

FINAL REPORT

Bill No.	: APHHC230000220	Bill Date	: 25-02-2023 09:55
Patient Name	: MRS. MADHUSMITA BEHERA	UHID	: APH000013667
Age / Gender	: 30 Yrs / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward	:
Sample ID	: APH23004811	Current Bed	:
		Reporting Date & Time	: 27-02-2023 17:14
		Receiving Date & Time	: 27/02/2023 17:07

CYTOPATHOLOGY REPORTING

Cytopathology No:C-24/23

Material Received: PAP smear. Two unstained slide received.

Reporting System: BETHESDA 2014

Material Adequacy: Satisfactory for evaluation.
Endocervical/Transformation zone component present.

Microscopic Examination: Mostly Superficial cells, Intermediate cells & few Para-basal cells and basal cells.

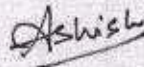
Non-Neoplastic Findings: Dense neutrophilic infiltrates.

Specific Infections: Nil.

Epithelial cell abnormality (Squamous cells): Nil
Squamous cell abnormality (Glandular cells): Nil.

Impression: Inflammatory smear. Negative for Intraepithelial lesion or Malignancy.(NILM).

*** End of Report ***



DR. ASHISH RANJAN SINGH
MBBS,MD
CONSULTANT

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Age / Gender	: 30 Yrs / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004586	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 12:26
		Reporting Date & Time	: 25-02-2023 16:11

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)		8.0	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.6	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	11.7	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	35.5	%	36 - 46
MEAN CORPUSCULAR VOLUME	L	77.7	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	25.7	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.1	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		158	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		43.1	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.4	%	11.6 - 14

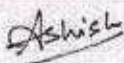
DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		67	%	40 - 80
LYMPHOCYTES		24	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		3	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westgren)	H	47	mm 1st hr	0 - 20

**** End of Report ****

IMPORTANT INSTRUCTIONS

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



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Age / Gender	: 30 Yrs / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004589	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 12:26
		Reporting Date & Time	: 25-02-2023 19:55

SEROLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

T3 TOTAL (ELFA)		1.61	nmol/l	0.95-2.5
T4 TOTAL (ELFA)		102.85	nmol/l	60-120
THYROID STIMULATING HORMONE (ELFA)	H	6.85	µIU/mL	0.25-5

TESTS	RESULTS	EXPECTED VALUES
THYROID PROFILE TOTAL (T3,T4,TSH TOTAL)		
Thyroid-Stimulating Hormone (TSH)		0.25-5µIU/ml
Serum Triiodothyronine (T3 TOTAL)		0.95-2.5nmol/l
Serum Thyroxine (T4 TOTAL)		60-120nmol/l

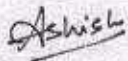
Wallach's reference range for Thyroid for neonates and children

Age	TSH (µIU/ml)	TT4(nmol/l)	TT3(nmol/l)
1-4 days	1-39	142-277	1.5-11.4
1-4 wks	1.7-9.1	106-221	1.6-5.3
1-12 mon	0.8-8.2	76-210	1.6-3.8
1-5 yrs	0.7-5.7	94-193	1.6-4.1
6-10 yrs	0.7-5.7	82-171	1.4-3.7
11-15 yrs	0.7-5.7	71-151	1.3-3.3
15-18 yrs	0.7-5.7	54-152	1.2-3.2

**** End of Report ****

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Sample ID	: APH23004589	Current Ward / Bed	: /
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MBBS,MD
CONSULTANT

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Age / Gender	: 30 Yrs / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004675	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 20:03
		Reporting Date & Time	: 25-02-2023 20:29

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550
STOOL ROUTINE EXAMINATION
PHYSICAL EXAMINATION

COLOUR	PALE YELLOW
CONSISTENCY	SEMI SOLID
BLOOD	ABSENT
MUCOUS	ABSENT

MICROSCOPIC EXAMINATION

PUS CELLS	1-2
RBC's	0-1
TROPHOZOITES	NOT DETECTED
CYSTS	NOT DETECTED
OVA	NOT DETECTED

URINE, ROUTINE EXAMINATION
PHYSICAL EXAMINATION

QUANTITY	20 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)	1.015		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		

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004675	Current Ward / Bed	: /
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Ashish

DR. ASHISH RANJAN SINGH
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Age / Gender	: 30 Yrs / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004587	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 12:26
		Reporting Date & Time	: 26-02-2023 17:53

BLOOD BANK REPORTING

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

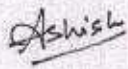
MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD GROUP (ABO)	"O"
RH TYPE	POSITIVE

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Age / Gender	: 30 Yrs / FEMALE	Patient Type	: OPD
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23004648	Current Ward / Bed	: /
		Receiving Date & Time	: 25-02-2023 17:38
		Reporting Date & Time	: 25-02-2023 18:46

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>		22	mg/dL	15 - 45
BUN (CALCULATED)		10.3	mg/dL	7 - 21
CREATININE-SERUM <small>(Modified Jaffe's Kinetic)</small>		0.6	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		79.0	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>		81.0	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>		154	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Inhibition</small>		45	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>		99	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		78	mg/dL	0 - 160
NON-HDL CHOLESTROL		109.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.4		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		2.2		1/2 Average 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		16	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>		0.61	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.10	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.51	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		6.9	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.3	g/dL	

Patient Details SPECIALITY CARD Date: 25-Feb-23

Time: 1:49:24 PM

Name: MRS.MADHUSMITA BEHERA ID: APH000013667

Age: 30 y

Sex: F

Height: 165 cms.

