Report: XRAY

Patient Name	:	MRS. PUSHPA JAISWAL	IPD No.	:	
Age	:	37 Yrs	UHID	T:	APH000020765
Gender	:	FEMALE	Bill No.	:	APHHC240000278
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	24-02-2024 10:05:14
Ward	:		Room No.	:	
			Print Date	:	24-02-2024 16:02:20

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 R	eport	

Prepare By. MD.SALMAN CONSULTANT RADIOLOGIST,

Report: ULTRASOUND

Patient Name	:	MRS. PUSHPA JAISWAL	IPD No.	:	
Age	:	37 Yrs	UHID	T:	APH000020765
Gender	:	FEMALE	Bill No.	:	APHHC240000278
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	24-02-2024 10:05:14
Ward	:		Room No.	:	
			Print Date	:	24-02-2024 12:17:05

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 10.6 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 (9.2 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.5 cm), Left kidney (10.1 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 7.0 x 3.0 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 (4.9 mm).

Both ovaries are normal in size and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

Diagon correlate dinically

IMPRESSION:- No significant abnormality detected.

riease correlate cirrically	
	End of Report
Prepare By. MD.SALMAN	CONSULTANT RADIOLOGIST,

Bill No.	:	APHHC240000280	Bill Date	Ti	24-02-2024 10:12		
Patient Name	F	MRS. PUSHPA JAISWAL	UHID	1	APH000020765		
Age / Gender	F	37 Yrs / FEMALE	Patient Type	1	OPD I	If PHC :	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	1	APH24006368	Current Ward / Bed	1	1		
	1		Receiving Date & Time		24-02-2024 13:06		
			Reporting Date & Time	1	27-02-2024 17:51		

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)	2.41	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.23	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	2.34	mIU/L	0.27-4.20

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	T	APHHC240000280	Bill Date	:	24-02-2024 10:12		
Patient Name	F	MRS. PUSHPA JAISWAL	UHID	:	APH000020765		
Age / Gender	F	37 Yrs / FEMALE	Patient Type	:	OPD	If PHC	1:
Ref. Consultant		MEDIWHEEL	Ward / Bed	1	1		
Sample ID	1	APH24006364	Current Ward / Bed	:	1		
	1		Receiving Date & Time	:	24-02-2024 13:06		
			Reporting Date & Time	1:	24-02-2024 18:20		

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)		6.3	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.3	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)		12.2	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		37.2	%	36 - 46
MEAN CORPUSCULAR VOLUME		86.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.3	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.7	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)	L	110	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		45.6	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	14.7	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	56	mm 1st hr	0 - 20
DASOFFILES			70	
BASOPHILS		0	%	0 - 1
EOSINOPHILS		1	%	1 - 5
MONOCYTES		6	%	2 - 10
LYMPHOCYTES		36	%	20 - 40
NEUTROPHILS		57	%	40 - 80

** End of Report **

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

DR. ASHISH RANJAN SINGH

MBBS,MD CONSULTANT

Page 1 of 1

Bill No.	:	APHHC240000280	Bill Date	:	24-02-2024 10:12		
Patient Name	:	MRS. PUSHPA JAISWAL	UHID	Γ	APH000020765		
Age / Gender	:	37 Yrs / FEMALE	Patient Type	Γ	OPD If PHC :		
Ref. Consultant		MEDIWHEEL	Ward / Bed	:	1		
Sample ID	:	APH24006476	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	24-02-2024 15:51		
	П		Reporting Date & Time		24-02-2024 23:15		

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		3-4	/HPF	0 - 5			
RBC's	0-1	0-1					
EPITHELIAL CELLS		4-5					
CASTS	Nil						
CRYSTALS	Nil						
URINE-SUGAR	NEGATIVE						

