

NON INVASIVE CARDIOLOGY

Patient Name	: MRS. MANJU RANI	IPD No.	:
Age	: 38 Yrs 5 Mth	UHID	: APH000015362
Gender	: FEMALE	BIII No.	: APHHC230000683
Ref. Doctor	: MEDIWHEEL	BIII Date	: 10-06-2023 08:54:53
Ward	:	Room No.	:
		Procedure Date	: 10-06-2023 16:24:45

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	42	(mm)	Left Atrium	31	(mm)
ESD:	28	(mm)	Aortic Root	31	(mm)
IVS Thickness (D/S)	1.0/1.2	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	1.0/1.3	(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 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	1.09	4.79				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



DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MRS. MANJU RANI	IPD No.	:
Age	: 38 Yrs 5 Mth	UHID	: APH1000010392
Gender	: FEMALE	Bill No.	: APH110230000993
Ref. Doctor	: MEDIWHEEL	Bill Date	: 10-06-2023 08:54:53
Ward	:	Room No.	:
		Print Date	: 10-06-2023 11:13:49

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and shows mildly increase in parenchymal echogenicity

S/O grade I fatty liver infiltration. (Liver measures 13.5 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 (8.1 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (11.0 cm), Left kidney (9.7 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 7.2 x 4.6 x 3.5 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 (6.8 mm).

Both ovaries are normal in size and echotexture. Right ovary measures 2.6 x 2.3 cm, left ovary measures 2.3 x 1.9 cm.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION:

- Grade I fatty infiltration of liver.

Please correlate clinically.....

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

Prepare By.
MD.SERAJ

DR. MUHAMMAD SERAJ, MD,FRCP
(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	: MRS. MANJU RANI	IPD No.	:	
Age	: 38 Yrs 5 Mth	UHID	:	APH000015362
Gender	: FEMALE	Bill No.	:	APHHC230000683
Ref. Doctor	: MEDIWHEEL	Bill Date	:	10-06-2023 08:54:53
Ward	:	Room No.	:	
		Print Date	:	10-06-2023 11:18:36

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.SERAJ

DR. MUHAMMAD SERAJ, MD,FCR
(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.	APH4IC230000983	Bill Date	10-09-2023 08:54
Patient Name	MRS. MANJU RANI	UP-NO	APH40000983083
Age / Gender	38 Yrs 6 Mth / FEMALE	Patient Type	OPD <input type="checkbox"/> IPHC <input type="checkbox"/>
Ref. Consultant	MEDIWHEEL	Ward / Bed	/
Sample ID	APH23014861	Current Ward / Bed	/
		Receiving Date & Time	10-09-2023 10:08
		Reporting Date & Time	10-09-2023 20:57

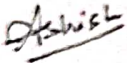
BLOOD BANK REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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

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



DR. ASHISH RANJAN SINGH
 MBBS, MD
 CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000683	Bill Date	: 10-06-2023 08:54
Patient Name	: MRS. MANJU RANI	UHID	: APH000015362
Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014960	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 10:08
		Reporting Date & Time	: 10-06-2023 13:17

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)

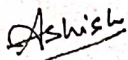
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		7.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.1	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)		12.0	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		37.4	%	36 - 46
MEAN CORPUSCULAR VOLUME		90.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.9	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.0	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		182	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	48.6	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.0	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		55	%	40 - 80
LYMPHOCYTES		37	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	99	mm 1st hr	0 - 20

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

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 CONSULTANT


FINAL REPORT

Bill No. :	APHHC230000683	Bill Date :	10-06-2023 08:54
Patient Name :	MRS. MANJU RANI	UHID :	APH000016362
Age / Gender :	38 Yrs 5 Mth / FEMALE	Patient Type :	OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant :	MEDIWHEEL	Ward / Bed :	/
Sample ID :	APH23015060	Current Ward / Bed :	/
		Receiving Date & Time :	10-06-2023 15:48
		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_FEMALE BELOW40@2550
URINE, ROUTINE EXAMINATION
PHYSICAL EXAMINATION

QUANTITY		25 mL		
COLOUR		Pale yellow		Pale Yellow
TURBIDITY		Slight hazy		

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)		1.025		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		2-3	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		6-8		
CASTS		Nil		
CRYSTALS		Nil		
URINE-SUGAR		NEGATIVE		

