



<b>Name</b>	: MR. SHIV KUMAR SHARMA	<b>UHID No.</b>	: AFB000324776
<b>FATHER</b>	: HARVANS LAL SHARMA	<b>Date</b>	: 27-07-2024 11:33:23
<b>Age / Gender</b>	: 50 Yrs / MALE	<b>Doctor / Unit</b>	: DR. PRABHSARAN AHUJA /
<b>CPG</b>	: CORPORATE CASH/ArcoFemi HealthCare Ltd	<b>Department</b>	: Health Check Up
<b>Inst. Name</b>	: ArcoFemi Healthcare Ltd		
<b>Address</b>	: H.NO. E-607, HAPPY HOMES, SEC-86, FARIDABAD, HARYANA, INDIA		

**DR. PRABHSARAN AHUJA, MBBS, Director - PHC-Health Check Up,**  
PHC (1st Floor), OPD Timmings Mon to Sat 9:00 a.m to 3:00p.m.

**Note :**  
Nature of illness, prognosis, potential side effects of medication used, risk of allergic reaction, need for follow-up & monitoring has been explained to the Patient/attendants their own language.  
**WHEN TO OBTAIN URGENT CARE :** In case high grade fever, recurrent vomiting, profuse diarrhea, severe oral ulcers, skin rash breathlessness, dizziness, loss consciousness, bleeding from any site or new relevant/ alarming symptom

