

**Patient Details**

Name: MR.DEBASHISH SAHOO ID: APH00013668

Age: 31 y

Sex: M

Date: 25-Feb-23 Time: 2:30:04 PM

Height: 165 cms.

Weight: 75 Kg.

Clinical History:

Medications:

**Test Details**

Protocol: Bruce

Pr.MHR: 189 bpm

THR: 170 (90 % of Pr.MHR) bpm

Total Exec. Time: 6 m 38 s

Max. HR: 162 ( 86% of Pr.MHR )bpm

Max. Mets: 10.20

Max. BP: 140 / 80 mmHg

Max. BP x HR: 22680 mmHg/min

Min. BP x HR: 8960 mmHg/min

Test Termination Criteria:

**Protocol Details**

Stage Name	Stage Time (min : sec)	Mets	Speed (Km/h)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 12	1.0	0	0	117	120 / 80	-1.01 aVR	2.11 II
Standing	0 : 2	1.0	0	0	117	120 / 80	-1.01 aVR	2.11 II
Hyperventilation	0 : 16	1.0	0	0	112	120 / 80	-1.01 aVR	2.11 II
1	3 : 0	4.6	2.7	10	140	130 / 80	-1.52 aVR	3.38 V2
2	3 : 0	7.0	4	12	161	140 / 80	-1.52 III	4.22 V2
Peak Ex	0 : 38	10.2	5.4	14	162	140 / 80	-1.27 aVR	4.64 V2
Recovery(1)	2 : 0	1.8	1.6	0	134	140 / 80	-2.28 aVR	5.06 V2
Recovery(2)	2 : 0	1.0	0	0	115	130 / 80	-3.80 aVR	5.91 V1
Recovery(3)	0 : 14	1.0	0	0	118	120 / 80	-3.80 aVR	-5.49 aVR

**Interpretation**
**COMMENTS**

- FAIR EXERCISE (10.20 METS) TOLERANCE.
- NORMAL BP RESPONSE TARGET HEART RATE ACHIEVED.
- NO SIGNIFICANT ST-T SIGEMENT CHANGES SEEN IN LEADS.
- THE TEST TERMINATED DUE TO -HEART RATE ACHIEVED.

**IMPRESSION** :- THE TEST IS NEGATIVE FOR INDUCIBLE ISCHAEMIA.

Ref. Doctor: Dr.ADITYA KUMAR

( Summary Report edited by user )

Doctor: Dr.ADITYA KUMAR

Schiller CS-20 V 1.9

Asian City Hospital (A unit of Blue Sapphire Healthcare Pvt. Ltd.) CIN - U74999DL2007PTC150674



**FINAL REPORT**

Bill No. : APHHC230000219	Bill Date : 25-02-2023 09:52
Patient Name : MR. DEBASHISH SAHOO	UHID : APH000013668
Age / Gender : 31 Yrs 3 Mth / MALE	Patient Type : OPD
Ref. Consultant : MEDIWHEEL	Ward / Bed : /
Sample ID : APH23004573	Current Ward / Bed : /
	Receiving Date & Time : 25-02-2023 12:17
	Reporting Date & Time : 26-02-2023 17:53

**BLOOD BANK REPORTING**

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

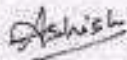
MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"AB"
RH TYPE	POSITIVE

**\*\* 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. : APHHC230000219	Bill Date : 25-02-2023 09:52
Patient Name : MR. DEBASHISH SAHOO	UHID : APH000013668
Age / Gender : 31 Yrs 3 Mth / MALE	Patient Type : OPD
Ref. Consultant : MEDIWHEEL	Ward / Bed : /
Sample ID : APH23004676	Current Ward / Bed : /
	Receiving Date & Time : 25-02-2023 20:03
	Reporting Date & Time : 25-02-2023 20:29

