

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	:	MR. KRISHNA CHANDRA	IPD No.	:	
Age	:	31 Yrs 10 Mth	UHID	:	APH000018937
Gender	:	MALE	Bill No.	:	APHHC230001394
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	14-12-2023 08:45:11
Ward	:		Room No.	:	
			Print Date	:	14-12-2023 11:01:14

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
Radiodiagnosis, FRCR (London)
BCMR/46075
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. KRISHNA CHANDRA	IPD No.	:	
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Gender	: MALE	Bill No.	:	APHHC230001394
Ref. Doctor	: MEDIWHEEL	Bill Date	:	14-12-2023 08:45:11
Ward	:	Room No.	:	
		Print Date	:	14-12-2023 10:56:21

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and shows moderate increase in parenchymal echogenicity S/O grade II fatty liver infiltration. (Liver measures 12.5 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 and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.9 cm), Left kidney (11.5 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal. (Pre void Vol. 150 cc, Post void Vol. 18 cc)

Prostate appears normal in size (Vol ~ 15.2 cc), outline and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION: Grade II fatty liver.

Please correlate clinically.

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

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Patient Name	: MR. KRISHNA CHANDRA	UHID	: APH000018937		
Age / Gender	: 31 Yrs 10 Mth / MALE	Patient Type	: OPD	If PHC	:
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /		
Sample ID	: APH23034278	Current Ward / Bed	: /		
		Receiving Date & Time	: 14-12-2023 09:14		
		Reporting Date & Time	: 14-12-2023 15:01		

BLOOD BANK REPORTING

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

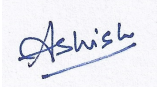
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



DR. ASHISH RANJAN SINGH
MBBS,MD
CONSULTANT

FINAL REPORT

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Age / Gender	: 31 Yrs 10 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034281	Current Ward / Bed	: /
		Receiving Date & Time	: 14-12-2023 09:14
		Reporting Date & Time	: 14-12-2023 12:44

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

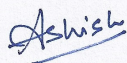
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.70	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.42	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		3.41	mIU/L	0.27-4.20

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Age / Gender	: 31 Yrs 10 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034430	Current Ward / Bed	: /
		Receiving Date & Time	: 15-12-2023 13:33
		Reporting Date & Time	: 15-12-2023 15:28

CLINICAL PATH REPORTING

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

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

STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

COLOUR	BROWN
CONSISTENCY	SEMI SOLID
BLOOD	NOT DETECTED
MUCOUS	ABSENT

MICROSCOPIC EXAMINATION

PUS CELLS	1-2
RBC's	NIL
TROPHOZOITES	NOT DETECTED
CYSTS	NOT DETECTED
OVA	NOT DETECTED

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY	30 mL		
COLOUR	Pale Straw		Pale Yellow
TURBIDITY	Clear		

CHEMICAL EXAMINATION

PH <small>(Double pH indicator method)</small>	6.0		5.0 - 8.5
PROTEINS <small>(Protein-error-of-indicators)</small>	Negative		Negative
SUGAR <small>(GOD POD Method)</small>	Negative		Negative
SPECIFIC GRAVITY, URINE <small>(Apparent pKa change)</small>	1.030		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES	1-2	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	0-1		
CASTS	Nil		
CRYSTALS	Nil		
OTHERS	Nil		

URINE-SUGAR	Negative
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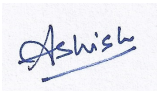
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Age / Gender	: 31 Yrs 10 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034276	Current Ward / Bed	: /
		Receiving Date & Time	: 14-12-2023 09:14
		Reporting Date & Time	: 14-12-2023 12:42

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 <small>(Flow Cytometry)</small>		4.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT <small>(Hydro Dynamic Focussing)</small>		5.4	million/cumm	4.5 - 5.5
HAEMOGLOBIN <small>(SLS Hb Detection)</small>		15.7	g/dL	13 - 17
PACK CELL VOLUME <small>(Cumulative Pulse Height Detection)</small>		45.1	%	40 - 50
MEAN CORPUSCULAR VOLUME	L	82.7	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.7	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	H	34.7	g/dL	31.5 - 34.5
PLATELET COUNT <small>(Hydro Dynamic Focussing)</small>		162	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) <small>(Particle Size Distribution)</small>		42.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.4	%	11.6 - 14

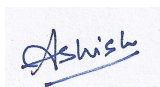
DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		58	%	40 - 80
LYMPHOCYTES		33	%	20 - 40
MONOCYTES		4	%	2 - 10
EOSINOPHILS		5	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR <small>(Westergren)</small>	H	51	mm 1st hr	0 - 10

** End of Report **

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Age / Gender	: 31 Yrs 10 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23034331	Current Ward / Bed	: /
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		Reporting Date & Time	: 14-12-2023 14:49

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(BELOW-40)@2400

BLOOD UREA <small>Urease-GLDH,Kinetic</small>		17	mg/dL	15 - 45
BUN (CALCULATED)		7.9	mg/dL	7 - 21

CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>	L	0.8	mg/dL	0.9 - 1.3
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GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		99.0	mg/dL	70 - 100
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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>		95.0	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	217	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immuno-inhibition</small>		42	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	156	mg/dL	0 - 100
S. TRIGLYCERIDES <small>(GPO - POD)</small>	H	176	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	175.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.2		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		3.7		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		35	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:
 1. Cigarette smoking.
 2. Hypertension.
 3. Family history of premature coronary heart disease.
 4. Pre-existing coronary heart disease.

LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL <small>(DPD)</small>	H	1.33	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPD)</small>	H	0.29	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	1.04	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.0	g/dL	6 - 8.1

FINAL REPORT

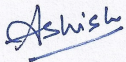
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ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.1	g/dL	
S.GLOBULIN		2.9	g/dL	2.8-3.8
A/G RATIO	L	1.41		1.5 - 2.5
ALKALINE PHOSPHATASE <small>IFCC AMP BUFFER</small>		94.0	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) <small>(IFCC)</small>		38.2	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) <small>(IFCC)</small>	H	67.3	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE <small>(IFCC)</small>	H	257.5	IU/L	11 - 50
LACTATE DEHYDROGENASE <small>(IFCC; L-P)</small>		144.5	IU/L	0 - 248
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.0	g/dL	6 - 8.1
URIC ACID <small>Uricase - Trinder</small>		5.0	mg/dL	2.6 - 7.2

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Sample Type: EDTA Whole Blood, Plasma, Serum

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

HBA1C (Turbidimetric Immuno-inhibition)

5.8

%

4.0 - 6.2

INTERPRETATION:

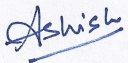
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- 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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