

Bill No.	:	APHHC240001759	Bi	II Date	T	28-09-2024 10:24		
Patient Name	:	MR. RISHI RAJ ANAND	Uŀ	HID	F	APH000029170		
Age / Gender		39 Yrs 7 Mth / MALE	Pa	tient Type	F	OPD	If PHC	:
Ref. Consultant		MEDIWHEEL	W	ard / Bed	F	1		
Sample ID	:	APH24045646	Cı	ırrent Ward / Bed	1	1		
	:		Re	eceiving Date & Time	1	28-09-2024 13:00		
	П		Re	porting Date & Time	F	28-09-2024 14:18		

BIOCHEMISTRY REPORTING

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

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

BLOOD UREA Urease-GLDH,Kinetic		18	mg/dL	15 - 45
BUN (CALCULATED)		8.4	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.7	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		95.0	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) (UV Hexokinase)		88.0	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 (CHO-POD)	Н	175	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	38	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	128	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		87	mg/dL	0 - 160
NON-HDL CHOLESTROL	Н	137.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.6		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		3.4		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		17	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)

BILIRUBIN-TOTAL (DPD)	0.89	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	0.20	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	0.69	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	7.0	g/dL	6 - 8.1
ALBUMIN-SERUM (Dve Binding-Bromocresol Green)	4.9	g/dL	3.5 - 5.2



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tef. Consultant	:	MEDIWHEEL			Ward / Bed		:	1	
ample ID	:	APH24045646			Current Ward / Bed		:	1	
	:		Receiving Date & Time		1e	:	28-09-2024 13:00		
	П		Reporting Date & Time			1e	:	28-09-2024 14:18	
S.GLOBULIN			L	2.	1	g/dL		2.8-3.8	
A/G RATIO				2.3	33			1.5 - 2.5	
ALKALINE PHO	SF	PHATASE IFCC AMP BUFFER		67	.2	IU/L		53 - 128	
ASPARTATE AN	MΙΙ	NO TRANSFERASE (SGOT) (IFCC)		30	.8	IU/L		10 - 42	
ALANINE AMIN	10	TRANSFERASE(SGPT) (IFCC)		36	.5	IU/L		10 - 40	
GAMMA-GLUTA	٩M	YLTRANSPEPTIDASE (IFCC)		39	.6	IU/L		11 - 50	
LACTATE DEH	ΥD	ROGENASE (IFCC; L-P)		16	9.1	IU/L		0 - 248	
S.PROTEIN-TO	TΑ	L (Biuret)		7.0)	g/dL		6 - 8.1	
URIC ACID Urica	ce -	Trinder		6.0)	mg/c	ıL	2.6 - 7.2	

** End of Report **

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

Laboratory test results are to be clinically correlated.
Storage and discard of Specimen shall be as per AIMS specimen retention policy.

Test results are not valid for Medico - Legal purposes.

DR. ASHISH RANJAN SINGH



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Patient Name	F	MR. RISHI RAJ ANAND	UHID	Г	APH000029170		
Age / Gender	F	39 Yrs 7 Mth / MALE	Patient Type	Г	OPD	If PHC :	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	Г	1		
Sample ID	:	APH24045646	Current Ward / Bed	1	1		
	1		Receiving Date & Time	:	28-09-2024 13:00		
			Reporting Date & Time	1	28-09-2024 14:18		

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

INTERPRETATION:

HbA1c %	Degree of Glucose Control						
>8%	>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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Age / Gender	:	39 Yrs 7 Mth / MALE	Patient Type	1	OPD	If PHC :	
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	:	APH24045590	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	28-09-2024 10:54		
			Reporting Date & Time	:	28-09-2024 13:06		

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
				Interval

Sample Type: Urine

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY	25 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)	1.015	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						

** End of Report **

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Patient Name	F	MR. RISHI RAJ ANAND	UHID	F	APH000029170		
Age / Gender	F	39 Yrs 7 Mth / MALE	Patient Type	F	OPD	If PHC :	
Ref. Consultant		MEDIWHEEL	Ward / Bed	1	1		
Sample ID		APH24045580	Current Ward / Bed	1	1		
			Receiving Date & Time	1	28-09-2024 10:26		
	Г		Reporting Date & Time	1	28-09-2024 11:57		

BLOOD BANK REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

BLOOD GROUP (ABO)	"O"
RH TYPE	POSITIVE

** End of Report **

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DR. ASHISH RANJAN SINGH



Bill No.	:	APHHC240001759	Bill Date	:	28-09-2024 10:24		
Patient Name	:	MR. RISHI RAJ ANAND	UHID	:	APH000029170		
Age / Gender	F	39 Yrs 7 Mth / MALE	Patient Type	1	OPD	If PHC :	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	1	APH24045579	Current Ward / Bed	:	1		
	1		Receiving Date & Time	:	28-09-2024 10:26		
			Reporting Date & Time	:	28-09-2024 12:29		

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)	6.0	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	5.1	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)	14.5	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)	46.0	%	40 - 50
MEAN CORPUSCULAR VOLUME	90.5	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	28.6	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	31.6	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)	156	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	45.0	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	13.9	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	32	mm 1st hr	0 - 10
BASOPHILS		0	%	0 - 1
EOSINOPHILS		4	%	1 - 5
MONOCYTES		5	%	2 - 10
LYMPHOCYTES		25	%	20 - 40
NEUTROPHILS		66	%	40 - 80

** End of Report **

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Patient Name	:	MR. RISHI RAJ ANAND	UHID	1	APH000029170		
Age / Gender	:	39 Yrs 7 Mth / MALE	Patient Type		OPD	If PHC :	
Ref. Consultant		MEDIWHEEL	Ward / Bed	1	1		
Sample ID	:	APH24045583	Current Ward / Bed		1		
	:		Receiving Date & Time		28-09-2024 10:26		
			Reporting Date & Time		28-09-2024 17:38		

SEROLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_MALE(BELOW-40)@2400

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.96	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.53	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	3.09	mIU/L	0.27-4.20

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DR. ASHISH RANJAN SINGH

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: ULTRASOUND

Patient Name	:	MR. RISHI RAJ ANAND	IPD No.	:	
Age	T:	39 Yrs 7 Mth	UHID	:	APH000029170
Gender	T:	MALE	Bill No.	:	APHHC240001759
Ref. Doctor	1:	MEDIWHEEL	Bill Date	:	28-09-2024 10:24:11
Ward	1:		Room No.	:	
			Print Date	:	28-09-2024 11:03:17

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 12.9 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 (11.6 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.17 cm), Left kidney (10.16 cm).

Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder is distended and appears normal. Wall thickness is normal.

Prostate appears normal in size (Vol. 13 cc), outline and echotexture.

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

No significant lymphadenopathy seen.

Please correlate clinically.....

No dilated bowel loop seen.

IMPRESSION:- No significant abnormality detected.

Prepare By.		DR. ALOK KUMAR, M.B.B.S,M.D,DMRD
MD.SERAJ		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	:	MR. RISHI RAJ ANAND	IPD No.	T	
Age	:	39 Yrs 7 Mth	UHID	T	APH000029170
Gender	:	MALE	Bill No.	T:	APHHC240001759
Ref. Doctor	:	MEDIWHEEL	Bill Date	1:	28-09-2024 10:24:11
Ward	:		Room No.	T:	
			Print Date	1:	28-09-2024 12:08:43

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.

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P١	ease	corre	iate c	linical	IV.

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

Prepare By. MD.SERAJ

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.