

**DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING**

Report : ULTRASOUND

Patient Name	: MRS. JANAKI KUMARI	IPD No.	:	
Age	: 51 Yrs 10 Mth	UHID	:	APH000014332
Gender	: FEMALE	Bill No.	:	APHHC230000434
Ref. Doctor	: MEDIWHEEL	Bill Date	:	08-04-2023 08:43:31
Ward	:	Room No.	:	
		Print Date	:	08-04-2023 11:18:54

**BOTH BREASTS:**

High resolution ultrasound examination of both breasts was performed with 10 to 12-MHz linear probe.  
Both breasts parenchyma appears normal. No focal lesion or collection seen.  
Both the nipples are normal in position with normal posterior shadowing.  
No significant axillary lymphadenopathy seen.  
Skin and subcutaneous tissues are unremarkable on both sides.

**IMPRESSION: Normal study.**

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	: MRS. JANAKI KUMARI	IPD No.	:	
Age	: 51 Yrs 10 Mth	UHID	:	APH000014332
Gender	: FEMALE	Bill No.	:	APHHC230000434
Ref. Doctor	: MEDIWHEEL	Bill Date	:	08-04-2023 08:43:31
Ward	:	Room No.	:	
		Print Date	:	08-04-2023 10:31:43

**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.....

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Report : ULTRASOUND

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Age	: 51 Yrs 10 Mth	UHID	: APH000014332
Gender	: FEMALE	Bill No.	: APHHC230000434
Ref. Doctor	: MEDIWHEEL	Bill Date	: 08-04-2023 08:43:31
Ward	:	Room No.	:
		Print Date	: 08-04-2023 11:05:05

**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 12.0 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 (9.6 cm), Left kidney (9.8 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 6.5 x 5.0 x 4.0 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 (4.0 mm).

Both ovaries are normal in size and echotexture. Right ovary measures 2.2 x 0.9 cm, left ovary measures 2.3 x 1.6 cm.

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.  
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**FINAL REPORT**

Bill No.	: APHHC230000434	Bill Date	: 08-04-2023 08:43
Patient Name	: MRS. JANAKI KUMARI	UHID	: APH000014332
Age / Gender	: 51 Yrs 11 Mth / FEMALE	Patient Type	: OPD <span style="float: right;">If PHC :</span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23008571	Current Ward / Bed	: /
		Receiving Date & Time	: 08-04-2023 11:20
		Reporting Date & Time	: 08-04-2023 14:42

**HAEMATOLOGY REPORTING**

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

MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE( AVOVE-40)@2800

**CBC -1 (COMPLETE BLOOD COUNT)**

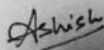
TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.0	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.6	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	11.8	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	35.9	%	36 - 46
MEAN CORPUSCULAR VOLUME	L	77.6	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	25.5	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.9	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		218	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		45.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	16.5	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**

NEUTROPHILS		62	%	40 - 80
LYMPHOCYTES		30	%	20 - 40
MONOCYTES		5	%	2 - 10
EOSINOPHILS		3	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	50	mm 1st hr	0 - 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.	: APHHC230000434	Bill Date	: 08-04-2023 08:43
Patient Name	: MRS. JANAKI KUMARI	UHID	: APH00014332
Age / Gender	: 51 Yrs 11 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23008575	Current Ward / Bed	: /
		Receiving Date & Time	: 08-04-2023 11:20
		Reporting Date & Time	: 08-04-2023 16:47

**SEROLOGY REPORTING**

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

MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE( AVOVE-40)@2800

**THYROID PROFILE (FT3+FT4+TSH)**

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.12	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		0.95	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	<b>H</b>	<b>6.72</b>	mIU/L	0.27-4.20

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

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*Ashish*

**DR. ASHISH RANJAN SINGH**  
MBBS,MD  
CONSULTANT

## FINAL REPORT

Bill No.	: APHHC230000434	Bill Date	: 08-04-2023 08:43
Patient Name	: MRS. JANAKI KUMARI	UHID	: APH000014332
Age / Gender	: 51 Yrs 11 Mth / FEMALE	Patient Type	: OPD <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23008572	Current Ward / Bed	: /
		Receiving Date & Time	: 08-04-2023 11:20
		Reporting Date & Time	: 08-04-2023 16:54

## BLOOD BANK REPORTING

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

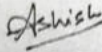
MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE( AVOVE-40)@2800

BLOOD GROUP (ABO)	"B"
RH TYPE	POSITIVE

\*\* End of Report \*\*

## IMPORTANT INSTRUCTIONS

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**FINAL REPORT**

Bill No.	: APHHC230000434	Bill Date	: 08-04-2023 08:43
Patient Name	: MRS. JANAKI KUMARI	UHID	: APH000014332
Age / Gender	: 51 Yrs 11 Mth / FEMALE	Patient Type	: OPD <span style="float:right">If PHC :</span>
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23008605	Current Ward / Bed	: /
		Receiving Date & Time	: 08-04-2023 12:45
		Reporting Date & Time	: 08-04-2023 17:31

**CLINICAL PATH REPORTING**

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

MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE( ABOVE-40)@2800

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY		20		
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)		1.030		1.005 - 1.030

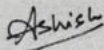
MICROSCOPIC EXAMINATION

LEUCOCYTES		1-2	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		2-4		
CASTS		Absent		
CRYSTALS		Absent		
OTHERS		Budding yeast seen (Few)		
URINE-SUGAR		NEGATIVE		

\*\* End of Report \*\*

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH23008623	Current Ward / Bed	: /
		Receiving Date & Time	: 08-04-2023 14:12
		Reporting Date & Time	: 08-04-2023 15:40

**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( AVOVE-40)@2800**

BLOOD UREA <small>Urease-GLDH/Kinetic</small>		37	mg/dL	15 - 45
BUN <small>(CALCULATED)</small>		17.3	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>		100.0	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>		104.0	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	169	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immuno-inhibition</small>		49	mg/dL	>45
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>	H	105	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		52	mg/dL	0 - 160
NON-HDL CHOLESTROL		120.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.4		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		2.1		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		10	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>		0.64	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.15	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.49	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Buret)</small>		6.7	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.0	g/dL	



**FINAL REPORT**

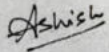
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S.GLOBULIN	L	2.7	g/dL	2.8-3.8
A/G RATIO	L	1.48		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC, AMP BUFFER)		56.1	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		14.5	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)		13.1	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		10.0	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC; L-P)		204.6	IU/L	0 - 248
S.PROTEIN-TOTAL (Buret)		6.7	g/dL	6 - 8.1
URIC ACID (Uricase - Trinder)		2.6	mg/dL	2.6 - 7.2

**\*\* End of Report \*\***

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Sample Type: EDTA Whole Blood, Plasma, Serum

**MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE( AVOVE-40)@2800**

HBA1C (Turbidimetric Immuno-inhibition)	H	6.6	%	4.0 - 6.2
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**INTERPRETATION:**

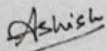
HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- 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 \*\***

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