UHID 324776  
DOB 7/10/1974 50 Years

MR SHIV KUMAR SHARMA  
Male

7/27/2024 12:20:10 PM  
ASIAN HOSPITAL

Rate 53

PR 210

QRSD 130

QT 452

QTc 425

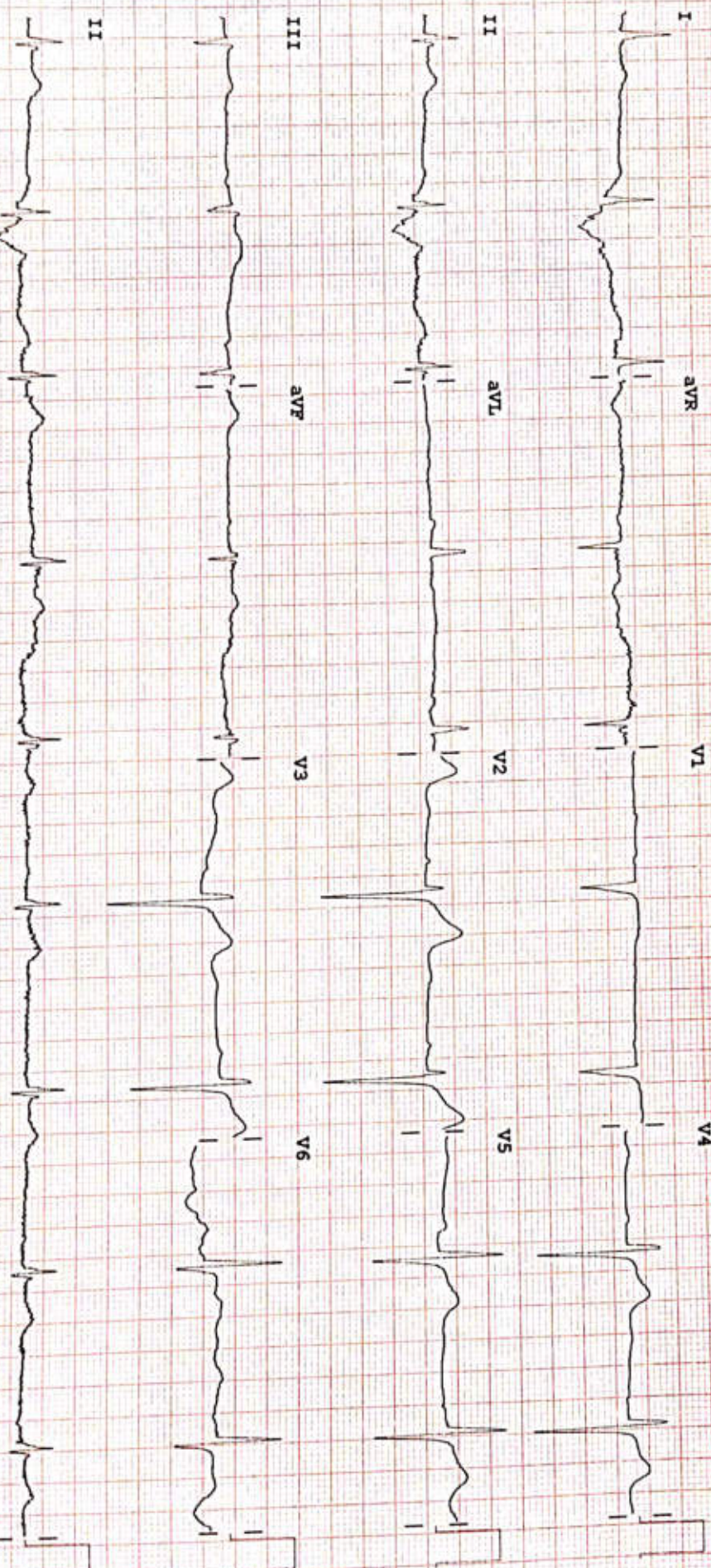
--AXIS--

P -12

QRS 10

T 66

12 Lead; Standard Placement



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~0.15-100 Hz

100B

P2

## NON INVASIVE CARDIOLOGY

Patient Name	: MR. SHIV KUMAR SHARMA	IPD No.	:	
Age	: 50 Yrs	UHID	:	AFB000324776
Gender	: MALE	Bill No.	:	AFBHC240007674
Ref. Doctor	: DR. PRABHSARAN AHUJA	Bill Date	:	27-07-2024 11:35:23
Ward	:	Room No.	:	
		Procedure Date	:	27-07-2024 12:50:43

### ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENTS	ABSOLUTE VALUE		NORMAL VALUE
Aortic Root Diameter	3.1		2.0-3.7cm < 2.2cm/M2
Aortic Valve Opening	N		1.5-2.6cm
Left Atrial Dimension	3.8		1.9-4.0cm < 2.2cm/M2
RV Dimensions	N		0.7-2.6cm
RV thickness	N		0.3-0.9cm
LV ED Dimension	4.4		3.7-5.6 cm < 3.2cm /M2
LV ES Dimension	2.5		2.2-4.0 cm
IVS thickness	ED - 1.2	ES-1.9	0.6-1.2cm
LVPW Thickness	ED - 1.3	ES-1.7	0.5-1.1cm
IVS/ LVPW Ratio	N		
Mitral Valve	DE-N	EF -N	

INDICES OF LV FUNCTION		
EPSS		<9mm
FS%		24-42%
LV Ejection Fraction	60%	60+/-6%

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Age	: 50 Yrs	UHID	: AFB000324778
Gender	: MALE	Bill No.	: AFBHC240007674
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### MORPHOLOGICAL DATA

Mitral Valve : AML PML	Normal	Interatrial Septum	Intact
Aortic Valve	Sclerotic	Interventricular Septum	Intact
Tricuspid Valve	Normal	Pulmonary Artery	Normal
Pulmonary Valve	Normal	Aorta	Normal
Right Ventricle	Normal	Right Atrium	Normal
Left Ventricle	Normal	Left Atrium	High Normal

### DOPPLER STUDY

	Cm/s	Cm/s		
MITRAL VELOCITY	E-77	A-59	MR	2/4
TRICUSPID VELOCITY	cm/s		TR	2/4
AORTIC VELOCITY	93 cm/s		AR	0/4
PULMONARY VELOCITY	94 cm/s		PR	0/4
PA Pressure	31 mmHg			

## NON INVASIVE CARDIOLOGY

Patient Name	MR. BHIV KUMAR BHARMA	IPD No.	:
Age	50 Yrs	UHID	: AFB90032A776
Gender	MALE	Bill No.	: AFB90032A776/74
Ref. Doctor	DR. PRATHIBARAN AHUJA	Bill Date	: 27-07-2024 11:35:23
Ward		Room No.	:
		Procedure Date	: 27-07-2024 12:50:43

### COLOUR FLOW MAPPING

Mild MR, Mild TR.