Weight: 57 Kg.

Clinical History:

Medications:

Test Details

Protocol: Bruce

Pr.MHR: 190 bpm

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

Total Exec. Time: 6 m 41 s

Max. HR: 172 (91% of Pr.MHR)bpm

Max. Mets: 10.20

Max. BP: 140 / 90 mmHg

Max. BP x HR: 24080 mmHg/min

Min. BP x HR: 7040 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 : 17	1.0	0	0	94	120 / 80	-0.25 aVR	1.27 V3
Standing	0 : 11	1.0	0	0	92	120 / 80	-0.25 III	1.27 V3
Hyperventilation	0 : 21	1.0	0	0	88	120 / 80	-0.25 III	1.69 V6
1	3 : 0	4.6	2.7	10	131	130 / 80	-1.01 V6	4.64 V6
2	3 : 0	7.0	4	12	157	140 / 90	-1.27 V6	5.49 V3
Peak Ex	0 : 41	10.2	5.4	14	172	140 / 90	-1.27 III	5.06 V6
Recovery(1)	2 : 0	1.8	1.6	0	102	140 / 90	-2.28 V6	5.49 V3
Recovery(2)	2 : 0	1.0	0	0	103	130 / 80	-0.51 III	2.53 V3
Recovery(3)	0 : 48	1.0	0	0	99	120 / 80	-1.01 V2	1.27 V3
Recovery(4)	0 : 12	1.0	0	0	115	120 / 80	-2.03 aVR	2.11 III

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.ADITYA KUMAR

(Summary Report edited by user)

Doctor: Dr.ADITYA KUMAR

Schiller CS-20 V 1.9

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



FINAL REPORT

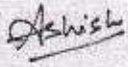
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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
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S.GLOBULIN	L	2.6	g/dL	2.8-3.8
A/G RATIO		1.65		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		78.8	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		37.0	IU/L	10 - 42
ALANINE AMINO TRANSFERASE (SGPT) (IFCC)		37.8	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		7.2	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC L-P)		163.3	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		6.9	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		4.1	mg/dL	2.6 - 7.2

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)

INTERPRETATION:

5.0

%

4.0 - 6.2

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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Ashish

DR. ASHISH RANJAN SINGH
MBBS, MD
CONSULTANT

NON INVASIVE CARDIOLOGY

Patient Name	: MRS. MADHUSMITA BEHERA	IPD No.	:
Age	: 30 Yrs	UHID	: APH000013667
Gender	: FEMALE	Bill No.	: APHHC230000220
Ref. Doctor	: MEDIWHEEL	Bill Date	: 25-02-2023 09:55:39
Ward	:	Room No.	:
		Procedure Date	: 25-02-2023 17:35:48

ECHOCARDIOGRAPHY COLOUR DOPPLER REPORT

M MODE STUDY (MEASUREMENTS)

Left Ventricle:-

EDD:	57	(mm)	Left Atrium	33	(mm)
ESD:	35	(mm)	Aortic Root	37	(mm)
IVS Thickness (D/S)	0.9/1.6	(mm)	Right Ventricle (TAPSE)	21	(mm)
LVPW Thickness	0.9/1.3	(mm)	Pericardium		NORMAL
LVEF	68	(%)			

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	0.62/0.53					MR:-NIL
AV	1.19	5.66				AR:- NIL
TV	0.96	3.42				TR:- NIL
PV	1.04	4.33				PR:- NIL

IMPRESSION:-

No RWMA.
Normal Cardiac Chamber Dimensions.
Normal LV/RV Systolic Function, LVEF-68%.
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. MADHUSMITA BEHERA	IPD No.	:
Age	: 30 Yrs	UHID	: APH000013667
Gender	: FEMALE	Bill No.	: APHHC230000220
Ref. Doctor	: MEDIWHEEL	Bill Date	: 25-02-2023 09:55:39
Ward	:	Room No.	:
		Print Date	: 25-02-2023 17:33:35

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 14 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 (8.2 cm) and echotexture. Both kidneys are normal in size and echotexture (Right kidney (10.63 x 3.4 cm), Left kidney (10.5 x 3.4 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen. Uterus is anteverted and appears normal in size and echotexture. No focal lesion seen. Endometrial echo is central and normal in thickness Cervix and vagina are unremarkable. Both ovaries are normal in size and echotexture. No free fluid or collection seen. No pleural effusion seen. No significant lymphadenopathy seen. No dilated bowel loop seen.

IMPRESSION:

No obvious significant abnormality detected.

Please correlate clinically.

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

Prepare By.
IMAGING.PT

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. MADHUSMITA BEHERA	IPD No.	:	
Age	: 30 Yrs	UHID	:	APH000013667
Gender	: FEMALE	Bill No.	:	APHHC230000220
Ref. Doctor	: MEDIWHEEL	Bill Date	:	25-02-2023 09:55:39
Ward	:	Room No.	:	
		Print Date	:	26-02-2023 12:04:35

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.
IMAGING.PT

CONSULTANT RADIOLOGIST,

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