

NON INVASIVE CARDIOLOGY

Patient Name	: MR. SANDEEP KUMAR	IPD No.	:
Age	: 48 Yrs 9 Mth	UHID	: APH000015359
Gender	: MALE	Bill No.	: APHHC230000681
Ref. Doctor	: MEDIWHEEL	Bill Date	: 10-06-2023 08:43:46
Ward	:	Room No.	:
		Procedure Date	: 10-06-2023 16:19:20

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	47	(mm)	Left Atrium	34	(mm)
ESD:	31	(mm)	Aortic Root	26	(mm)
IVS Thickness (D/S)	1.0/1.2	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	1.0/2.0	(mm)	Pericardium		NORMAL
LVEF	64	(%)			

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 ²)	REGURGITATION
		(mm Hg)				
MV E/A	0.89/0.68					MR:-NIL
AV	1.19	5.66				AR:- NIL
TV	0.96	3.42				TR:- NIL
PV	1.05	4.37				PR:- NIL

IMPRESSION:-

No RWMA.
Normal Cardiac Chamber Dimensions.
Normal LV/RV Systolic Function, LVEF-64%.
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.


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

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patlent Name	: MR. SANDEEP KUMAR	IPD No.	:	
Age	: 48 Yrs 0 Mth	UHID	:	APH000015359
Gondor	: MALE	Bill No.	:	APHHC230000681
Ref. Doctor	: MEDIWHEEL	Bill Date	:	10-08-2023 08:43:48
Ward	:	Room No.	:	
		Print Date	:	10-08-2023 10:48:20

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 Report.....

Prepare By.
MD.SERAJ

DR. MUHAMMAD SERAJ, MD,FRCR
(London) Radiodiagnosis
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. SANDEEP KUMAR	IPD No.	:
Age	: 48 Yrs 9 Mth	UHID	: APH000015359
Gender	: MALE	Bill No.	: APHHC230000681
Ref. Doctor	: MEDIWHEEL	Bill Date	: 10-06-2023 08:43:46
Ward	:	Room No.	:
		Print Date	: 10-06-2023 11:28:46

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 11.4 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 (9.2 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.5 cm), Left kidney (9.9 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Prostate appears normal in size (Vol. 24.8 cc), outline and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION: Normal study.

Please correlate clinically.....

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

Prepare By:
MD.SERAJ

DR. MUHAMMAD SERAJ, MD,FRCR
(London) Radiodiagnosis
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.	: APHHC230000681	Bill Date	: 10-06-2023 08:43
Patient Name	: MR. SANDEEP KUMAR	UHID	: APH000018389
Age / Gender	: 48 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> IF PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014942	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 09:54
		Reporting Date & Time	: 10-06-2023 13:10

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(ABOVE 40)@2550

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.6	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		13.5	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	39.8	%	40 - 50
MEAN CORPUSCULAR VOLUME		85.8	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.2	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		34.1	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		150	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		44.5	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.5	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		62	%	40 - 80
LYMPHOCYTES		24	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS	H	8	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	38	mm 1st hr	0 - 10

**** 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.	: APHHC230000681	Bill Date	: 10-06-2023 08:43
Patient Name	: MR. SANDEEP KUMAR	UHID	: APH000015359
Age / Gender	: 48 Yrs 9 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23015056	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 15:37
		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 _MALE(ABOVE 40)@2550

BLOOD UREA <small>Urease-GDH, Kinetic</small>	L	12	mg/dL	15 - 45
BUN (CALCULATED)	L	5.6	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	L	0.7	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		102.0	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	144.0	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>		113	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>	L	34	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>		61	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		74	mg/dL	0 - 160
NON-HDL CHOLESTROL		79.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.3		½ 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		1.8		½ 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		15	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>(OPD)</small>		0.45	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(OPD)</small>		0.10	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.35	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		0.4	g/dL	6 - 8.1

FINAL REPORT

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Patient Name	: MR. SANDEEP KUMAR	UHID	: APH000015359
Age / Gender	: 48 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23015056	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 15:37
		Reporting Date & Time	: 10-06-2023 17:17

ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		3.8	g/dL	
S.GLOBULIN	L	2.6	g/dL	2.8-3.8
A/G RATIO	L	1.46		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		78.0	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		20.2	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)		20.3	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		14.3	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)		164.2	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		6.4	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		4.9	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.	: APHHC230000681	Bill Date	: 10-06-2023 08:43
Patient Name	: MR. SANDEEP KUMAR	UHID	: APH000016369
Age / Gender	: 48 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23016056	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 15:37
		Reporting Date & Time	: 10-06-2023 17:17

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(ABOVE 40)@2550

HBA1C (Turbidimetric Immuno-Inhibition)	5.6	%	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 ****

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FINAL REPORT

Bill No.	: APHHC230000681	Bill Date	: 10-06-2023 08:43
Patient Name	: MR. SANDEEP KUMAR	UHID	: APH000015359
Age / Gender	: 48 Yrs 9 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014947	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 09:54
		Reporting Date & Time	: 10-06-2023 19:39

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
<i>Sample Type: Serum</i>				
MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550				
PROSTATIC SPECIFIC ANTIGEN(TOTAL) (ELFA)		0.90	ng/mL	0 - 4

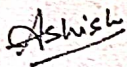
Note:
TPSA as a Tumor marker is used as an additional test for prognosis and monitoring of therapy for patients with diagnosed malignant tumors. It may offer a diagnostic value for screening patients with suspected malignancies, as high values may be experienced in situations like benign prostatic hyperplasia, prostatitis, bladder catheterisation, urinary retention, endoscopic examination. Value in between 4-10ng/ml may be an indication of Benign Prostate Hyperplasia or prostate Carcinoma, values greater than 10ng/ml may indicate high risk of Carcinoma.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



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FINAL REPORT

Bill No.	: APHHC230000681	Bill Date	: 10-06-2023 08:43
Patient Name	: MR. SANDEEP KUMAR	UHID	: APH000015359
Age / Gender	: 48 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014947	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 09:54
		Reporting Date & Time	: 10-06-2023 19:39

Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(ABOVE 40)@2550

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.65	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	0.90	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	3.43	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



FINAL REPORT

Bill No.	: APHHC230000681	Bill Date	: 10-06-2023 08.43
Patient Name	: MR. SANDEEP KUMAR	UHID	: APH000015359
Age / Gender	: 48 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014943	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 09:54
		Reporting Date & Time	: 10-06-2023 20:56

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(ABOVE 40)@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
MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000681	Bill Date	: 10-06-2023 08:43
Patient Name	: MR. SANDEEP KUMAR	UHID	: APH000015359
Age / Gender	: 48 Yrs 9 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014944	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 09:54
		Reporting Date & Time	: 10-06-2023 16:19

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

URINE-SUGAR

NEGATIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



DR. ASHISH RANJAN SINGH
MBBS,MD
CONSULTANT

Patient Details Date: 10-Jun-23 Time: 12:02:11 PM
 Name: MR,SANDEEP KUMAR ID: APH000015359
 Age: 48 y Sex: M Height: 162 cms Weight: 70 Kgs
Clinical History:

Medications:

Test Details

Protocol: Bruce **Pr.MHR:** 172 bpm **THR:** 154 (90 % of Pr.MHR) bpm
Total Exec. Time: 7 m 59 s **Max. HR:** 153 (89% of Pr.MHR)bpm **Max. Mets:** 10.20
Max. BP: 140 / 90 mmHg **Max. BP x HR:** 21420 mmHg/min **Min. BP x HR:** 5120 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 : 26	1.0	0	0	69	120 / 80	-1.01 III	2.11 V2
Standing	0 : 14	1.0	0	0	64	120 / 80	-1.01 aVR	2.11 V2
Hyperventilation	0 : 12	1.0	0	0	65	120 / 80	-1.27 aVR	2.11 V2
1	3 : 0	4.6	2.7	10	109	130 / 80	-2.78 aVR	3.38 V5
2	3 : 0	7.0	4	12	134	140 / 90	-3.04 aVR	4.64 V2
Peak Ex	1 : 59	10.2	5.4	14	153	140 / 90	-1.52 aVR	3.80 II
Recovery(1)	2 : 0	1.8	1.6	0	80	140 / 90	-1.52 aVR	2.95 II
Recovery(2)	2 : 0	1.0	0	0	80	120 / 80	-0.76 aVR	1.27 I
Recovery(3)	0 : 6	1.0	0	0	81	120 / 80	-0.76 aVR	1.69 V2

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 : U74999DL2007PTC0159674