DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: XRAY

Patient Name	:	MR. RAJKUMAR DUBEY	IPD No.	:	
Age	:	35 Yrs 10 Mth	UHID	T:	APH000021638
Gender	:	MALE	Bill No.	:	APHHC240000496
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	19-03-2024 09:19:11
Ward	:		Room No.	:	
			Print Date	:	19-03-2024 11:10:57

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.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.

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: ULTRASOUND

Patient Name	:	MR. RAJKUMAR DUBEY	IPD No.	T:	
Age	:	35 Yrs 10 Mth	UHID	T	APH000021638
Gender	:	MALE	Bill No.	T	APHHC240000496
Ref. Doctor	:	MEDIWHEEL	Bill Date	1:	19-03-2024 09:19:11
Ward	:		Room No.	:	
			Print Date	:	19-03-2024 10:24:11

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 12.6 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.and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.5 cm), Left kidney (10.0 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal. .

Prostate appears normal in size (Vol. 16.3 cc), outline and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

IMPRESSION:

No significant abnormality detected.

Please correlate clinically.	
	End of Report

Prepare By.

MD.SERAJ

MD.SERAJ

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.

Bill No.	:	APHHC240000496	Bill Date		19-03-2024 09:19		
Patient Name		MR. RAJKUMAR DUBEY	UHID		APH000021638		
Age / Gender		35 Yrs 10 Mth / MALE	Patient Type		OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	:	1		
Sample ID		APH24010017	Current Ward / Bed	:	1		
	:		Receiving Date & Time		19-03-2024 10:29		
			Reporting Date & Time	:	19-03-2024 13:16		

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)		7.0	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	L	4.1	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		13.4	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		43.0	%	40 - 50
MEAN CORPUSCULAR VOLUME	Н	104.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	Н	32.7	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	L	31.3	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		168	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	Н	60.9	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	16.3	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	65	mm 1st hr	0 - 10
BASOPHILS		0	%	0 - 1
EOSINOPHILS		1	%	1 - 5
MONOCYTES		3	%	2 - 10
LYMPHOCYTES		21	%	20 - 40
NEUTROPHILS		75	%	40 - 80

** End of Report **

IMPORTANT INSTRUCTIONS

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

DR. ASHISH RANJAN SINGH

MBBS,MD CONSULTANT

Page 1 of 1

Bill No.	:	APHHC240000496		Bill Date		19-03-2024 09:19		
Patient Name	:	MR. RAJKUMAR DUBEY		UHID		APH000021638		
Age / Gender		35 Yrs 10 Mth / MALE		Patient Type		OPD If PHC :		
Ref. Consultant		MEDIWHEEL	,	Ward / Bed	:	1		
Sample ID	:	APH24010092		Current Ward / Bed		1		
	:			Receiving Date & Time		19-03-2024 13:36		
	П			Reporting Date & Time	:	19-03-2024 14:51		

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		19	mg/dL	15 - 45
BUN (CALCULATED)		8.9	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.6	mg/dL	0.9 - 1.3
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)	Н	118.0	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)	96.0	mg/dL	70 - 140

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	236	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition		42	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	168	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)	Н	239	mg/dL	0 - 160
NON-HDL CHOLESTROL	Н	194.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.6		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		4.0		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	48	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)	0.69	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	0.12	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	0.57	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	7.1	g/dL	6 - 8.1

