DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	:	MR. AMARENDRA KUMAR	IPD No.	:	
Age	:	52 Yrs	UHID	:	APH000020814
Gender	:	MALE	Bill No.	:	APHHC240000303
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	26-02-2024 09:00:02
Ward	:		Room No.	:	
			Print Date	:	28-02-2024 11:48:52

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.SALMAN 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. AMARENDRA KUMAR	1	IPD No.	:	
Age	:	52 Yrs	I	UHID	:	APH000020814
Gender	:	MALE	1	Bill No.	:	APHHC240000303
Ref. Doctor	:	MEDIWHEEL		Bill Date	:	26-02-2024 09:00:02
Ward	:		1	Room No.	:	
				Print Date	:	26-02-2024 11:37:13

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 11.2 cm)

No focal lesion seen. Intrahepatic biliary radicals are not dilated.

Portal vein is normal in calibre.

Gall bladder is well distended and show tiny mobile echogenic structure showing no posterior shadowing and measuring ~ 5.5 mm seen in lumen suggesting likely organized sludge. Wall thickness is normal.

CBD is normal in calibre (4.5 mm).

Pancreas is normal in size and echotexture.

Spleen is normal in size (9.3 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.5 cm), Left kidney (10.3 cm). Corticomedullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal. (Pre void Vol. 697.1 cc, Post void Vol. 5.7 cc)

Prostate appears normal in size (Vol. 12.8 cc), outline and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

Please correlate clinically.....

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

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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.

Bill No.	:	APHHC240000303	Bill Date	26-02-2024 09:00			
Patient Name	:	MR. AMARENDRA KUMAR	UHID	APH000020814			
Age / Gender	:	52 Yrs / MALE	Patient Type	OPD	If PHC :		
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	:	APH24006740	Current Ward / Bed	1			
	:		Receiving Date & Time	26-02-2024 16:42			
			Reporting Date & Time	26-02-2024 18:15			

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	20 mL				
[COLOUR	Pale yellow		Pale Yellow		
[TURBIDITY	Clear				

CHEMICAL EXAMINATION

PH (Double pH indicator method)	6.5	5.0 - 8.5
PROTEINS (Protein-error-of-indicators)	+	Negative
SUGAR (GOD POD Method)	Negative	Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.010	1 005 - 1 030

MICROSCOPIC EXAMINATION

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

** End of Report **

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

Ashish

Bill No.	:	APHHC240000303	Bill Date	:	26-02-2024 09:00		
Patient Name	:	MR. AMARENDRA KUMAR	UHID	:	APH000020814		
Age / Gender	:	52 Yrs / MALE	Patient Type	:	OPD	If PHC :	
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	:	1		
Sample ID	:	APH24006650	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	26-02-2024 10:03		
			Reporting Date & Time	:	26-02-2024 22:13		

BLOOD BANK REPORTING

Test (Methodology) Flag Result UOM Biological Reference Interval									
ample Type: EDTA Whole Blood									
MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550									
BLOOD GROUP (ABO)		"O"							

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

Ashish

Bill No.	:	APHHC240000303	Bill Date	:	26-02-2024 09:00	
Patient Name	:	MR. AMARENDRA KUMAR	UHID	:	APH000020814	
Age / Gender	:	52 Yrs / MALE	Patient Type	:	OPD	If PHC :
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	:	1	
Sample ID	:	APH24006652	Current Ward / Bed	:	1	
	:		Receiving Date & Time	:	26-02-2024 10:03	
			Reporting Date & Time	:	26-02-2024 18:13	

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
				Interval

Sample Type: EDTA Whole Blood, Serum

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

BLOOD UREA Urease-GLDH, Kinetic		22	mg/dL	15 - 45
BUN (calculated)		10.3	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe s Kinetic)	L	0.8	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)	Н	256.0	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 (CHO-POD)	Н	220	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition		49	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	147	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)	Н	200	mg/dL	0 - 160
NON-HDL CHOLESTROL	н	171.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.5		1∕₂Average 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		3.0		1∕₂Average 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	н	40	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)

A/G RATIO	L	1.33		1.5 - 2.5
S.GLOBULIN		3.0	g/dL	2.8-3.8
ALBUMIN-SERUM (Dye Binding - Bromocresol Green)		4.0	g/dL	
S.PROTEIN-TOTAL (Biuret)		7.0	g/dL	6 - 8.1
BILIRUBIN-INDIRECT		0.47	mg/dL	0.2 - 0.8
BILIRUBIN-DIRECT (DPD)		0.11	mg/dL	0 - 0.2
BILIRUBIN-TOTAL (DPD)		0.58	mg/dL	0.2 - 1.0

