DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: ULTRASOUND

| Patient Name | : | MRS. RINKU KUMARI | IPD No. | : | |
|--------------|---|-------------------|------------|----|---------------------|
| Age | : | 38 Yrs | UHID | T: | APH000020689 |
| Gender | : | FEMALE | Bill No. | T: | APHHC240000255 |
| Ref. Doctor | : | MEDIWHEEL | Bill Date | : | 22-02-2024 09:06:25 |
| Ward | : | | Room No. | : | |
| | | | Print Date | : | 22-02-2024 12:23:09 |

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 10.9 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 (9.5 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.3 x 3.3 cm), Left kidney (3.8 x 3.9 cm).

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

Urinary bladder is partially filled.

Uterus is anteverted (measures 8.7 x 5.4 cm) and appears normal in size and echotexture. No focal lesion seen. Cervix and vagina are unremarkable.

Endometrial echo is central and normal in thickness.

Both ovaries are normal in size and echotexture.

Minimal traces of fluid seen in POD likely physiological.

No basal pleural effusion seen.

No significant lymphadenopathy seen.

Distended bowel loop seen.

| IMPRESSION:- No significant abnormality detected | 1. |
|--|-------------------------|
| Please correlate clinically | |
| End of Re | port |
| Prepare By. | CONSULTANT RADIOLOGIST, |

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 | : | MRS. RINKU KUMARI | IPD No. | T: | |
|--------------|---|-------------------|------------|----|---------------------|
| Age | : | 38 Yrs | UHID | T | APH000020689 |
| Gender | : | FEMALE | Bill No. | T | APHHC240000255 |
| Ref. Doctor | : | MEDIWHEEL | Bill Date | 1: | 22-02-2024 09:06:25 |
| Ward | : | | Room No. | : | |
| | | | Print Date | : | 22-02-2024 15:50:44 |

CHEST PA VIEW:

| Rilate | ral pror | minent l | broncl | าดงลรด | ular | marking |
|--------|-----------|----------|--------|--------|------|-------------|
| Dilate | iai bi vi | HILLEHIL | JI OHG | iovasc | uıaı | IIIai Kiiiu |

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

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. | Г | APHHC240000255 | В | ill Date | 1: | 22-02-2024 09:06 | | |
|-----------------|---|-------------------|----|----------------------|----|------------------|--------|----|
| Patient Name | : | MRS. RINKU KUMARI | U | HID | 1 | APH000020689 | | |
| Age / Gender | : | 38 Yrs / FEMALE | Pa | atient Type | 1 | OPD | If PHC | 1: |
| Ref. Consultant | : | MEDIWHEEL | W | /ard / Bed | 1 | 1 | | |
| Sample ID | : | APH24006038 | C | urrent Ward / Bed | 1 | 1 | | |
| | 1 | | R | eceiving Date & Time | 1 | 22-02-2024 09:45 | | |
| | Г | | R | eporting Date & Time | 1 | 22-02-2024 13:06 | | |

SEROLOGY REPORTING

| Test (Methodology) | Flag | 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) | 2.92 | pg/mL | 2.0-4.4 |
|---|------|-------|-----------|
| FREE -THYROXINE (FT4) (ECLIA) | 1.08 | ng/dL | 0.9-1.7 |
| THYROID STIMULATING HORMONE (TSH) (ECLIA) | 1.78 | mIU/L | 0.27-4.20 |

** End of Report **

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

DR. ASHISH RANJAN SINGH

| Bill No. | : | APHHC240000255 | Bill Date | Г | 22-02-2024 09:06 | | |
|-----------------|---|-------------------|-----------------------|---|------------------|--|--|
| Patient Name | : | MRS. RINKU KUMARI | UHID | Г | APH000020689 | | |
| Age / Gender | | 38 Yrs / FEMALE | Patient Type | Г | OPD If PHC : | | |
| Ref. Consultant | | MEDIWHEEL | Ward / Bed | Г | 1 | | |
| Sample ID | : | APH24006035 | Current Ward / Bed | F | 1 | | |
| | : | | Receiving Date & Time | F | 22-02-2024 09:45 | | |
| | Г | | Reporting Date & Time | 1 | 22-02-2024 16:56 | | |

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) | "A" |
|-------------------|----------|
| RH TYPE | POSITIVE |

