

NON INVASIVE CARDIOLOGY

Patient Name	: MRS. SHRUTI SINGH	IPD No.	:
Age	: 30 Yrs 10 Mth	UHID	: APH000013956
Gender	: FEMALE	Bill No.	: APHHC230000308
Ref. Doctor	: MEDIWHEEL	Bill Date	: 18-03-2023 08:57:48
Ward	:	Room No.	:
		Procedure Date	: 18-03-2023 16:13:49

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	38	(mm)	Left Atrium	29	(mm)
ESD:	30	(mm)	Aortic Root	26	(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	60	(%)			

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	0.71/0.62			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-60%.
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.

N.K.
18/3/23
DR. NITISH KUMAR RANJAN
MD, DM (CARDIOLOGY)
CONSULTANT CARDIOLOGIST

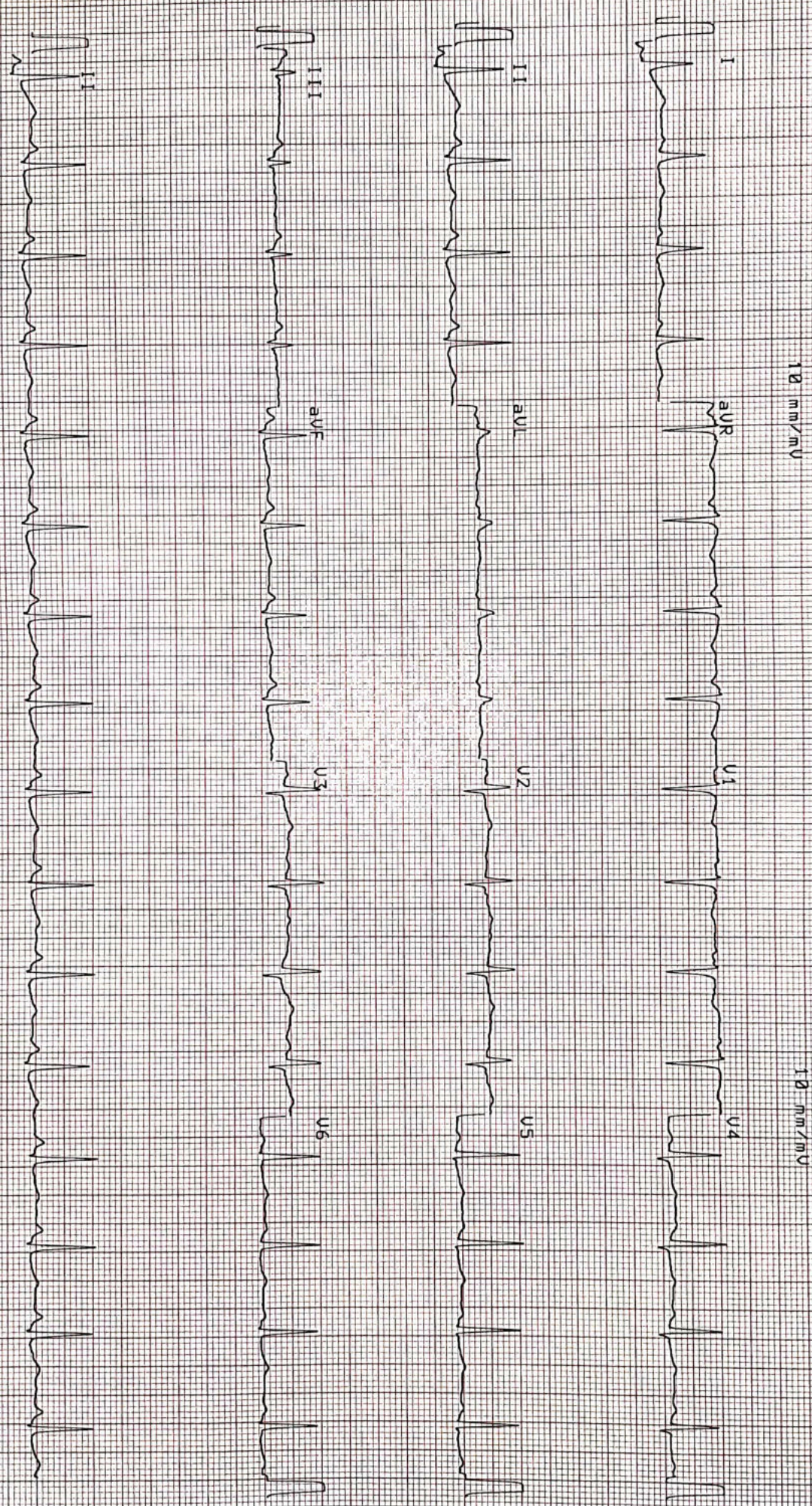
Patient: Mrs. Shruti Singh
aph000013956
50 year / F

