

Bill No.	:	APHHC240001884	Bill Date	:	26-10-2024 10:31		
Patient Name	1	MRS. INDU DEVI	UHID	:	APH000030380		
Age / Gender	E	32 Yrs 4 Mth / FEMALE	Patient Type	:	OPD	If PHC	:
Ref. Consultant	E	MEDIWHEEL	Ward / Bed	:	1		
Sample ID	1	APH24050489	Current Ward / Bed	:	1		
	1		Receiving Date & Time	:	26-10-2024 10:42		
	Г		Reporting Date & Time	:	26-10-2024 13:42		

BIOCHEMISTRY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD UREA Urease-GLDH,Kinetic	L	14	mg/dL	15 - 45
BUN (Calculated)	L	6.5	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.4	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		91.0	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	183	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	38	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	121	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		101	mg/dL	0 - 160
NON-HDL CHOLESTROL (Calculated)	Н	145.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL (Calculated)		4.8		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 (Calculated)		3.2		1/2Average 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 (Calculated)		20	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)	Н	1.12	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)		0.19	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT (Calculated)	Н	0.93	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	Н	8.4	g/dL	6 - 8.1
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.6	g/dL	3.5 - 5.2
S.GLOBULIN (Calculated)		3.8	g/dL	2.8-3.8



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A/G RATIO (Ca	lcula	sted)	L	1.	21		1.5 - 2	.5	
ALKALINE PH	os	PHATASE IFCC AMP BUFFER		93	3 IU/L		42 - 98		
ASPARTATE A	(M	INO TRANSFERASE (SGOT) (IFCC)		28	6 IU/L		10 - 42		
ALANINE AMI	NC	TRANSFERASE(SGPT) (IFCC)		20	1 IU/L		10 - 40		
GAMMA-GLUT	A۱	MYLTRANSPEPTIDASE (IFCC)		14	7 IU/L		7 - 35		
LACTATE DEF	łΥ[DROGENASE (IFCC; L-P)		21	9.2 IU/L		0 - 248	3	
S.PROTEIN-T	ОТ	AL (Biuret)	Н	8.	4 g/dL		6 - 8.1		
URIC ACID (Ur	icase	a - Trinder)		3.8	mg/c	dL	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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Sample Type: EDTA Whole Blood, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	5.9	%	4.0 - 6.2

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.

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Age / Gender		32 Yrs 4 Mth / FEMALE	Patient Type		OPD	If PHC :	
Ref. Consultant		MEDIWHEEL	Ward / Bed		1		
Sample ID		APH24050490	Current Ward / Bed	1	1		
			Receiving Date & Time	:	26-10-2024 10:42		
	Т		Reporting Date & Time	1	26-10-2024 19:14		

SEROLOGY REPORTING

Test (Methodology)		Result	UOM	Biological Reference
				Interval

Sample Type: Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	2.80	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.08	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	2.12	mIU/L	0.27-4.20

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Chares

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Patient Name	:	MRS. INDU DEVI	UHID	:	APH000030380		
Age / Gender	:	32 Yrs 4 Mth / FEMALE	Patient Type	:	OPD	If PHC :	
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	:	1		
Sample ID	:	APH24050486	Current Ward / Bed	:	1		
	:		Receiving Date & Time		26-10-2024 10:42		
			Reporting Date & Time		26-10-2024 15:04		

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)		8.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.5	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	11.1	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		37.5	%	36 - 46
MEAN CORPUSCULAR VOLUME (Calculated)		83.2	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN (Calculated)	L	24.6	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION (Calculated)	L	29.5	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		201	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	Н	47.7	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	16.0	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	40	mm/1st hr	0 - 20
BASOPHILS (Flow-cytometry & Microscopy)		0	%	0 - 1
EOSINOPHILS (Flow-cytometry & Microscopy)		4	%	1 - 5
MONOCYTES (Flow-cytometry & Microscopy)		4	%	2 - 10
LYMPHOCYTES (Flow-cytometry & Microscopy)		23	%	20 - 40
NEUTROPHILS (Flow-cytometry & Microscopy)		69	%	40 - 80

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Ref. Consultant	:	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	:	APH24050513	Current Ward / Bed	1	1		
	:		Receiving Date & Time	:	26-10-2024 11:34		
			Reporting Date & Time	[26-10-2024 17:48		

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
				Interval

Sample Type: Urine

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY		20 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)		1.025	1.005 - 1.030

MICROSCOPIC EXAMINATION

21.0000110 220				
LEUCOCYTES	2-3 /HPF 0 - 5			
RBC's	Nil			
EPITHELIAL CELLS	7-8			
CASTS	Nil			
CRYSTALS	Nil			
URINE-SUGAR	NEGATIVE			

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	F		Receiving Date & Time	:	26-10-2024 10:42	
	Т		Reporting Date & Time	:	26-10-2024 19:11	

BLOOD BANK REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
				Interval

Sample Type: EDTA Whole Blood

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

BLOOD GROUP (ABO)	" O "
RH TYPE	POSITIVE

** End of Report **

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DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: XRAY

Patient Name	:	MRS. INDU DEVI	IPD No.	:	
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Gender	:	FEMALE	Bill No.	T:	APHHC240001884
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	26-10-2024 10:31:42
Ward	:		Room No.	:	
			Print Date	:	26-10-2024 13:30:37

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.

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.....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.