHID	:	APH000021751
Gender	:	MALE	Bill No.	:	APHHC240000528
Ref. Doctor	:	MEDHWHEEL	Bill Date	:	22-03-2024 08:50:54
Ward	:		Room No.	:	
			Print Date	:	22-03-2024 11:14:38

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and show grade II fatty infiltration (Liver measures 14.4 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 (7.2 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.7 cm), Left kidney (9.5 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 19.5cc), outline and 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.SERAJ

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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.	:	APHHC240000528	Bill Date	:	22-03-2024 08:50		
Patient Name	:	MR. SAURABH KUMAR	UHID	:	APH000021751		
Age / Gender	:	32 Yrs 1 Mth / MALE	Patient Type	:	OPD	If PHC	:
Ref. Consultant	:	MEDHWHEEL	Ward / Bed	:	/		
Sample ID	:	APH24010672	Current Ward / Bed	:	/		
	:		Receiving Date & Time	:	22-03-2024 10:26		
			Reporting Date & Time	:	22-03-2024 15:48		

BIOCHEMISTRY REPORTING

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

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

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
BLOOD UREA Urease-GLDH,Kinetic	L	12	mg/dL	15 - 45
BUN (CALCULATED)	L	5.6	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe s Kinetic)	L	0.8	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		76.0	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

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
CHOLESTROL-TOTAL (CHO-POD)		142	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	36	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection		94	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		119	mg/dL	0 - 160
NON-HDL CHOLESTROL		106.0	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		24	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	1.13	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	H	0.21	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	0.92	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)		7.0	g/dL	6 - 8.1
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.0	g/dL	
S.GLOBULIN		3.0	g/dL	2.8-3.8
A/G RATIO	L	1.33		1.5 - 2.5

FINAL REPORT
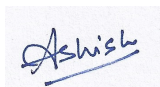
Bill No.	:	APHHC240000528	Bill Date	:	22-03-2024 08:50		
Patient Name	:	**MR. SAURABH KUMAR**	**UHID**	:	**APH000021751**		
Age / Gender	:	32 Yrs 1 Mth / MALE	**Patient Type**	:	OPD	**If PHC**	:
Ref. Consultant	:	MEDHWHEEL	**Ward / Bed**	:	/		
Sample ID	:	**APH24010672**	**Current Ward / Bed**	:	/		
	:		**Receiving Date & Time**	:	22-03-2024 10:26		
			Reporting Date & Time	:	22-03-2024 15:48		

ALKALINE PHOSPHATASE IFCC AMP BUFFER		75.0	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		39.7	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	**H**	**65.0**	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		30.3	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)		198.7	IU/L	0 - 248
S.PROTEIN-TOTAL (Biuret)		7.0	g/dL	6 - 8.1
URIC ACID Uricase - Trinder		4.8	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.	:	APHHC240000528	Bill Date	:	22-03-2024 08:50		
Patient Name	:	**MR. SAURABH KUMAR**	**UHID**	:	**APH000021751**		
Age / Gender	:	32 Yrs 1 Mth / MALE	**Patient Type**	:	OPD	**If PHC**	:
Ref. Consultant	:	MEDHWHEEL	**Ward / Bed**	:	/		
Sample ID	:	**APH24010672**	**Current Ward / Bed**	:	/		
	:		**Receiving Date & Time**	:	22-03-2024 10:26		
			Reporting Date & Time	:	22-03-2024 15:48		

Sample Type: EDTA Whole Blood, Serum

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

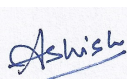| HBA1C (Turbidimetric Immuno-inhibition)	5.7	%	4.0 - 6.2

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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FINAL REPORT

Bill No.	:	APHHC240000528	Bill Date	:	22-03-2024 08:50		
Patient Name	:	**MR. SAURABH KUMAR**	UHID	:	**APH000021751**		
Age / Gender	:	32 Yrs 1 Mth / MALE	Patient Type	:	OPD	If PHC	:
Ref. Consultant	:	MEDHWHEEL	Ward / Bed	:	/		
Sample ID	:	APH24010746	Current Ward / Bed	:	/		
	:		Receiving Date & Time	:	22-03-2024 12:17		
			Reporting Date & Time	:	22-03-2024 23:46		