**	End	of	Report	**

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000280	Bill Date	1	24-02-2024 10:12		
Patient Name	:	MRS. PUSHPA JAISWAL	UHID	1	APH000020765		
Age / Gender		37 Yrs / FEMALE	Patient Type	1:	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	1:	1		
Sample ID	:	APH24006365	Current Ward / Bed	1	1		
	:		Receiving Date & Time	1	24-02-2024 13:06		
	Г		Reporting Date & Time	1:	25-02-2024 01:38		

BLOOD BANK REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD GROUP (ABO)	"O"
RH TYPE	POSITIVE

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	F	APHHC240000280	Bill Date	1	24-02-2024 10:12		
Patient Name	Г	MRS. PUSHPA JAISWAL	UHID	1	APH000020765		
Age / Gender	Г	37 Yrs / FEMALE	Patient Type	1	OPD	If PHC :	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed	1	1		
Sample ID		APH24006453	Current Ward / Bed	:	1		
			Receiving Date & Time	:	24-02-2024 15:01		
	Т		Reporting Date & Time	:	24-02-2024 17:06		

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
,				Interval

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD UREA Urease-GLDH,Kinetic	L	14	mg/dL	15 - 45
BUN (CALCULATED)	L	6.5	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.5	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		77.0	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) 93.0 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

CHOLESTROL-TOTAL (CHO-POD)		116	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immuno inhibition	L	42	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection		67	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		51	mg/dL	0 - 160
NON-HDL CHOLESTROL		74.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		2.8		1/2 Average 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		1.6		1/2 Average 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		10	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)		0.94	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	Н	0.22	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.72	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)		6.2	g/dL	6 - 8.1

Bill No.	No. : APHHC240000280 Bill Date		:	24-02-2024 10:12						
Patient Name	t Name : MRS. PUSHPA JAISWAL UHID			:	APH000020765					
Age / Gender	:	37 Yrs / FEMALE			Patient Type		:	OPD	If PHC :	
Ref. Consultant	:	MEDIWHEEL			Ward / Bed		:	1		
Sample ID	:	APH24006453			Current Ward / Bed		:	1		
	:				Receiving Date & Tim	ne l	:	24-02-2024 15:01		
	П				Reporting Date & Tim	1e	:	24-02-2024 17:06		
ALBUMIN-SERI	ŪΜ	(Dye Binding-Bromocresol Green)		3.9		g/dL				
S.GLOBULIN			L	2.	3	g/dL		2.8-3.8		
A/G RATIO				1.7	'0			1.5 - 2.5	5	
ALKALINE PHO	SF	PHATASE IFCC AMP BUFFER		88	.8	IU/L		42 - 98		
ASPARTATE AN	MΙΙ	NO TRANSFERASE (SGOT) (IFCC)		26	.4	IU/L		10 - 42		
ALANINE AMIN	10	TRANSFERASE(SGPT) (IFCC)		23	.4	IU/L		10 - 40	10 - 40	
GAMMA-GLUTA	٩M	YLTRANSPEPTIDASE (IFCC)		7.9		IU/L		7 - 35	7 - 35	
LACTATE DEHY	ΥD	ROGENASE (IFCC; L-P)		18	6.2	IU/L		0 - 248		
S.PROTEIN-TO	TA	L (Biuret)		6.2	2	g/dL		6 - 8.1		
			-			! !				
URIC ACID Urica	se -	Trinder		3.4	,	mg/d	L	2.6 - 7.3	2	

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	T	APHHC240000280	Bill Date	1:	24-02-2024 10:12			
Patient Name	Г	MRS. PUSHPA JAISWAL	UHID	1	APH000020765			
Age / Gender	Г	37 Yrs / FEMALE	Patient Type	1	OPD	If PHC	1:	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1			
Sample ID	1	APH24006453	Current Ward / Bed	1	1			
	F		Receiving Date & Time	1:	24-02-2024 15:01			
	Т		Reporting Date & Time	1	24-02-2024 17:06			

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

INTERPRETATION:

HbA1c %	Degree of Glucose Control								
>8% Action suggested due to high risk of developing long term complications like Retinopathy, 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