HR 95/min
Intervals:
RR 631 ms
P 92 ms
PR 130 ms
QR5 74 ms
QT 348 ms
QTc 441 ms

P axis: 62°
QRS 42°
T 40°

P (II) 0.18 mV
S (-V1) -1.05 mV
R (V5) 1.34 mV
Spk01. 2.39 mV

SINUS RHYTHM
NORMAL ECG
5.62



25 mm/s
0.05-ZSHZ F50 SSF SBS Sa 18-MAR-23 12:37:50
RSJRN CITY HOSPITAL PRINR
AT-2P/US 4.14 CM

SCHILLER

Part No.2.157017M

© 0123

18C

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MRS. SHRUTI SINGH	IPD No.	:
Age	: 30 Yrs 10 Mth	UHID	: APH000013956
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Ref. Doctor	: MEDIWHEEL	Bill Date	: 18-03-2023 08:57:48
Ward	:	Room No.	:
		Print Date	: 18-03-2023 10:15:36

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.SALMAN


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. SHRUTI SINGH	IPD No.	:	
Age	: 30 Yrs 10 Mth	UHID	:	APH000013956
Gender	: FEMALE	Bill No.	:	APHHC230000308
Ref. Doctor	: MEDIWHEEL	Bill Date	:	18-03-2023 08:57:48
Ward	:	Room No.	:	
		Print Date	:	18-03-2023 10:51:19

WHOLE ABDOMEN:

Both the hepatic lobes are mildly enlarged in size and shows moderate to severe increase in parenchymal echogenicity S/O grade II/III fatty liver infiltration. (Liver measures 17.2 cm).

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

Portal vein is normal in calibre (measures 10.6 mm).

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 (9.5 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.1 cm), Left kidney (11.8 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 8.1 x 5.3 x 4.1 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 (6.4 mm).

Both ovaries are normal in size and echotexture. Right ovary measures 3.0 x 1.4 cm, left ovary measures 2.4 x 1.7 cm.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION:

- Mild hepatomegaly with grade II/III fatty infiltration of liver.

Please correlate clinically.

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

Prepare By.
MD.SALMAN


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FINAL REPORT

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Patient Name	: MRS. SHRUTI SINGH	UHID	: APH000013956
Age / Gender	: 30 Yrs 10 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006433	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 13:52
		Reporting Date & Time	: 18-03-2023 15:09

BIOCHEMISTRY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

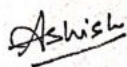
GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)		133.0	mg/dL	70 - 140
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Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL.
(As per American Diabetes Association recommendation)

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



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MBBS,MD
CONSULTANT

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Age / Gender	: 30 Yrs 10 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006397	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 09:53
		Reporting Date & Time	: 18-03-2023 13:24

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)	"A"
RH TYPE	NEGATIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Age / Gender	: 30 Yrs 10 Mth / FEMALE	Patient Type	: OPD	If PHC	:
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /		
Sample ID	: APH23006425	Current Ward / Bed	: /		
		Receiving Date & Time	: 18-03-2023 11:49		
		Reporting Date & Time	: 18-03-2023 13:02		

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	15 mL		
COLOUR	Pale Straw		Pale Yellow
TURBIDITY	Clear		

CHEMICAL EXAMINATION

PH (Double pH indicator method)	5.0		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	1-2	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	0-1		
CASTS	Nil		
CRYSTALS	Nil		
URINE-SUGAR	NEGATIVE		

**** End of Report ****

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Age / Gender	: 30 Yrs 10 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006396	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 09:53
		Reporting Date & Time	: 18-03-2023 13:19

