

NON INVASIVE CARDIOLOGY

Patient Name	: MR. MRINAL SHIKHAR	IPD No.	:
Age	: 31 Yrs 6 Mth	UHID	: APH000015368
Gender	: MALE	Bill No.	: APHHC230000690
Ref. Doctor	: MEDIWHEEL	Bill Date	: 10-06-2023 09:33:24
Ward	:	Room No.	:
		Procedure Date	: 10-06-2023 16:41:40

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	47	(mm)	Left Atrium	29	(mm)
ESD:	29	(mm)	Aortic Root	27	(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	63	(%)			

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	0.71/0.62					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-63%.
No LA-LAA Clot/ Vegetation/ Pericardial Effusion.


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

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MR. MRINAL SHIKHAR	IPD No.	:
Age	: 31 Yrs 6 Mth	UHID	: APH000015368
Gender	: MALE	Bill No.	: APHHC230000690
Ref. Doctor	: MEDIWHEEL	Bill Date	: 10-06-2023 09:33:24
Ward	:	Room No.	:
		Print Date	: 10-06-2023 12:03:03

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 13.1 cm)
 No focal lesion seen. Intrahepatic biliary radicals are not dilated.
 Portal vein is normal in calibre (9.6 mm).
Gall bladder is well distended and shows multiple small calculi (size ~ 5 mm). Wall thickness is normal.
CBD is normal in calibre (4.6 mm).
 Pancreas is normal in size and echotexture.
 Spleen is normal in size (9.8 cm) and echotexture.
 Both kidneys are normal in size and echotexture (Right kidney (9.9 cm), Left kidney (10.1 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.
 Urinary bladder appears normal.
 Prostate appears normal in size (Vol. 21.1 cc), outline and echotexture.
 No free fluid or collection seen. No basal pleural effusion seen.
 No significant lymphadenopathy seen.
 No dilated bowel loop seen.
Small mildly hyperechoic lesion of size ~ 19.6 x 7.5 mm is seen in subcutaneous plane of left lumbar region likely lipoma.

IMPRESSION:

-Cholelithiasis.
-Small mildly hyperechoic lesion of size ~ 19.6 x 7.5 mm is seen in subcutaneous plane of left lumbar region likely lipoma. (Suggested ultrasound guided FNAC)

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 : XRAY

Patient Name	: MR. MRINAL SHIKHAR	IPD No.	:	
Age	: 31 Yrs 6 Mth	UHID	:	APH000015368
Gender	: MALE	Bill No.	:	APHHC230000690
Ref. Doctor	: MEDIWHEEL	Bill Date	:	10-06-2023 09:33:24
Ward	:	Room No.	:	
		Print Date	:	10-06-2023 11:20:02

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.


FINAL REPORT

Bill No.	: APHHC230000690	Bill Date	: 10-06-2023 09:33
Patient Name	: MR. MRINAL SHIKHAR	UHID	: APH000016368
Age / Gender	: 31 Yrs 6 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014979	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 10:18
		Reporting Date & Time	: 10-06-2023 19:40

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
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.75	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.23	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		2.79	mIU/L	0.27-4.20

**** 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.	: APHHC230000690	Bill Date	: 10-06-2023 09:33
Patient Name	: MR. MRINAL SHIKHAR	UHID	: APH000015368
Age / Gender	: 31 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014975	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 10:18
		Reporting Date & Time	: 10-06-2023 13:18

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)		6.8	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	L	4.4	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		13.1	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	39.6	%	40 - 50
MEAN CORPUSCULAR VOLUME		89.9	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.7	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.0	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		156	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		43.3	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		13.4	%	11.6 - 14

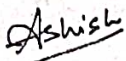
DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		56	%	40 - 80
LYMPHOCYTES		30	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS	H	8	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	43	mm 1st hr	0 - 10