DR. ASHISH RANJAN SINGH

Report: XRAY

Patient Name	:	MRS. PUSHPA JAISWAL	IPD No.	:	
Age	:	37 Yrs	UHID	T:	APH000020765
Gender	:	FEMALE	Bill No.	:	APHHC240000278
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	24-02-2024 10:05:14
Ward	:		Room No.	:	
			Print Date	:	24-02-2024 16:02:20

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 R	eport	

Prepare By. MD.SALMAN CONSULTANT RADIOLOGIST,

Report: ULTRASOUND

Patient Name	:	MRS. PUSHPA JAISWAL	IPD No.	:	
Age	:	37 Yrs	UHID	T:	APH000020765
Gender	:	FEMALE	Bill No.	:	APHHC240000278
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	24-02-2024 10:05:14
Ward	:		Room No.	:	
			Print Date	:	24-02-2024 12:17:05

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 10.6 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 (9.2 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.5 cm), Left kidney (10.1 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 7.0 x 3.0 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 (4.9 mm).

Both ovaries are normal in size and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

Diagon correlate dinically

IMPRESSION:- No significant abnormality detected.

riease correlate cililically							
	End of Report						
Prepare By. MD.SALMAN	CONSULTANT RADIOLOGIST,						

Bill No.	:	APHHC240000280	Bill Date	1:	24-02-2024 10:12			
Patient Name	F	MRS. PUSHPA JAISWAL	UHID	1	APH000020765			
Age / Gender	F	37 Yrs / FEMALE	Patient Type	1	OPD I	If PHC :		
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1			
Sample ID	1	APH24006368	Current Ward / Bed	1	1			
	1		Receiving Date & Time		24-02-2024 13:06			
			Reporting Date & Time	1	27-02-2024 17:51			

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)	2.41	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.23	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	2.34	mIU/L	0.27-4.20

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	Г	APHHC240000280	В	Bill Date	T	24-02-2024 10:12		
Patient Name	Г	MRS. PUSHPA JAISWAL	U	JHID	1	APH000020765		
Age / Gender	Г	37 Yrs / FEMALE	P	Patient Type	1	OPD	If PHC	
Ref. Consultant	1	MEDIWHEEL	V	Vard / Bed	1	1		
Sample ID	F	APH24006364	С	Current Ward / Bed	1	1		
	F		R	Receiving Date & Time	1	24-02-2024 13:06		
	Т		R	Reporting Date & Time	F	24-02-2024 18:20		

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)		6.3	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.3	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)		12.2	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		37.2	%	36 - 46
MEAN CORPUSCULAR VOLUME		86.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.3	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.7	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)	L	110	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		45.6	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	14.7	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	56	mm 1st hr	0 - 20
BASOPHILS	SOPHILS 0 %		%	0 - 1
EOSINOPHILS		1	%	1 - 5
MONOCYTES	6 %		%	2 - 10
LYMPHOCYTES		36	%	20 - 40
NEUTROPHILS		57	%	40 - 80

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000280	Bill Date	:	24-02-2024 10:12		
Patient Name	:	MRS. PUSHPA JAISWAL	UHID	Γ	APH000020765		
Age / Gender	:	37 Yrs / FEMALE	Patient Type	Γ	OPD If PHC :		
Ref. Consultant		MEDIWHEEL	Ward / Bed	:	1		
Sample ID	:	APH24006476	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	24-02-2024 15:51		
	П		Reporting Date & Time		24-02-2024 23:15		

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		3-4	/HPF	0 - 5				
RBC's		0-1						
EPITHELIAL CELLS	4-5							
CASTS	Nil							
CRYSTALS		Nil						
URINE-SUGAR		NEGATIVE						