**CLINICAL PATH REPORTING**

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

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400**
**STOOL ROUTINE EXAMINATION**
**PHYSICAL EXAMINATION**

COLOUR	BROWN
CONSISTENCY	SEMI SOLID
BLOOD	ABSENT
MUCOUS	ABSENT

**MICROSCOPIC EXAMINATION**

PUS CELLS	2-3
RBC's	NIL
TROPHOZOITES	NOT DETECTED
CYSTS	NOT DETECTED
OVA	NOT DETECTED

**URINE, ROUTINE EXAMINATION**
**PHYSICAL EXAMINATION**

QUANTITY	20 mL
COLOUR	Pale Straw
TURBIDITY	Pale Straw

**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 pH change)	1.030	1.005 - 1.030

**MICROSCOPIC EXAMINATION**

LEUCOCYTES	2-4	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	1-2		
CASTS	Nil		
CRYSTALS	Nil		
URINE-SUGAR	NEGATIVE		

**\*\* End of Report \*\***
**IMPORTANT INSTRUCTIONS**

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**FINAL REPORT**

Bill No.	: APHHC230000219	Bill Date	: 25-02-2023 09:52
Patient Name	: MR. DEBASHISH SAHOO	UHID	: APH000013668
Age / Gender	: 31 Yrs 3 Mth / MALE	Patient Type	: OPD <span style="float: right;">If PHC : <input type="checkbox"/></span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004676	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 20:03
		Reporting Date & Time	: 25-02-2023 20:29

*Ashish*

**DR. ASHISH RANJAN SINGH**  
MBBS, MD  
CONSULTANT



**FINAL REPORT**

Bill No. :	APHHC230000219	Bill Date :	25-02-2023 09:52
Patient Name :	MR. DEBASHISH SAHOO	UHID :	APH000013668
Age / Gender :	31 Yrs 3 Mth / MALE	Patient Type :	OPD <span style="float:right">If PHC : </span>
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23004572	Current Ward / Bed :	/
		Receiving Date & Time :	25-02-2023 12:17
		Reporting Date & Time :	25-02-2023 16:11

**HAEMATOLOGY REPORTING**

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

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400**
**CBC -1 (COMPLETE BLOOD COUNT)**

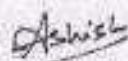
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		7.8	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focusing)		5.0	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hi Detection)		14.9	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		43.8	%	40 - 50
MEAN CORPUSCULAR VOLUME		87.3	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.6	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		34.0	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focusing)		197	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		44.6	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	<b>H</b>	<b>14.3</b>	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**

NEUTROPHILS		66	%	40 - 80
LYMPHOCYTES		24	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		4	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	<b>H</b>	<b>15</b>	mm 1st hr	0 - 10

**\*\* End of Report \*\***
**IMPORTANT INSTRUCTIONS**

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


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 MBBS, MD  
 CONSULTANT


**FINAL REPORT**

Bill No. :	APHHC230000219	Bill Date :	25-02-2023 09:52
Patient Name :	MR. DEBASHISH SAHOO	UHID :	APH000013868
Age / Gender :	31 Yrs 3 Mth / MALE	Patient Type :	OPD
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23004576	Current Ward / Bed :	/
		Receiving Date & Time :	25-02-2023 12:17
		Reporting Date & Time :	25-02-2023 19:55

**SEROLOGY REPORTING**

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

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400**

T3 TOTAL (BPA)	1.94	nmol/l	0.95-2.5
T4 TOTAL (BPA)	91.42	nmol/l	60-120
THYROID STIMULATING HORMONE (BPA)	2.02	µIU/mL	0.25-5

TESTS	RESULTS	EXPECTED VALUES
<b>THYROID PROFILE TOTAL (T3,T4,TSH TOTAL)</b>		
Thyroid-Stimulating Hormone (TSH)		0.25-5µIU/ml
Serum Triiodothyronine (T3 TOTAL)		0.95-2.5nmol/l
Serum Thyroxine (T4 TOTAL)		60-120nmol/l

