

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MR. MUKESH KUMAR	IPD No.	:
Age	: 45 Yrs 9 Mth	UHID	: APH000013848
Gender	: MALE	Bill No.	: APHHC230000279
Ref. Doctor	: mediwheel	Bill Date	: 11-03-2023 10:33:22
Ward	:	Room No.	:
		Print Date	: 11-03-2023 11:34:40

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and shows mild increase in parenchymal echogenicity S/O grade I fatty liver infiltration. (Liver measures 13 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 (9 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.3x 4.6 cm), Left kidney (10.9 x 4.5 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder is partially distended.

Prostate appears normal in size, outline and echotexture.

No free fluid or collection seen. No 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.SALMAN


CONSULTANT RADIOLOGIST,

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.

NON INVASIVE CARDIOLOGY

Patient Name	: MR. MUKESH KUMAR	IPD No.	:
Age	: 45 Yrs 9 Mth	UHID	: APH000013848
Gender	: MALE	Bill No.	: APHHC230000279
Ref. Doctor	: mediwheel	Bill Date	: 11-03-2023 10:33:22
Ward	:	Room No.	:
		Procedure Date	: 11-03-2023 14:58:00

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	47	(mm)	Left Atrium	34	(mm)
ESD:	31	(mm)	Aortic Root	33	(mm)
IVS Thickness (D/S)	1.2/1.1	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	1.2/1.1	(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	0.4/0.77			MR:-NIL
AV	1.19	5.66		AR:- NIL
TV	1.16	5.43		TR:- NIL
PV	0.90	3.22		PR:- NIL

IMPRESSION:-

No RWMA.
MILD CONCENTRIC LVH.
GRADE 1 LVDD.
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

FINAL REPORT

Bill No. :	APHHC230000279	Bill Date :	11-03-2023 10:33
Patient Name :	MR. MUKESH KUMAR	UHID :	APH000013848
Age / Gender :	45 Yrs 9 Mth / MALE	Patient Type :	OPD If PHC :
Ref. Consultant :	mediwheel	Ward / Bed :	/
Sample ID :	APH23005917	Current Ward / Bed :	/
		Receiving Date & Time :	12-03-2023 13:00
		Reporting Date & Time :	12-03-2023 15:22

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(ABOVE 40)@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)		1.025		1.005 - 1.030

MICROSCOPIC EXAMINATION

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

**** 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.	: APHHC230000279	Bill Date	: 11-03-2023 10:33
Patient Name	: MR. MUKESH KUMAR	UHID	: APH000013848
Age / Gender	: 45 Yrs 9 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: mediwheel	Ward / Bed	: /
Sample ID	: APH23005831	Current Ward / Bed	: /
		Receiving Date & Time	: 11-03-2023 12:01
		Reporting Date & Time	: 12-03-2023 07:51

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(ABOVE 40)@2550

BLOOD GROUP (ABO)	"A"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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

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FINAL REPORT

Bill No.	: API111C230000279	Bill Date	: 11/03/2023 16:33
Patient Name	: MR. MUKESH KUMAR	UHID	: API11666613848
Age / Gender	: 45 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: mediwheel	Ward / Bed	: /
Sample ID	: API123006788	Current Ward / Bed	: /
		Receiving Date & Time	: 11/03/2023 11:46
		Reporting Date & Time	: 11/03/2023 17:17

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(ABOVE 40)@2650
CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		8.4	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focusing)	L	4.2	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS In Detection)	L	12.6	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	38.4	%	40 - 50
MEAN CORPUSCULAR VOLUME		90.7	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		29.9	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.9	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focusing)		161	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	50.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.6	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		64	%	40 - 80
LYMPHOCYTES		30	%	20 - 40
MONOCYTES		4	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	78	mm 1st hr	0 - 10