II No.		APHHC240000496			Bill Date : 19-03-2024 09:19			19-03-2024 09:19
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ge / Gender	:	35 Yrs 10 Mth / MALE			Patient Type		:	OPD If PHC :
ef. Consultant	:	MEDIWHEEL			Ward / Bed		:	1
ample ID	:	APH24010092			Current Ward / Bed		:	1
	:				Receiving Date & Tim	e	:	19-03-2024 13:36
	Г			Reporting Date & Time :		:	19-03-2024 14:51	
ALBUMIN-SERU	JΜ	(Dye Binding-Bromocresol Green)		4.3	3	g/dL		
S.GLOBULIN				2.8	3	g/dL		2.8-3.8
A/G RATIO				1.4	54			1.5 - 2.5
ALKALINE PHO	SF	PHATASE IFCC AMP BUFFER		10	4.9	IU/L		53 - 128
ASPARTATE AN	MΙΙ	NO TRANSFERASE (SGOT) (IFCC)		33	.1	IU/L		10 - 42
ALANINE AMIN	Ю	TRANSFERASE(SGPT) (IFCC)	Н	41	.0	IU/L		10 - 40
GAMMA-GLUTA	١M	YLTRANSPEPTIDASE (IFCC)		15	.2	IU/L		11 - 50
LACTATE DEHY	ΥD	ROGENASE (IFCC; L-P)		22	7.5	IU/L		0 - 248
S.PROTEIN-TO	TΑ	L (Biuret)	T	7.		g/dL		6 - 8.1
URIC ACID Uricas		Trinder	1	6.2)	mg/dl		2.6 - 7.2

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000496	Bill Date	:	19-03-2024 09:19		
Patient Name	:	MR. RAJKUMAR DUBEY	UHID	F	APH000021638		
Age / Gender	:	35 Yrs 10 Mth / MALE	Patient Type	F	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed		1		
Sample ID	:	APH24010092	Current Ward / Bed	:	1		
	:		Receiving Date & Time		19-03-2024 13:36		
			Reporting Date & Time		19-03-2024 14:51		

Sample Type: EDTA Whole Blood, Plasma, Serum

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

HBA1C (Turbidimetric Immuno-inhibition)	Н	6.8	%	4.0 - 6.2

INTERPRETATION:

HbA1c %	Degree of Glucose Control						
>8% Action suggested due to high risk of developing long term complications like Retinon 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 **

IMPORTANT INSTRUCTIONS
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DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000496	Bill Date	1:	19-03-2024 09:19		
Patient Name	:	MR. RAJKUMAR DUBEY	UHID	1:	APH000021638		
Age / Gender		35 Yrs 10 Mth / MALE	Patient Type	1:	OPD If PHC :		
Ref. Consultant		MEDIWHEEL	Ward / Bed		1		
Sample ID	:	APH24010059	Current Ward / Bed	1	1		
	:		Receiving Date & Time	:	19-03-2024 12:20		
	П		Reporting Date & Time	:	19-03-2024 14:55		

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		15 mL					
COLOUR		Straw		Pale Yellow			
TURBIDITY	DITY			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

LEUCOCYTES		3-4	/HPF	0 - 5		
RBC's	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

DR. ASHISH RANJAN SINGH

Bill No.	1:	APHHC240000496	Bill Date	:	19-03-2024 09:19		
Patient Name	F	MR. RAJKUMAR DUBEY	UHID		APH000021638		
Age / Gender	F	35 Yrs 10 Mth / MALE	Patient Type	[·	OPD I	If PHC :	
Ref. Consultant		MEDIWHEEL	Ward / Bed		1		
Sample ID	1	APH24010018	Current Ward / Bed		1		
	:		Receiving Date & Time	:	19-03-2024 10:29		
	Г		Reporting Date & Time		19-03-2024 14:53		

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)	"B"		
RH TYPE	POSITIVE		

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000496	Bill Date	:	19-03-2024 09:19		
Patient Name	Г	MR. RAJKUMAR DUBEY	UHID	:	APH000021638		
Age / Gender	Г	35 Yrs 10 Mth / MALE	Patient Type	:	OPD	If PHC :	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed	:	1		
Sample ID		APH24010022	Current Ward / Bed	:	1		
	F		Receiving Date & Time	:	19-03-2024 10:29		
	Т		Reporting Date & Time	:	19-03-2024 13:28		

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)		3.20	pg/mL	2.0-4.4	
FREE -THYROXINE (FT4) (ECLIA)		1.56	ng/dL	0.9-1.7	
THYROID STIMULATING HORMONE (TSH) (ECLIA)		2.12	mIU/L	0.27-4.20	

** End of Report **

IMPORTANT INSTRUCTIONS
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DR. ASHISH RANJAN SINGH