

**FINAL REPORT**

Bill No.	: APHHC230000680	Bill Date	: 10-06-2023 08:37		
Patient Name	: MRS. NITU KUMARI	UHID	: APH000015358		
Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD	If PHC	:
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /		
Sample ID	: APH23014929	Current Ward / Bed	: /		
		Receiving Date & Time	: 10-06-2023 09:44		
		Reporting Date & Time	: 10-06-2023 13:10		

**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)		2.19	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	L	0.86	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		3.01	mIU/L	0.27-4.20

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

**IMPORTANT INSTRUCTIONS**

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

*Ashish*

**DR. ASHISH RANJAN SINGH**

MBBS,MD  
CONSULTANT

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Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD <span style="float: right;">If PHC : </span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014924	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 09:44
		Reporting Date & Time	: 10-06-2023 13:16

**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)**

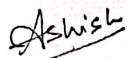
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		10.2	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.4	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	10.8	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	34.1	%	36 - 46
MEAN CORPUSCULAR VOLUME	L	77.5	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	24.4	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		31.5	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		162	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		43.2	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.5	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**

NEUTROPHILS		80	%	40 - 80
LYMPHOCYTES	L	15	%	20 - 40
MONOCYTES		4	%	2 - 10
EOSINOPHILS		1	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	85	mm 1st hr	0 - 20

**\*\* End of Report \*\***
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Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID**	: APH23014925	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 09:44
		Reporting Date & Time	: 10-06-2023 20:54

**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)	"B"
RH TYPE	POSITIVE

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

**IMPORTANT INSTRUCTIONS**

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*Ashish*

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CONSULTANT

## FINAL REPORT

Bill No.	: APHHC23000680	Bill Date	: 10-06-2023 08:37
Patient Name	: MRS. NITU KUMARI	UHID	: APH000015358
Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD <span style="float:right">If PHC : </span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23015054	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 15:35
		Reporting Date & Time	: 10-06-2023 17:17

## 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\_FEMALE BELOW40@2550

BLOOD UREA <small>Urease-GLDH,Kinetic</small>		23	mg/dL	15 - 45
BUN (CALCULATED)		10.7	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>		0.6	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>	H	109.0	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>	H	214.0	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-POD)</small>	H	191	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Inhibition</small>	L	44	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	113	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>	H	165	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	147.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.3		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		33	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>(DPD)</small>		0.75	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>		0.13	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.62	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.3	g/dL	6 - 8.1

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
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ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.1	g/dL	
S.GLOBULIN		3.2	g/dL	2.8-3.8
A/G RATIO	<b>L</b>	<b>1.28</b>		1.5 - 2.5
ALKALINE PHOSPHATASE IFCC AMP BUFFER		77.3	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		20.2	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)		27.5	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		14.8	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC; L-P)		178.6	IU/L	0 - 248
S.PROTEIN-TOTAL (Biuret)		7.3	g/dL	6 - 8.1
URIC ACID Uricase - Trinder		6.8	mg/dL	2.6 - 7.2

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

**IMPORTANT INSTRUCTIONS**

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*Ashish*

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

**FINAL REPORT**

Bill No.	: APHHC230000680	Bill Date	: 10-06-2023 08:37
Patient Name	: MRS. NITU KUMARI	UHID	: APH000016358
Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD <span style="float:right">If PHC : </span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23015054	Current Ward / Bed	: /
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Sample Type: EDTA Whole Blood, Plasma, Serum

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE BELOW40@2550**

HBA1C (Turbidimetric Immuno-inhibition)	H	6.8	%	4.0 - 6.2
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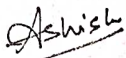
**INTERPRETATION:**

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.

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

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

## NON INVASIVE CARDIOLOGY

Patient Name	: MRS. NITU KUMARI	IPD No.	:
Age	: 38 Yrs 5 Mth	UHID	: APH000015358
Gender	: FEMALE	Bill No.	: APHHC230000680
Ref. Doctor	: MEDIWHEEL	Bill Date	: 10-06-2023 08:37:13
Ward	:	Room No.	:
		Procedure Date	: 10-06-2023 16:15:59

### ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

#### M MODE STUDY (MEASUREMENTS)

**Left Ventricle:-**

EDD:	40	(mm)	Left Atrium	28	(mm)
ESD:	28	(mm)	Aortic Root	32	(mm)
IVS Thickness (D/S)	0.9/1.1	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	0.9/1.1	(mm)	Pericardium		NORMAL
LVEF	62	(%)			

**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
		(mm Hg)				
MV E/A	0.71/0.62					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-62%.  
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

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

**Patient Details**      Date: 10-Jun-23      Time: 12:21:01 PM  
**Name:** Mrs.NITU KUMARI    **ID:** APH000015358  
**Age:** 38 y      **Sex:** F      **Height:** 145 cms      **Weight:** 66 Kgs  
**Clinical History:**

**Medications:**

**Test Details**

**Protocol:** Bruce      **Pr.MHR:** 182 bpm      **THR:** 163 (90 % of Pr.MHR) bpm  
**Total Exec. Time:** 7 m 7 s      **Max. HR:** 163 ( 90% of Pr.MHR )bpm      **Max. Mets:** 10.20  
**Max. BP:** 140 / 90 mmHg      **Max. BP x HR:** 22820 mmHg/min      **Min. BP x HR:** 8320 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 : 22	1.0	0	0	107	120 / 80	-0.51 aVR	0.42 I
Standing	0 : 13	1.0	0	0	113	120 / 80	-0.51 aVR	0.42 I
Hyperventilation	0 : 26	1.0	0	0	104	120 / 80	-0.51 aVR	-0.84 aVR
1	3 : 0	4.6	2.7	10	136	130 / 80	-0.76 aVF	0.84 I
2	3 : 0	7.0	4	12	152	140 / 90	-1.77 II	-1.69 II
Peak Ex	1 : 7	10.2	5.4	14	163	140 / 90	-1.77 aVF	-2.95 II
Recovery(1)	2 : 0	1.8	1.6	0	126	140 / 90	-1.52 V6	-1.69 II
Recovery(2)	1 : 8	1.0	0	0	113	120 / 80	-1.01 V6	0.42 I
Recovery(3)	0 : 9	1.0	0	0	115	120 / 80	-1.01 aVR	0.84 II

**Interpretation**

**COMMENTS** :- FAIR EXCERCISE (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.NITISH KUMAR RANJAN.

Doctor: Dr.ADITYA KUMAR

( Summary Report edited by user )

Asian City Hospital (A unit of Blue Sapphire Healthcare Pvt. Ltd.) CIN : U74999DL2607PTG159674