**** End of Report ****
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FINAL REPORT

Bill No.	: APHHC230000683	Bill Date	: 10-06-2023 08:54
Patient Name	: MRS. MANJU RANI	UHID	: APH000015362
Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23015042	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 15:09
		Reporting Date & Time	: 10-06-2023 17:18

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>		19	mg/dL	15 - 45
BUN (CALCULATED)		8.9	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>		0.7	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		94.0	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>		102.0	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	223	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Inhibition</small>		48	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	133	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		133	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	175.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.6		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		2.8		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		27	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>		0.55	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>		0.09	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.46	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		6.7	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Color Binding Bromocresol Green)</small>		3.7	g/dL	

FINAL REPORT

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Patient Name	: MRS. MANJU RANI	UHID	: APH000015362
Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23015042	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 15:09
		Reporting Date & Time	: 10-06-2023 17:18

S.GLOBULIN		3.0	g/dL	2.8-3.8
A/G RATIO	L	1.23		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		71.3	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)	H	52.4	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	H	85.7	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)	H	37.9	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC; L-P)		203.8	IU/L	0 - 248
S.PROTEIN-TOTAL (Biuret)		6.7	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		3.7	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.	: APHHC230000683	Bill Date	: 10-08-2023 08:54
Patient Name	: MRS. MANJU RANI	UHID	: APH000015362
Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23015042	Current Ward / Bed	: /
		Receiving Date & Time	: 10-08-2023 15:09
		Reporting Date & Time	: 10-08-2023 17:18

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	5.1	%	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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Ashish

DR. ASHISH RANJAN SINGH
MBBS,MD
CONSULTANT

FINAL REPORT

Bill No.	: APHHC230000683	Bill Date	: 10-06-2023 08:54
Patient Name	: MRS. MANJU RANI	UHID	: APH000015362
Age / Gender	: 38 Yrs 5 Mth / FEMALE	Patient Type	: OPD If PHC : <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23014964	Current Ward / Bed	: /
		Receiving Date & Time	: 10-06-2023 10:08
		Reporting Date & Time	: 10-06-2023 16:11

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

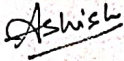
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.62	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.22	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		2.77	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

Patient Details

Date: 10-Jun-23 Time: 12:59:27 PM
 Name: MRS. MANJU RANI ID: APH000015362
 Age: 38 y Sex: F Height: 151 cms. Weight: 80 Kg.
 Clinical History:

Medications:

Test Details

Protocol: Bruce Pr.MHR: 182 bpm THR: 163 (90 % of Pr.MHR) bpm
 Total Exec. Time: 7 m 3 s Max. HR: 170 (93% of Pr.MHR) bpm Max. Mets: 10.20
 Max. BP: 140 / 90 mmHg Max. BP x HR: 23800 mmHg/min Min. BP x HR: 7600 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 : 16	1.0	0	0	95	120 / 80	-1.01 aVR	1.69 II
Standing	0 : 11	1.0	0	0	99	120 / 80	-1.01 aVR	1.69 II
Hyperventilation	0 : 10	1.0	0	0	98	120 / 80	-1.01 aVR	1.69 II
1	3 : 0	4.6	2.7	10	133	130 / 80	-1.52 aVR	2.95 II
2	3 : 0	7.0	4	12	154	140 / 90	-1.27 aVR	2.95 II
Peak Ex	1 : 3	10.2	5.4	14	170	140 / 90	-1.27 aVR	3.80 V2
Recovery(1)	2 : 0	1.8	1.6	0	118	140 / 90	-3.29 aVR	5.06 II
Recovery(2)	2 : 0	1.0	0	0	111	120 / 80	-1.27 aVR	2.95 II
Recovery(3)	0 : 16	1.0	0	0	111	120 / 80	-3.54 aVR	2.11 II

Interpretation

COMMENTS :- FAIR EXERCISE (10.20 METS) TOLERANCE.
 :- NORMAL BP RESPONSE TARGET HEART RATE ACHIEVED.
 :- NO SIGNIFICANT ST-T SEGMENT 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 : U74999DL2007PTC159674