### FINAL IMPRESSION

1. No RWMA, LVEF-60%.
2. Normal RV systolic function.
3. Mild concentric LVH seen. High normal LA.
4. Mild MR, Mild TR (PASP=31mmHg).
5. Sclerotic aortic valve. No AS/AR.
6. Pseudonormal mitral inflow pattern.
7. No clot/mass/vegetation/PE.



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Fellowship in Non Invasive  
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Consultant Cardiology

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MBBS,MD,DM(Cardio)  
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Interventional Cardiologist.

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MBBS,MD,DNB(Cardiology)  
Consultant Cardiology

For The perusal of a medical professional only

The content of this report is only an opinion based on images and is therefore subject to inherent technical limitations.

It is not the diagnosis & must be correlated clinically.

NOT FOR MEDICOLEGAL PURPOSES

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

Prepare By.  
KUMAR.HRISHIK  
ES



**FINAL REPORT**

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Patient Name :	MR. SHIV KUMAR SHARMA	UHID :	AFB000324776
Age / Gender :	50 Yrs / MALE	Patient Type :	OPD <span style="float:right">If PHC :</span>
Ref. Consultant :	DR. PRABHSARAN AHUJA	Ward / Bed :	/
Sample ID :	AFB24245009	Current Ward / Bed :	/
		Receiving Date & Time :	27-07-2024 11:44
		Reporting Date & Time :	27-07-2024 13:33

**HAEMATOLOGY REPORTING**

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

**MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE(2D ECHO)**

ESR (Westergren)		9	mm 1st hr	0 - 10
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**CBC -1 (COMPLETE BLOOD COUNT)**

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		7.8	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.5	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		14.0	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		43.4	%	40 - 50
MEAN CORPUSCULAR VOLUME		96.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		31.1	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.3	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		192	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	53.8	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.1	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**

NEUTROPHILS		60	%	40 - 80
LYMPHOCYTES		29	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		5	%	1 - 5
BASOPHILS		0	%	0 - 1

**GLYCATED HAEMOGLOBIN (HBA1C)**

HBA1C (HPLC)		5.6	%	4.27 - 6.07
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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

recent food intake, it is a more useful tool for monitoring diabetics.

**IMPORTANT INSTRUCTIONS**

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Age / Gender	: 50 Yrs / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: DR. PRABHSARAN AHUJA	Ward / Bed	: /
Sample ID	: AFB24245010	Current Ward / Bed	: /
		Receiving Date & Time	: 27-07-2024 11:44
		Reporting Date & Time	: 27-07-2024 13:52

**BLOOD BANK REPORTING**

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

**MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE(2D ECHO)**

**BLOOD GROUP (ABO & RH)**

ABO GROUP	B
RH TYPE	POSITIVE

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

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*Uma Rani*

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Associate Director

**DR. SHARMILA RAI**  
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Consultant



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Patient Name :	MR. SHIV KUMAR SHARMA	UHID :	AFB000324776
Age / Gender :	50 Yrs / MALE	Patient Type :	OPD <span style="float:right">If PHC :</span>
Ref. Consultant :	DR. PRABHSARAN AHUJA	Ward / Bed :	/
Sample ID :	AFB24245053	Current Ward / Bed :	/
		Receiving Date & Time :	27-07-2024 12:09
		Reporting Date & Time :	27-07-2024 16:06

### CLINICAL PATH REPORTING

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

#### MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE(2D ECHO)

#### PHYSICAL EXAMINATION

QUANTITY	40 mL
COLOUR	Pale yellow <span style="float:right">Pale Yellow</span>
TURBIDITY	Clear