**	End	of	Report	**

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

DR. ASHISH RANJAN SINGH

Bill No.	Г	APHHC240000280	Bill Date	·	24-02-2024 10:12		
Patient Name	Г	MRS. PUSHPA JAISWAL	UHID		APH000020765		
Age / Gender	Г	37 Yrs / FEMALE	Patient Type	[·	OPD	If PHC :	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed		1		
Sample ID		APH24006365	Current Ward / Bed		1		
			Receiving Date & Time		24-02-2024 13:06		
	Г		Reporting Date & Time	Г	25-02-2024 01:38		

BLOOD BANK REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD GROUP (ABO)	"O"
RH TYPE	POSITIVE

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000280	Bill Date		:	24-02-2024 10:12		
Patient Name	F	MRS. PUSHPA JAISWAL	UHID		:	APH000020765		
Age / Gender	F	37 Yrs / FEMALE	Patient Type		:	OPD	If PHC	1:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed		:	1		
Sample ID	1	APH24006453	Current Ward / Bed		:	1		
	1		Receiving Date & Tim	е	:	24-02-2024 15:01		
	Т		Reporting Date & Tim	е	:	24-02-2024 17:06		

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
				Interval

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD UREA Urease-GLDH,Kinetic	L	14	mg/dL	15 - 45
BUN (CALCULATED)	L	6.5	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.5	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		77.0	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) 93.0 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

CHOLESTROL-TOTAL (CHO-POD)		116	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immuno inhibition	L	42	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection		67	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		51	mg/dL	0 - 160
NON-HDL CHOLESTROL		74.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		2.8		1/2 Average 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		1.6		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		10	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)		0.94	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	Н	0.22	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.72	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)		6.2	g/dL	6 - 8.1

Bill No.	: APHHC240000280		Bill Date		:	24-02-2024 10:12				
Patient Name	:	MRS. PUSHPA JAISWAL			UHID		:	APH000020765		
Age / Gender	:	37 Yrs / FEMALE			Patient Type		:	OPD	If PHC :	
Ref. Consultant	:	MEDIWHEEL	\		Ward / Bed		:	1		
Sample ID	:	APH24006453	Current Ward / Bed				:	1		
	:				Receiving Date & Tim			24-02-2024 15:01		
	П				Reporting Date & Tim	1e	:	24-02-2024 17:06		
ALBUMIN-SERI	ŪΜ	(Dye Binding-Bromocresol Green)		3.9		g/dL				
S.GLOBULIN			L	2.	3	g/dL		2.8-3.8		
A/G RATIO				1.7	'0			1.5 - 2.5	5	
ALKALINE PHO	SF	PHATASE IFCC AMP BUFFER		88	.8	IU/L		42 - 98		
ASPARTATE AN	MΙΙ	NO TRANSFERASE (SGOT) (IFCC)		26	.4	IU/L		10 - 42		
ALANINE AMIN	10	TRANSFERASE(SGPT) (IFCC)		23	.4	IU/L		10 - 40		
GAMMA-GLUTA	٩M	YLTRANSPEPTIDASE (IFCC)		7.9		IU/L		7 - 35		
LACTATE DEHY	ΥD	ROGENASE (IFCC; L-P)		18	6.2	IU/L		0 - 248		
S.PROTEIN-TO	TA	L (Biuret)		6.2	2	g/dL		6 - 8.1		
			-							
URIC ACID Urica:	se -	Trinder		3.4	,	mg/d	L	2.6 - 7.2	2	

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	T	APHHC240000280	Bill Date	1:	: 24-02-2024 10:12		
Patient Name	Г	MRS. PUSHPA JAISWAL	UHID	1	APH000020765		
Age / Gender	Г	37 Yrs / FEMALE	Patient Type	1	OPD	If PHC	1:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	1	APH24006453	Current Ward / Bed	1	1		
	F		Receiving Date & Time	1:	24-02-2024 15:01		
	Т		Reporting Date & Time	1	24-02-2024 17:06		

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

INTERPRETATION:

HbA1c %	Degree of Glucose Control						
>8% Action suggested due to high risk of developing long term complications like Retinopa 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

DR. ASHISH RANJAN SINGH