CLINICAL PATH REPORTING

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

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

STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

COLOUR		BROWN		
CONSISTENCY		SEMI SOLID		
BLOOD		NOT DETECTED		
MUCOUS		ABSENT		

MICROSCOPIC EXAMINATION

PUS CELLS		0-1		
RBC's		NIL		
TROPHOZOITES		NOT DETECTED		
CYSTS		NOT DETECTED		
OVA		NOT DETECTED		

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY		20 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)		1.020		1.005 - 1.030

MICROSCOPIC EXAMINATION

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

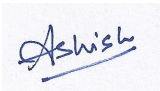| URINE-SUGAR		NEGATIVE		

** End of Report **

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Bill No.	:	APHHC240000528	Bill Date	:	22-03-2024 08:50		
Patient Name	:	**MR. SAURABH KUMAR**	UHID	:	**APH000021751**		
Age / Gender	:	32 Yrs 1 Mth / MALE	Patient Type	:	OPD	If PHC	:
Ref. Consultant	:	MEDHWHEEL	Ward / Bed	:	/		
Sample ID	:	**APH24010746**	Current Ward / Bed	:	/		
	:		Receiving Date & Time	:	22-03-2024 12:17		
			Reporting Date & Time	:	22-03-2024 23:46		

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MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	:	APHHC240000528	Bill Date	:	22-03-2024 08:50		
Patient Name	:	**MR. SAURABH KUMAR**	**UHID**	:	**APH000021751**		
Age / Gender	:	32 Yrs 1 Mth / MALE	**Patient Type**	:	OPD	**If PHC**	:
Ref. Consultant	:	MEDHWHEEL	**Ward / Bed**	:	/		
Sample ID	:	**APH24010673**	**Current Ward / Bed**	:	/		
	:		**Receiving Date & Time**	:	22-03-2024 10:26		
			Reporting Date & Time	:	22-03-2024 23:43		

SEROLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400
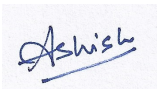
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.31	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.29	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		3.12	mIU/L	0.27-4.20

** End of Report **

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FINAL REPORT

Bill No.	:	APHHC240000528	Bill Date	:	22-03-2024 08:50		
Patient Name	:	**MR. SAURABH KUMAR**	**UHID**	:	**APH000021751**		
Age / Gender	:	32 Yrs 1 Mth / MALE	**Patient Type**	:	OPD	**If PHC**	:
Ref. Consultant	:	MEDHWHEEL	**Ward / Bed**	:	/		
Sample ID	:	**APH24010669**	**Current Ward / Bed**	:	/		
	:		**Receiving Date & Time**	:	22-03-2024 10:26		
			Reporting Date & Time	:	22-03-2024 15:56		

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)

Test	Flag	Result	UOM	Reference
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.7	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		5.1	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		15.5	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		48.8	%	40 - 50
MEAN CORPUSCULAR VOLUME		96.1	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		30.5	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		31.7	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		311	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	**H**	**47.8**	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		13.9	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT
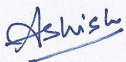
Test	Flag	Result	UOM	Reference
NEUTROPHILS		61	%	40 - 80
LYMPHOCYTES		27	%	20 - 40
MONOCYTES		5	%	2 - 10
EOSINOPHILS	**H**	**7**	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	**H**	**32**	mm 1st hr	0 - 10

** End of Report **

IMPORTANT INSTRUCTIONS

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FINAL REPORT

Bill No.	: APHHC240000528	**Bill Date**	: 22-03-2024 08:50	
Patient Name	: **MR. SAURABH KUMAR**	**UHID**	: **APH000021751**	
Age / Gender	: 32 Yrs 1 Mth / MALE	**Patient Type**	: OPD	**If PHC** :
Ref. Consultant	: MEDHWHEEL	**Ward / Bed**	: /	
Sample ID	: **APH24010670**	**Current Ward / Bed**	: /	
	:	**Receiving Date & Time**	: 22-03-2024 10:26	
		Reporting Date & Time	: 23-03-2024 03:00	

BLOOD BANK REPORTING

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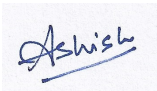
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"B"	
RH TYPE	POSITIVE	

** End of Report **

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MBBS,MD
CONSULTANT