#### CHEMICAL EXAMINATION

PH (Double pH indicator method)	5.0	5.0 - 8.5
PROTEINS (Protein-error-of-indicators)	Negative	Negative
SUGAR (GOD POD Method)	Negative	Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.020	1.005 - 1.030
UROBILINOGEN (Modified Erlich Reaction)	Normal	NORMAL
BILIRUBIN (Azo Coupling)	Negative	NEGATIVE
KETONES (Acetoacetic acid reaction with sodium nitroprusside)	Negative	
NITRITE (Kinetic cadmium-reduction)	Negative	NEGATIVE

#### MICROSCOPIC EXAMINATION

LEUCOCYTES	0-1	/HPF	0 - 5
RBCS	Nil		
EPITHELIAL CELLS (URINE)	0-1		
CASTS	Nil		
CRYSTALS	Nil		

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

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Age / Gender	: 50 Yrs / MALE	Patient Type	: OPD <span style="float:right">If PHC :</span>
Ref. Consultant	: DR. PRABHSARAN AHUJA	Ward / Bed	: /
Sample ID	: AFB24245012	Current Ward / Bed	: /
		Receiving Date & Time	: 27-07-2024 11:44
		Reporting Date & Time	: 27-07-2024 13:40

### SEROLOGY REPORTING

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

#### MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE(2D ECHO)

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

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.67	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	L	0.89	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		2.86	mIU/L	0.27-4.20

#### PSA (TOTAL)

PROSTATIC SPECIFIC ANTIGEN (TOTAL) (ECLIA)		0.98	ng/mL	0-3.1
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It is increased in

(a) Prostatic disease e.g.

1. Cancer
2. Prostatitis
3. Benign hyperplasia prostate
4. Prostatic ischemia
5. Prostatic massage

(b) Non-prostatic disease

1. Biopsy
2. Digital rectal examination
3. Transurethral disease
4. Indwelling catheterization
5. Vigorous bicycle exercise

It is decreased in

1. Castration
2. Prostatectomy
3. Radiation therapy
4. Use of anti-androgenic drug
5. Ejaculation with in 24-48 hrs

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

#### IMPORTANT INSTRUCTIONS

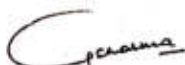
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Results are Verified By



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BIOCHEMIST



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Bill No. :	AFBHC240007674	Bill Date :	27-07-2024 11:35
Patient Name :	MR. SHIV KUMAR SHARMA	UHID :	AFB000324776
Age / Gender :	50 Yrs / MALE	Patient Type :	OPD If PHC :
Ref. Consultant :	DR. PRABHSARAN AHUJA	Ward / Bed :	/
Sample ID :	AFB24245011	Current Ward / Bed :	/
		Receiving Date & Time :	27-07-2024 11:44
		Reporting Date & Time :	27-07-2024 13:39

**BIOCHEMISTRY REPORTING**

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

**MEDIWHEEL FULL BODY ANNUAL PLUS ABOVE 50 MALE(2D ECHO)**

GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		86.0	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)

**KFT/RFT- KIDNEY/RENAL PANEL 1**

BLOOD UREA Urease-GLDH,Kinetic		18	mg/dL	15 - 45
CREATININE-SERUM (Modified Jaffe's Kinetic)		0.9	mg/dL	0.9 - 1.3
SODIUM-SERUM (Indirect Ion-Selective Electrode)		137	m.mol/L	135 - 145
POTASSIUM-SERUM (Indirect Ion-Selective Electrode)		4.0	m.mol/L	3.5 - 5.1
CHLORIDE-SERUM (Indirect Ion-Selective Electrode)		103	m.mol/L	98 - 107

**SERUM PROTEINS**

S.PROTEIN-TOTAL (Biuret)		8.0	g/dL	6.6 - 8.3
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.2	g/dL	3.5 - 5.2
S.GLOBULIN		3.8	g/dL	2.8-3.8
A/G RATIO	L	1.11		1.5 - 2.5