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)		9.1	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	L	3.2	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	9.0	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	27.5	%	36 - 46
MEAN CORPUSCULAR VOLUME		85.1	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		27.9	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.9	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)	L	129	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	50.9	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	16.7	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		56	%	40 - 80
LYMPHOCYTES		36	%	20 - 40
MONOCYTES		4	%	2 - 10
EOSINOPHILS		4	%	1 - 5
BASOPHILS		0	%	0 - 1

ESR (Westergren)	H	90	mm 1st hr	0 - 20
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**** End of Report ****

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Patient Name	: MRS. SHRUTI SINGH	UHID	: APH000013956
Age / Gender	: 30 Yrs 10 Mth / FEMALE	Patient Type	: OPD If PHC : <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006400	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 09:53
		Reporting Date & Time	: 18-03-2023 12:18

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)		2.90	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.33	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	H	4.46	mIU/L	0.27-4.20

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Ashish

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Age / Gender	: 30 Yrs 10 Mth / FEMALE	Patient Type	: OPD	If PHC	:
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /		
Sample ID	: APH23006401	Current Ward / Bed	: /		
		Receiving Date & Time	: 18-03-2023 09:55		
		Reporting Date & Time	: 18-03-2023 12:16		

Sample Type: EDTA Whole Blood, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	5.5	%	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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Age / Gender	: 30 Yrs 10 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23006401	Current Ward / Bed	: /
		Receiving Date & Time	: 18-03-2023 09:55
		Reporting Date & Time	: 18-03-2023 12:16

ALKALINE PHOSPHATASE (IFCC AMP BUFFER)	76.0	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)	24.3	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	22.4	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)	27.6	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC; L-P)	178.0	IU/L	0 - 248
S.PROTEIN-TOTAL (Biuret)	7.3	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)	3.1	mg/dL	2.6 - 7.2

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Ashish

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
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		Receiving Date & Time	: 18-03-2023 09:55
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BIOCHEMISTRY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD UREA <small>Urease-GLDH,Kinetic</small>		19	mg/dL	15 - 45
BUN <small>(CALCULATED)</small>		8.9	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>		101.0	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)

LIPID PROFILE

CHOLESTROL-TOTAL <small>(CHO-POD)</small>		135	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>	L	33	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>		82	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>	H	204	mg/dL	0 - 160
NON-HDL CHOLESTROL		102.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.1		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		2.5		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	H	41	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>	H	1.11	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>	H	0.21	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	0.90	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.3	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.4	g/dL	
S.GLOBULIN		2.9	g/dL	2.8-3.8
A/G RATIO		1.52		1.5 - 2.5

Patient Details

Date: 18-Mar-23

Time: 12:49:37 PM

Name: MRS.SHRUTI SINGH ID: APH000013956

Age: 30 y

Sex: F

Height: 157 cms

Weight: 67 Kgs

Clinical History:

Medications:

Test Details

Protocol: Bruce

Pr.MHR: 190 bpm

THR: 171 (90 % of Pr.MHR) bpm

Total Exec. Time: 7 m 58 s

Max. HR: 162 (85% of Pr.MHR)bpm

Max. Mets: 10.20

Max. BP: 140 / 90 mmHg

Max. BP x HR: 22680 mmHg/min

Min. BP x HR: 7760 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 : 15	1.0	0	0	101	120 / 80	0.00 I	0.42 I
Standing	0 : 5	1.0	0	0	97	120 / 80	-0.25 aVR	0.84 II
Hyperventilation	0 : 8	1.0	0	0	103	120 / 80	-0.25 aVR	0.84 II
1	3 : 0	4.6	2.7	10	140	130 / 80	-0.76 aVF	1.27 II
2	3 : 0	7.0	4	12	151	140 / 90	-1.27 V6	1.69 II
Peak Ex	1 : 58	10.2	5.4	14	162	140 / 90	-1.52 V6	1.69 V2
Recovery(1)	2 : 0	1.8	1.6	0	115	140 / 90	-1.01 III	1.69 II
Recovery(2)	2 : 0	1.0	0	0	105	130 / 80	-0.76 I	0.84 II
Recovery(3)	1 : 0	1.0	0	0	102	120 / 80	-0.25 I	0.84 II
Recovery(4)	0 : 7	1.0	0	0	105	120 / 80	-0.25 I	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.NITISH KUMAR RANJAN

(Summary Report edited by user)

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

Schiller CS-20 V1.9