** End of Report **

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

DR. ASHISH RANJAN SINGH

| Bill No. | : | APHHC240000255 | Bill Date | I | 22-02-2024 09:06 | | |
|-----------------|---|-------------------|-----------------------|---|------------------|--|--|
| Patient Name | F | MRS. RINKU KUMARI | UHID | | APH000020689 | | |
| Age / Gender | F | 38 Yrs / FEMALE | Patient Type | | OPD If PHC : | | |
| Ref. Consultant | 1 | MEDIWHEEL | Ward / Bed | | 1 | | |
| Sample ID | 1 | APH24006037 | Current Ward / Bed | | 1 | | |
| | 1 | | Receiving Date & Time | : | 22-02-2024 09:45 | | |
| | Γ | | Reporting Date & Time | : | 22-02-2024 13:53 | | |

BIOCHEMISTRY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

| BLOOD UREA Urease-GLDH,Kinetic | | 20 | mg/dL | 15 - 45 | | | | | | |
|---|--|---------|-------|-----------|--|--|--|--|--|--|
| BUN (CALCULATED) | | 9.3 | mg/dL | 7 - 21 | | | | | | |
| | | | | | | | | | | |
| CREATININE-SERUM (Modified Jaffe s Kinetic) | | 0.6 | mg/dL | 0.6 - 1.1 | | | | | | |
| | | | | | | | | | | |
| GLUCOSE-PLASMA (FASTING) (UV Hexokinase) | | 86.0 | mg/dL | 70 - 100 | | | | | | |
| A 12 1 6 12 1 1 112 1 1 1 16 6 12 | | 1 1 100 | / 11 | | | | | | | |

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-VLDL | L | 9 | mg/dL | 10 - 35 |
|--|---|-------|-------|---|
| LDL CHOLESTROL / HDL CHOLESTROL | | 1.9 | | 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 |
| TOTAL CHOLESTROL / HDL CHOLESTROL | | 3.2 | | 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 |
| NON-HDL CHOLESTROL | | 100.0 | mg/dL | 0 - 125 |
| S.TRIGLYCERIDES (GPO - POD) | | 47 | mg/dL | 0 - 160 |
| CHOLESTROL-LDL DIRECT Enzymatic Selective Protection | | 88 | mg/dL | 0 - 100 |
| HDL CHOLESTROL Enzymatic Immunoinhibition | | 46 | mg/dL | >45 |
| CHOLESTROL-TOTAL (CHO-POD) | | 146 | mg/dL | 0 - 160 |

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) | | 0.41 | mg/dL | 0.2 - 1.0 |
|---|---|------|-------|-----------|
| BILIRUBIN-DIRECT (DPD) | | 0.09 | mg/dL | 0 - 0.2 |
| BILIRUBIN-INDIRECT | | 0.32 | mg/dL | 0.2 - 0.8 |
| S.PROTEIN-TOTAL (Biuret) | | 6.3 | g/dL | 6 - 8.1 |
| ALBUMIN-SERUM (Dye Binding-Bromocresol Green) | | 4.0 | g/dL | |
| S.GLOBULIN | L | 2.3 | g/dL | 2.8-3.8 |
| A/G RATIO | | 1.74 | | 1.5 - 2.5 |
| ALKALINE PHOSPHATASE IFCC AMP BUFFER | | 42.0 | IU/L | 42 - 98 |