**LIPID PROFILE**

CHOLESTROL-TOTAL (CHO-POD)	H	172	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	37	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	H	129	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)	H	161	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	135.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.6		1/2 Average 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		3.5		1/2 Average 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		32	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)**

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<b>Age / Gender</b>	: 50 Yrs / MALE	<b>Patient Type</b>	: OPD <b>IF PHC</b> :
<b>Ref. Consultant</b>	: DR. PRABHSARAN AHUJA	<b>Ward / Bed</b>	: /
<b>Sample ID</b>	: AFB24245011	<b>Current Ward / Bed</b>	: /
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BILIRUBIN-TOTAL (DPD)	0.77	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	0.19	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	0.58	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Buret)	8.0	g/dL	6.6 - 8.3
ALBUMIN-SERUM (Dye Binding Bromocresol Green)	4.2	g/dL	3.5 - 5.2
S.GLOBULIN	3.8	g/dL	2.8-3.8
A/G RATIO	<b>L</b> 1.11		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)	105.0	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)	20.0	IU/L	0 - 50
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)	14.0	IU/L	0 - 50
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)	28.0	IU/L	0 - 55
LACTATE DEHYDROGENASE (IFCC; L-P)	161.0	IU/L	0 - 248

**\*\* End of Report \*\***
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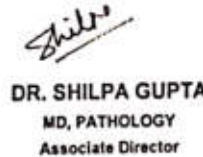
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## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MR. SHIV KUMAR SHARMA	IPD No.	:
Age	: 50 Yrs	UHID	: AFB000324776
Gender	: MALE	Bill No.	: AFBHC240007674
Ref. Doctor	: DR. PRABHSARAN AHUJA	Bill Date	: 27-07-2024 11:35:23
Ward	:	Room No.	:
		Print Date	: 27-07-2024 14:42:10

### USG Abdomen:

*Sonographic evaluation of the abdomen & pelvis was performed with a curvilinear transducer, in transverse and longitudinal planes, with gray scale and color Doppler evaluations.*

**Liver:** Measures ~ 13.6 cms in size- Normal in size and **increased in texture**. No evidence of any focal lesions / IHBRD noted. Normal Portal vein caliber noted.

**GB:** Well-distended; Normal wall-thickness noted. The lumen appears echofree at present scan. CBD is normal in calibre.

**Spleen:** Measures ~ cms in size- Normal in size and normal in texture.

**Pancreas:** Visualized parts are normal in size and texture. No evidence of any focal lesions / calcifications noted.

**Kidneys:** Normal in size, shape and echotexture; CMD maintained bilaterally. No evidence of any hydronephrosis noted bilaterally.

**Urinary Bladder:** Well distended; Normal wall thickness noted. No evidence of any calculi noted.

**Prostate:** **Enlarged in size (~31 gms)** and normal in echotexture. No evidence of any calcifications / focal lesions noted.

Visualized bowel shows normal wall thickness and peristaltic movements. No evidence of any sonographically significant free fluid noted.

**IMPRESSION:** Sonographic features are suggestive of:

- **Grade I hepatosteatorsis.**
- **Prostatomegaly.**

*Suggested: Clinical correlation.*

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

Prepare By:  
MAHESH.K

DR. RAVI GARG, MD (Radiodiagnosis),  
Fellowship in Sonography, Specialist in  
Fetal Medicine,  
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. SHIV KUMAR SHARMA	IPD No.	:	
Age	: 50 Yrs	UHID	:	AFB000324776
Gender	: MALE	Bill No.	:	AFBHC240007674
Ref. Doctor	: DR. PRABHSARAN AHUJA	Bill Date	:	27-07-2024 11:35 23
Ward	:	Room No.	:	
		Print Date	:	28-07-2024 11:50 51

### 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.

Few old fractures of right upper ribs are noted.

Please correlate clinically.

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

Prepare By.  
LALITA.ANAND

  
DR. RAVI GARG, MD (Radiodiagnosis),  
Fellowship in Sonography, Specialist in  
Fetal Medicine,  
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.