Wallach's reference range for Thyroid for neonates and children

Age	TSH (µIU/ml)	TT4(nmol/l)	TT3(nmol/l)
1-4 days	1-39	142-277	1.5-11.4
1-4 wks	1.7-9.1	106-221	1.6-5.3
1-12 mon	0.8-8.2	76-210	1.6-3.8
1-5 yrs	0.7-5.7	94-193	1.6-4.1
6-10 yrs	0.7-5.7	82-171	1.4-3.7
11-15 yrs	0.7-5.7	71-151	1.3-3.3
15-18 yrs	0.7-5.7	54-152	1.2-3.2

**\*\* End of Report \*\***
**IMPORTANT INSTRUCTIONS**

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


**DR. ASHISH RANJAN SINGH**





**FINAL REPORT**

Bill No.	: APHHC230000219	Bill Date	: 25-02-2023 09:52
Patient Name	: MR. DEBASHISH SAHOO	UHID	: APH000013668
Age / Gender	: 31 Yrs 3 Mth / MALE	Patient Type	: OPD <span style="float: right;">If PHC : </span>
Ref. Consultant	: MED/WHEEL	Ward / Bed	: /
Sample ID	: APH23004576	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 12:17
		Reporting Date & Time	: 25-02-2023 19:55

MBBS, MD  
CONSULTANT

**FINAL REPORT**

Bill No. :	APHHC230000219	Bill Date :	25-02-2023 09:52
Patient Name :	MR. DEBASHISH SAHOO	UHID :	APH000013668
Age / Gender :	31 Yrs 3 Mth / MALE	Patient Type :	OPD
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23004647	Current Ward / Bed :	/
		Receiving Date & Time :	25-02-2023 17:37
		Reporting Date & Time :	25-02-2023 18:45

**BIOCHEMISTRY REPORTING**

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

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400**

BLOOD UREA <small>Ureae-G.D.H./Kinetic</small>		28	mg/dL	15 - 45
BUN <small>(CALCULATED)</small>		13.1	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe's Kinetic)</small>		0.9	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV-Hexokinase)</small>		96.0	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) <small>(UV-Hexokinase)</small>		97.0	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 <small>(CHO-POC)</small>	H	165	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immuno-inhibition</small>	L	30	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	124	mg/dL	0 - 100
S. TRIGLYCERIDES <small>(GPO-POC)</small>	H	176	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	135.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.5		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		4.1		1/2 Average 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		35	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:
  - Cigarette smoking.
  - Hypertension.
  - Family history of premature coronary heart disease.
  - Pre-existing coronary heart disease.

**LIVER FUNCTION TESTS (LFT)**

BILIRUBIN-TOTAL <small>(BPO)</small>		0.66	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(BPO)</small>		0.10	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.56	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		6.8	g/dL	6 - 8.1



**FINAL REPORT**

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Patient Name :	MR. DEBASHISH SAHOO	UHID :	APH000013668
Age / Gender :	31 Yrs 3 Mth / MALE	Patient Type :	OPD
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23004647	Current Ward / Bed :	/
		Receiving Date & Time :	25-02-2023 17:37
		Reporting Date & Time :	25-02-2023 18:45

ALBUMIN-SERUM (Dye Binding-Dromocross Green)		4.3	g/dL	
S.GLOBULIN	L	2.5	g/dL	2.8-3.8
A/G RATIO		1.72		1.5 - 2.5
ALKALINE PHOSPHATASE (PC, AMP BUFFER)		56.4	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (PC)		31.8	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (PC)	H	44.5	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (PC)	H	58.9	IU/L	11 - 50
LACTATE DEHYDROGENASE (PC; I-P)		196.4	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		6.8	g/dL	6 - 8.1
URIC ACID (Uricase - Trade)		5.0	mg/dL	2.6 - 7.2

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

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

*Ashish*

**DR. ASHISH RANJAN SINGH**  
MBBS, MD  
CONSULTANT

**FINAL REPORT**

Bill No. :	APHHC230000219	Bill Date :	25-02-2023 09:52
Patient Name :	MR. DEBASHISH SAHOO	UHID :	APH000013668
Age / Gender :	31 Yrs 3 Mth / MALE	Patient Type :	OPD
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23004647	Current Ward / Bed :	/
		Receiving Date & Time :	25-02-2023 17:37
		Reporting Date & Time :	25-02-2023 18:45