| Bill No. | - | APHHC240000255 | PHHC240000255 | | | : | 22-02-2024 09:06 | |
|-------------------|---------------------------------------|------------------------------|-----------------|----------|------|---------|------------------|--|
| Patient Name | 1 | MRS. RINKU KUMARI | S. RINKU KUMARI | | | : | APH000020689 | |
| Age / Gender | 1 | 38 Yrs / FEMALE | s / FEMALE | | | : | OPD If PHC : | |
| Ref. Consultant | : | MEDIWHEEL | IWHEEL | | | : | 1 | |
| Sample ID | - | APH24006037 | 24006037 | | | : | 1 | |
| | 1 | | | | | : | 22-02-2024 09:45 | |
| | | | | | | : | 22-02-2024 13:53 | |
| ASPARTATE AM | ΙIΝ | NO TRANSFERASE (SGOT) (IFCC) | 20. | .1 | IU/L | | 10 - 42 | |
| ALANINE AMINO | 0 | TRANSFERASE(SGPT) (IFCC) | 15. | i.6 IU/L | | | 10 - 40 | |
| GAMMA-GLUTA | M) | YLTRANSPEPTIDASE (IFCC) | 9.1 | | IU/L | | 7 - 35 | |
| LACTATE DEHY | LACTATE DEHYDROGENASE (IFCC; L-P) 177 | | 77.9 IU/ | | | 0 - 248 | | |
| S.PROTEIN-TOT | ГΑ | L (Biuret) | 6.3 | | g/dL | | 6 - 8.1 | |
| | | | | , | | | 100.70 | |
| URIC ACID Uricase | е - | Trinder | 3.7 | | mg/c | IL_ | 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. | : | APHHC240000255 | Bill Date | ŀ | 22-02-2024 09:06 | | |
|-----------------|---|-------------------|-----------------------|---|------------------|--------|---|
| Patient Name | Г | MRS. RINKU KUMARI | UHID | : | APH000020689 | | |
| Age / Gender | Г | 38 Yrs / FEMALE | Patient Type | F | OPD | If PHC | : |
| Ref. Consultant | | MEDIWHEEL | Ward / Bed | | 1 | | |
| Sample ID | | APH24006037 | Current Ward / Bed | : | 1 | | |
| | | | Receiving Date & Time | : | 22-02-2024 09:45 | | |
| | | | Reporting Date & Time | : | 22-02-2024 13:53 | | |

Sample Type: EDTA Whole Blood, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

| HBA1C (Turbidimetric Immuno-inhibition) | 5.4 | % | 4.0 - 6.2 |
|---|-----|---|-----------|

INTERPRETATION:

| HbA1c % | Degree of Glucose Control | | | |
|--|---------------------------|--|--|--|
| >8% Action suggested due to high risk of developing long term complications like Retin 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
CL - Critical Low, CH - Critical High, H - High, L - Low

DR. ASHISH RANJAN SINGH

| Bill No. | T | APHHC240000255 | Bill Date | | : | 22-02-2024 09:06 | | |
|-----------------|---|-------------------|----------------------|---|---|------------------|--------|--|
| Patient Name | F | MRS. RINKU KUMARI | UHID | | : | APH000020689 | | |
| Age / Gender | F | 38 Yrs / FEMALE | Patient Type | | : | OPD | If PHC | |
| Ref. Consultant | | MEDIWHEEL | Ward / Bed | | : | 1 | | |
| Sample ID | | APH24006034 | Current Ward / Bed | | : | 1 | | |
| | 1 | | Receiving Date & Tim | е | : | 22-02-2024 09:45 | | |
| | Т | | Reporting Date & Tim | е | : | 22-02-2024 13:51 | | |

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

CBC -1 (COMPLETE BLOOD COUNT)

| TOTAL LEUCOCYTE COUNT (Flow Cytometry) | | 4.9 | thousand/cumm | 4 - 11 |
|--|---|------|---------------|-------------|
| RED BLOOD CELL COUNT (Hydro Dynamic Focussing) | L | 3.1 | million/cumm | 3.8 - 4.8 |
| HAEMOGLOBIN (SLS Hb Detection) | L | 8.7 | g/dL | 12 - 15 |
| PACK CELL VOLUME (Cumulative Pulse Height Detection) | L | 25.6 | % | 36 - 46 |
| MEAN CORPUSCULAR VOLUME | L | 82.8 | fL | 83 - 101 |
| MEAN CORPUSCULAR HAEMOGLOBIN | | 28.3 | pg | 27 - 32 |
| MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION | | 34.2 | g/dL | 31.5 - 34.5 |
| PLATELET COUNT (Hydro Dynamic Focussing) | | 169 | thousand/cumm | 150 - 400 |
| RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution) | | 45.4 | fL | 39 - 46 |
| RED CELL DISTRIBUTION WIDTH (C.V.) | Н | 15.3 | % | 11.6 - 14 |

DIFFERENTIAL LEUCOCYTE COUNT

| NEUTROPHILS | | 57 | % | 40 - 80 |
|------------------|---|----|-----------|---------|
| LYMPHOCYTES | | 34 | % | 20 - 40 |
| MONOCYTES | | 5 | % | 2 - 10 |
| EOSINOPHILS | | 4 | % | 1 - 5 |
| BASOPHILS | | 0 | % | 0 - 1 |
| | | | | |
| ESR (Westergren) | Н | 66 | mm 1st hr | 0 - 20 |

** End of Report **

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

DR. ASHISH RANJAN SINGH