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

Bill No.	: APHHC230000279	Bill Date	: 11-03-2023 10:33
Patient Name	: MR. MUKESH KUMAR	UHID	: APH000013848
Age / Gender	: 45 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: mediwheel	Ward / Bed	: /
Sample ID	: APH23005790	Current Ward / Bed	: /
		Receiving Date & Time	: 11-03-2023 11:40
		Reporting Date & Time	: 11-03-2023 17:00

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(ABOVE 40)@2550

BLOOD UREA (UREA) (CALCULATED)		26	mg/dL	15 - 45
BUN (CALCULATED)		12.1	mg/dL	7 - 21
CREATININE-SERUM (SERUM) (Jaffe's Method)		0.9	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (LA Newhouse)		103.0	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 (CHOL) (CALC)		155	mg/dL	0 - 160
HDL CHOLESTROL (HDL) (ENZYME IMMUNOASSAY)	L	25	mg/dL	>40
CHOLESTROL-LDL DIRECT (ENZYME SELECTIVE PROTECTION)	H	114	mg/dL	0 - 100
S.TRIGLYCERIDES (TG) (CALC)	H	208	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	130.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		6.2		1/2 Average 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		4.6		1/2 Average 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	H	42	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 (BIL) (DPO)	H	1.15	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (BIL) (DPO)		0.20	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	H	0.95	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (SPT) (Suret)		7.3	g/dL	6 - 8.1
ALBUMIN-SERUM (ALB) (Dye Binding-Bromocresol Green)		4.2	g/dL	
S.GLOBULIN		3.1	g/dL	2.8-3.8
A/G RATIO	L	1.35		1.5 - 2.5

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Ref. Consultant	: mediwheel	Ward / Bed	: /
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ALKALINE PHOSPHATASE (IFCC AMP BUFFER)	L	46.3	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		22.1	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)		27.6	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		26.9	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC, L.P)		135.3	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		7.3	g/dL	6 - 8.1
*URIC ACID (Uricase - Trinder)		5.8	mg/dL	2.6 - 7.2

**** End of Report ****

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Sample Type: EDTA Whole Blood, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550

HbA1c (Glycated Hemoglobin)	5.0	%	4.0 - 6.2
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INTERPRETATION:

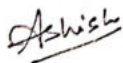
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

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 ****
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FINAL REPORT

Bill No.	: APHHC230000279	Bill Date	: 11-03-2023 10:33
Patient Name	: MR. MUKESH KUMAR	UHID	: APH000013848
Age / Gender	: 45 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: mediwheel	Ward / Bed	: /
Sample ID	: APH23005791	Current Ward / Bed	: /
		Receiving Date & Time	: 11-03-2023 11:40
		Reporting Date & Time	: 12-03-2023 00:03

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
<i>Sample Type: Serum</i>				
MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(ABOVE 40)@2550				
PROSTATIC SPECIFIC ANTIGEN(TOTAL) (ELFA)		0.37	ng/mL	0 - 4

Note:

TPSA as a Tumor marker is used as an additional test for prognosis and monitoring of therapy for patients with diagnosed malignant tumors. It may offer a diagnostic value for screening patients with suspected malignancies, as high values may be experienced in situations like benign prostatic hyperplasia, prostatitis, bladder catheterisation, urinary retention, endoscopic examination. Value in between 4-10ng/ml may be an indication of Benign Prostate Hyperplasia or prostate Carcinoma, values greater than 10ng/ml may indicate high risk of Carcinoma.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Age / Gender	: 45 Yrs 9 Mth / MALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: mediwheel	Ward / Bed	: /
Sample ID	: APH23005791	Current Ward / Bed	: /
		Receiving Date & Time	: 11-03-2023 11:40
		Reporting Date & Time	: 12-03-2023 00:03

Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(ABOVE 40)@2550

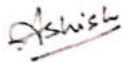
THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.70	pg/mL	2.0-4.4
FREE -THYRONINE (FT4) (ECLIA)	1.21	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	1.56	mIU/L	0.27-4.20

**** End of Report ****

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