Sample Type: EDTA Whole Blood, Plasma, Serum

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400**
**HBA1C** (Turbidimetric Immuno-inhibitor)

5.8

%

4.0 - 6.2

**INTERPRETATION:**

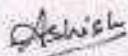
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

**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 \*\***
**IMPORTANT INSTRUCTIONS**

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 MBBS, MD  
 CONSULTANT



## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. DEBASHISH SAHOO	IPD No.	:	
Age	: 31 Yrs 3 Mth	UHID	:	APH000013668
Gender	: MALE	Bill No.	:	APHHC230000219
Ref. Doctor	: MEDIWHEEL	Bill Date	:	25-02-2023 09:52:06
Ward	:	Room No.	:	
		Print Date	:	26-02-2023 12:02:52

### 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  
IMAGING.PT



CONSULTANT RADIOLOGIST,

**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. DEBASHISH SAHOO	IPD No.	:
Age	: 31 Yrs 3 Mth	UHID	: APH000013668
Gender	: MALE	Bill No.	: APHHC230000219
Ref. Doctor	: MEDIWHEEL	Bill Date	: 25-02-2023 09:52:06
Ward	:	Room No.	:
		Print Date	: 25-02-2023 20:04:43

### WHOLE ABDOMEN:

**Liver appears mild enlarged in size and measures 15 and shows grade I fatty infiltration.**

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 (10.3 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.4 x 9.9 cm), Left kidney (10.5 x 5.5 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 17cc), outline and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

**Right inguinal defect of approximate size 9.1mm with herniation of omentum fat through it- suggestive of right inguinal hernia.**

### IMPRESSION:

**Mild hepatomegaly with grade I fatty.**

**Right inguinal hernia.**

Please correlate clinically.

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

Prepare By.  
IMAGING.PT

CONSULTANT RADIOLOGIST,

**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.

Asian City Hospital (A unit of Blue Sapphire Healthcare Pvt. Ltd.) CIN : U74999DL2007PTC159674



## NON INVASIVE CARDIOLOGY

Patient Name	: MR. DEBASHISH SAHOO	IPD No.	:
Age	: 31 Yrs 3 Mth	UHID	: APH000013668
Gender	: MALE	Bill No.	: APHHC230000219
Ref. Doctor	: MEDIWHEEL	Bill Date	: 25-02-2023 09:52:06
Ward	:	Room No.	:
		Procedure Date	: 25-02-2023 17:33:22

### ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

#### M MODE STUDY (MEASUREMENTS)

#### Left Ventricle:-

EDD:	47	(mm)	Left Atrium	38	(mm)
ESD:	31	(mm)	Aortic Root	36	(mm)
IVS Thickness (D/S)	0.9/1.2	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	0.9/1.6	(mm)	Pericardium		NORMAL
LVEF	65	(%)			

#### WALL MOTION STUDY : NO RWMA

MV	: NORMAL	TV	: NORMAL
AV	: NORMAL	PV	: NORMAL
IAS	: NORMAL	IVS	: NORMAL

#### DOPPLER STUDY (PW/CW AND COLOUR FLOW IMAGING)

VALVES	V max(m/sec)	PG	MG	EDG	Orifice Area (cm <sup>2</sup> )	REGURGITATION
MV E/A	0.77/0.62					MR:-NIL
AV	1.19	5.66				AR:- NIL
TV	0.96	3.42				TR:- NIL
PV	0.90	3.22				PR:- NIL

#### IMPRESSION:-

No RWMA.  
Normal Cardiac Chamber Dimensions.  
Normal LV/RV Systolic Function, LVEF-65%.  
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

DR. ADITYA KUMAR,  
MD, DM (CARDIOLOGY)  
CONSULTANT CARDIOLOGIST