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ge / Gender	:	52 Yrs / MALE		Patient Type		:	OPD If PHC	:
ef. Consultant	:	MEDIWHEEL		Ward / Bed		:	1	
ample ID	:	APH24006652		Current Ward / Bed		:	1	
	:			Receiving Date & Time		:	26-02-2024 10:03	
				Reporting Date & Time		:	26-02-2024 18:13	
ALKALINE PHO	DSF	PHATASE IFCC AMP BUFFER	10	2.6 IL	J/L		53 - 128	
ASPARTATE A	MI	NO TRANSFERASE (SGOT) (IFCC)	26	3 IL	J/L		10 - 42	
ALANINE AMI	١O	TRANSFERASE(SGPT) (IFCC)	21	2 IL	J/L		10 - 40	
GAMMA-GLUT	AM	YLTRANSPEPTIDASE (IFCC)	44	5 IL	J/L		11 - 50	
LACTATE DEH	YD	ROGENASE (IFCC; L-P)	22	4.7 IL	J/L		0 - 248	
	<u> </u>	-	7.0		/dL		6 - 8.1	
S.PROTEIN-TO	ΠF	L (Biuret)	/.u	y/	uL		0 - 0.1	
	ise -	Trinder	4.9	m	g/dL	L	26-72	

** End of Report **

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

Ashish

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Patient Name	:	MR. AMARENDRA KUMAR	UHID	:	APH000020814	
Age / Gender	:	52 Yrs / MALE	Patient Type	:	OPD	If PHC :
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	:	1	· · ·
Sample ID	:	APH24006652	Current Ward / Bed	:	1	
	:		Receiving Date & Time	:	26-02-2024 10:03	
			Reporting Date & Time	:	26-02-2024 18:13	

Sample Type: EDTA Whole Blood, Serum

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

	HBA1C (Turbidimetric Immuno-inhibition)	Н	12.3	%	4.0 - 6.2
INTE	RPRETATION:				

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.

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

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Patient Name	:	MR. AMARENDRA KUMAR	UHID		:	APH000020814		
Age / Gender	:	52 Yrs / MALE	Patient Type		:	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed		:	1		
Sample ID	:	APH24006653	Current Ward / Bed		:	1		
	:		Receiving Date & Tim	е	:	26-02-2024 10:03		
			Reporting Date & Tim	е	:	26-02-2024 22:14		

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval					
Sample Type: Serum		-	-						
MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550									

PROSTATIC SPECIFIC ANTIGEN(TOTAL) (ELFA)	0.52	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 CL - Critical Low, CH - Critical High, H - High, L - Low

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Patient Name	:	MR. AMARENDRA KUMAR	UHID		APH000020814		
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Ref. Consultant	:	MEDIWHEEL	Ward / Bed		: /		
Sample ID	:	APH24006653	Current Ward / Bed		. /		
	:		Receiving Date & Time		26-02-2024 10:03	}	
			Reporting Date & Time	•	26-02-2024 22:14	ł	

Sample Type: Serum

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

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.87	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.03	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	3.11	mIU/L	0.27-4.20

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Patient Name	:	MR. AMARENDRA KUMAR	UHID	:	APH000020814	
Age / Gender	:	52 Yrs / MALE	Patient Type	:	OPD	If PHC :
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	:	1	
Sample ID	:	APH24006649	Current Ward / Bed	:	1	
	:		Receiving Date & Time	:	26-02-2024 10:03	
			Reporting Date & Time	:	26-02-2024 16:35	

HAEMATOLOGY REPORTING

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

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

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		4.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		5.3	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		14.9	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		42.9	%	40 - 50
MEAN CORPUSCULAR VOLUME	L	80.9	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.1	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	Η	34.8	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		150	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		40.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		14.0	%	11.6 14

DIFFERENTIAL LEUCOCYTE COUNT

BASOPHILS		0	%	0 - 1
EOSINOPHILS	Н	11	%	1 - 5
MONOCYTES		7	%	2 - 10
LYMPHOCYTES		32	%	20 - 40
NEUTROPHILS		50	%	40 - 80

** End of Report **

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