**** End of Report ****

IMPORTANT INSTRUCTIONS

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FINAL REPORT

Bill No. :	APHHC23333333	Bill Date :	10-08-2023 09:33
Patient Name :	MR. MRINAL SINGHAR	UHID :	APHH11115348
Age / Gender :	31 Yrs 0 Mth / MALE	Patient Type :	OPD IPHC :
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	1
Sample ID :	APH22015058	Current Ward / Bed :	1
		Receiving Date & Time :	10-08-2023 19:43
		Reporting Date & Time :	10-08-2023 19:59

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW 40)/020400

URINE, ROUTINE EXAMINATION
PHYSICAL EXAMINATION

QUANTITY		20 mL		
COLOUR		Pale yellow		Pale Yellow
TURBIDITY		Clarity loss		

CHEMICAL EXAMINATION

PH (RANDOM URINE SPECIMEN)		6.0		5.0 - 8.5
PROTEINS (DIPSTICK METHOD)		Negative		Negative
SUGAR (DIPSTICK METHOD)		Negative		Negative
SPECIFIC GRAVITY, URINE (DIPSTICK METHOD)		1.020		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		2-3	HPF	0-5
RBCs		Nil		
EPITHELIAL CELLS		1-2		
CASTS		Nil		
CRYSTALS		Nil		

URINE-SUGAR		NEGATIVE		
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**** End of Report ****
IMPORTANT INSTRUCTIONS

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FINAL REPORT

Bill No.	: APHHC230000690	Bill Date	: 10-06-2023 09:33
Patient Name	: MR. MRINAL SHIKHAR	UHID	: APH000015368
Age / Gender	: 31 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC : :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014978	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 10:18
		Reporting Date & Time	: 10-06-2023 16:18

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_MALE(BELOW-40)@2400

BLOOD UREA <small>Urease-GDH, Kinetic</small>		22	mg/dL	15 - 45
BUN (CALCULATED)		10.3	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>		99.0	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>	H	171	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic ImmunoInhibition</small>		43	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>		100	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>	H	167	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	128.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.0		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		2.3		½Average 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		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>(DPO)</small>		0.57	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.10	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.47	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.0	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.2	g/dL	
S.GLOBULIN		2.8	g/dL	2.8-3.8
A/G RATIO		1.50		1.5 - 2.5

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ALKALINE PHOSPHATASE (FCC AMP BUFFER)	57.2	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (FCC)	23.4	IU/L	10 - 42
ALANINE AMINO TRANSFERASE (SGPT) (FCC)	29.2	IU/L	10 - 40
GAMMA-GLUTAMYL TRANSPEPTIDASE (FCC)	12.3	IU/L	11 - 50
LACTATE DEHYDROGENASE (FCC L-P)	146.0	IU/L	0 - 248
S.PROTEIN-TOTAL (Burd)	7.0	g/dL	6 - 8.1
URIC ACID Urice - Trinder	4.0	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.	: APHHC230000690	Bill Date	: 10-05-2023 09:33
Patient Name	: MR. MRINAL SHIKHAR	UHID	: APH000015358
Age / Gender	: 31 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014978	Current Ward / Bed	: /
		Receiving Date & Time	: 10-05-2023 10:18
		Reporting Date & Time	: 10-05-2023 15:18

Sample Type: EDTA Whole Blood, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

HBA1C (Glycemic Indicator)	5.6	%	4.0 - 6.2
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INTERPRETATION:

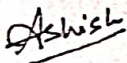
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- 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 ****

IMPORTANT INSTRUCTIONS

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FINAL REPORT

Bill No.	: APHHC230000690	Bill Date	: 10-06-2023 09:33
Patient Name	: MR. MRINAL SHIKHAR	UHID	: APH000015368
Age / Gender	: 31 Yrs 6 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014976	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 10:18
		Reporting Date & Time	: 10-06-2023 21:02

BLOOD BANK REPORTING

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

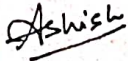
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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