

NON INVASIVE CARDIOLOGY

Patient Name	: MRS. RIDHI KUMARI	IPD No.	:	
Age	: 33 Yrs 1 Mth	UHID	:	APH000013976
Gender	: FEMALE	Bill No.	:	APHHC230000319
Ref. Doctor	: MEDIWHEEL	Bill Date	:	20-03-2023 08:50:31
Ward	:	Room No.	:	
		Procedure Date	:	20-03-2023 14:05:51

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	44	(mm)	Left Atrium	29	(mm)
ESD:	29	(mm)	Aortic Root	30	(mm)
IVS Thickness (D/S)	1.3/1.3	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	1.3/2.0	(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 (mm Hg)	Orifice Area (cm ²)	REGURGITATION
MV E/A	0.54/0.81			MR:-TRIVIAL
AV	1.55	9.57		AR:- NIL
TV	2.20	19.39		TR:-TRIVIAL
PV	1.31	6.81		PR:- NIL

IMPRESSION:-

No RWMA.
Mild Concentric LVH.
Grade I LVDD.
Trivial MR, Trivial TR.
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

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

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MRS. RIDHI KUMARI	IPD No.	:
Age	: 33 Yrs 1 Mth	UHID	: APH000013976
Gender	: FEMALE	Bill No.	: APHHC230000319
Ref. Doctor	: MEDIWHEEL	Bill Date	: 20-03-2023 08:50:31
Ward	:	Room No.	:
		Print Date	: 20-03-2023 11:07:35

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.....

Prepared 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	: MRS. RIDHI KUMARI	IPD No.	:
Age	: 33 Yrs 1 Mth	UHID	: APH000013976
Gender	: FEMALE	Bill No.	: APHHC230000319
Ref. Doctor	: MEDIWHEEL	Bill Date	: 20-03-2023 08:50:31
Ward	:	Room No.	:
		Print Date	: 20-03-2023 10:38:11

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture.

No focal lesion seen. Intrahepatic biliary radicals are not dilated.

Portal vein is normal in calibre (measures 9.6 mm).

Gall bladder is partially distended and shows mild diffuse mural thickening (wall thickness ~ 3 mm) with multiple tiny intramural echogenic foci which is showing comet tail artifacts suggesting likely adenomyomatosis. No calculus seen.

CBD is normal in calibre (measures 6.0 mm).

Pancreas is normal in size and echotexture.

Spleen is normal in size (9.0 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.6 cm), Left kidney (9.6 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 7.9 x 5.6 x 4.4 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 (8.5 mm).

Both ovaries are normal in size and echotexture. Right ovary measures 2.2 x 1.4 cm, left ovary measures 2.2 x 1.4 cm.

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

No significant lymphadenopathy seen.


No dilated bowel loop seen.

IMPRESSION: Gall bladder is partially distended and shows mild diffuse mural thickening (wall thickness ~ 3 mm) with multiple tiny intramural echogenic foci which is showing comet tail artifacts suggesting likely adenomyomatosis. No calculus seen.

Please correlate clinically.

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

Prepare By.
MD.SERAJ


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(London) Radiodiagnosis
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Patient: Mrs. RIDHI KUMARI

APH013976 33 year / F

HR 91/min

Axis: P 51° QRS 62° T 28°

SINUS RHYTHM NORMAL ECG

Intervals: RR 657 ms P 98 ms PR 140 ms QRS 68 ms QT 340 ms QTc 420 ms

P (II) 0.16 mV S (VI) 0.90 mV R (V5) 1.27 mV Sokol: 2.39 mV

10 mm/mV

10 mm/mV

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25 mm/s

0.05-25Hz

F50 55F 585

Mo 20 MAR 23 13:27:28

ASIAN CITY HOSPITAL PATNA

AT-2plus 4.14 CM

Part No.2.157017M

66 0123

I.B.C

CGMH/120

FINAL REPORT

Bill No.	: APHHC230000319	Bill Date	: 20-03-2023 08:50
Patient Name	: MRS. RIDHI KUMARI	UHID	: APH000013976
Age / Gender	: 33 Yrs 1 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006590	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 13:57
		Reporting Date & Time	: 20-03-2023 15:00

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>		26	mg/dL	15 - 45
BUN (CALCULATED)		12.1	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	L	0.5	mg/dL	0.6 - 1.1
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>		76.0	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	215	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>	L	39	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	138	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		148	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	176.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.5		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		3.5		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		30	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>		0.12	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.63	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		7.2	g/dL	6 - 8.1

FINAL REPORT

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ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.3	g/dL	
S.GLOBULIN		2.9	g/dL	2.8-3.8
A/G RATIO	L	1.48		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC A-P BUFFER)		78.8	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		18.9	IU/L	10 - 42
ALANINE AMINO TRANSFERASE (SGPT) (IFCC)		22.6	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		7.8	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC, L-P)		146.0	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		7.2	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		7.0	mg/dL	2.6 - 7.2

NOTE:- Result rechecked please correlate clinically.

**** 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

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Sample ID	: APH23006590	Current Ward / Bed	: /
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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HbA1c (Glycosylated Haemoglobin)

INTERPRETATION:	5.8	%	4.0 - 6.2
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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.

NOTE:- Result rechecked please correlate clinically.

**** End of Report ****

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Age / Gender	: 33 Yrs 1 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006577	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 12:16
		Reporting Date & Time	: 20-03-2023 14:15

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY		30 mL		
COLOUR		Pale straw		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)		1.010		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		2-3	/HPF	0 - 5
RBC'S		Nil		
EPITHELIAL CELLS		4-5 / HPF		
CASTS		Nil		
CRYSTALS		Nil		
URINE-SUGAR		NEGATIVE		

**** End of Report ****

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006566	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 09:25
		Reporting Date & Time	: 20-03-2023 12:33

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)		3.41	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.25	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	H	5.14	mIU/L	0.27-4.20

**** End of Report ****

IMPORTANT INSTRUCTIONS

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FINAL REPORT

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Patient Name	: MRS. RIDHI KUMARI	UHID	: APH000013976
Age / Gender	: 33 Yrs 1 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006562	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 09:25
		Reporting Date & Time	: 20-03-2023 12:30

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)		5.8	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.2	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	11.8	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		36.1	%	36 - 46
MEAN CORPUSCULAR VOLUME		86.5	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.2	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.6	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		157	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	49.5	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.9	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		66	%	40 - 80
LYMPHOCYTES		25	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		3	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	70	mm 1st hr	0 - 20

**** End of Report ****

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Age / Gender	: 33 Yrs 1 Mth / FEMALE	Patient Type	: OPD. If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006563	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 09:25
		Reporting Date & Time	: 20-03-2023 12:28

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)	"O"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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FINAL REPORT

Bill No.	: APHOP230003222	Bill Date	: 20-03-2023 12:35
Patient Name	: MRS. TANVEE KIRAN	UHID	: APH000013882
Age / Gender	: 33 Yrs 4 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: DR. ANITA KUMARI	Ward / Bed	: /
Sample ID	: APH23006579	Current Ward / Bed	: /
		Receiving Date & Time	: 20-03-2023 13:03
		Reporting Date & Time	: 20-03-2023 13:32

BIOCHEMISTRY REPORTING

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

GLUCOSE CHALLENGE TEST

PLASMA GLUCOSE LEVEL (UV Hexokinase)		84.0	mg/dL	
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GCT sample taken 2 hrs after 82.5 gms of Glucose.

**** End of Report ****

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