

**DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING**

Report : XRAY

Patient Name	: MR. VIKASH KUMAR	IPD No.	:	
Age	: 30 Yrs 10 Mth	UHID	:	APH000020780
Gender	: MALE	Bill No.	:	APHHC240000300
Ref. Doctor	: MEDIWHEEL	Bill Date	:	24-02-2024 13:02:47
Ward	:	Room No.	:	
		Print Date	:	27-02-2024 12:04:37

**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.

## FINAL REPORT

Bill No.	: APHHC240000300	Bill Date	: 24-02-2024 13:02
Patient Name	: MR. VIKASH KUMAR	UHID	: APH000020780
Age / Gender	: 30 Yrs 10 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH24007209	Current Ward / Bed	: /
		Receiving Date & Time	: 29-02-2024 18:10
		Reporting Date & Time	: 29-02-2024 18:55

## 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)		4.33	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.49	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	H	5.01	mIU/L	0.27-4.20

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

### IMPORTANT INSTRUCTIONS

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

*Ashish*

DR. ASHISH RANJAN SINGH •  
MBBS, MD  
CONSULTANT

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**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>		22	mg/dL	15 - 45
BUN (CALCULATED)		10.3	mg/dL	7 - 21

CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>		0.9	mg/dL	0.9 - 1.3
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GLUCOSE-PLASMA (FASTING) <small>(UV Hexokinase)</small>		82.0	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>		96.0	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>		114	mg/dL	0 - 160
HDL CHOLESTROL <small>Enzymatic Immunoinhibition</small>	L	39	mg/dL	>40
CHOLESTROL-LDL DIRECT <small>Enzymatic Selective Protection</small>		68	mg/dL	0 - 100
S.TRIGLYCERIDES <small>(GPO - POD)</small>		58	mg/dL	0 - 160
NON-HDL CHOLESTROL		75.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		2.9		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		1.7		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		12	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>		0.58	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT <small>(DPO)</small>		0.14	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.44	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.1	g/dL	6 - 8.1
ALBUMIN-SERUM <small>(Dye Binding-Bromocresol Green)</small>		4.2	g/dL	

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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
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S.GLOBULIN		2.9	g/dL	2.8-3.8
A/G RATIO	<b>L</b>	<b>1.45</b>		1.5 - 2.5
ALKALINE PHOSPHATASE <small>IFCC AMP BUFFER</small>		75.8	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) <small>(IFCC)</small>		25.7	IU/L	10 - 42
ALANINE AMINO TRANSFERASE(SGPT) <small>(IFCC)</small>		27.3	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTIDASE <small>(IFCC)</small>		13.9	IU/L	11 - 50
LACTATE DEHYDROGENASE <small>(IFCC; L-P)</small>		161.1	IU/L	0 - 248
S.PROTEIN-TOTAL <small>(Biuret)</small>		7.1	g/dL	6 - 8.1
URIC ACID <small>Uricase - Trinder</small>		3.8	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\_MALE(BELOW-40)@2400**

HBA1C (Turbidimetric Immuno-inhibition)	5.7	%	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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Ref. Consultant	: MEDIWHEEL	Ward / Bed	: /
Sample ID	: APH24007204	Current Ward / Bed	: /
		Receiving Date & Time	: 29-02-2024 18:10
		Reporting Date & Time	: 29-02-2024 18:56

**CLINICAL PATH REPORTING**

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

MEDIWHEEL FULL BODY HEALTH CHECKUP\_MALE(BELOW-40)@2400

**URINE, ROUTINE EXAMINATION**

**PHYSICAL EXAMINATION**

QUANTITY		25 mL		
COLOUR		Pale yellow		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)		1.015		1.005 - 1.030

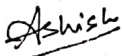
**MICROSCOPIC EXAMINATION**

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

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

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**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 (Flow Cytometry)		7.4	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.6	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		14.5	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		43.5	%	40 - 50
MEAN CORPUSCULAR VOLUME		93.5	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		31.3	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.4	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		243	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	47.1	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.1	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**

NEUTROPHILS		66	%	40 - 80
LYMPHOCYTES		24	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		4	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	24	mm 1st hr	0 - 10

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

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