DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: XRAY

Patient Name	:	MRS. JANAKI KUMARI	IPD No.	:	
Age	:	52 Yrs 9 Mth	UHID	T:	APH000014332
Gender	:	FEMALE	Bill No.	:	APHHC240000397
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-03-2024 09:11:50
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 13:22:43

CHEST PA VIEW:

Focal nodular opacity seen in right mid zone likely sequelae of old infection.

Rest of both lung fields appear clear.

Cardiac shadow appears normal.

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.SALMAN

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	:	MRS. JANAKI KUMARI	IPD No.	:	
Age	:	52 Yrs 9 Mth	UHID	T:	APH000014332
Gender	:	FEMALE	Bill No.	T:	APHHC240000397
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-03-2024 09:11:50
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 10:37:23

refused	bv	patient

	Er	ıd of	Rep	ort	
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Prepare By. MD.SALMAN

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.	:	APHHC240000397	Bill Date	:	09-03-2024 09:11		
Patient Name	:	MRS. JANAKI KUMARI	UHID	1:	APH000014332		
Age / Gender		52 Yrs 9 Mth / FEMALE	Patient Type	1:	OPD	If PHC :	
Ref. Consultant		MEDIWHEEL	Ward / Bed	1:	1		
Sample ID	:	APH24008494	Current Ward / Bed	1:	1		
	:		Receiving Date & Time	1:	09-03-2024 09:46		
	Г		Reporting Date & Time	:	09-03-2024 17:17		

SEROLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.26	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.34	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	Н	7.00	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.	Г	APHHC240000397	Bill Date	T	09-03-2024 09:11		
Patient Name	:	MRS. JANAKI KUMARI	UHID	Г	APH000014332		
Age / Gender	:	52 Yrs 9 Mth / FEMALE	Patient Type	Г	OPD If PHC :		
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	Г	1		
Sample ID	:	APH24008594	Current Ward / Bed		1		
	:		Receiving Date & Time	F	09-03-2024 13:31		
	Г		Reporting Date & Time	Г	09-03-2024 17:25		

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

URINE, ROUTINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY	30 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

LEUCOCYTES		2-3	/HPF	0 - 5			
RBC's		N il					
EPITHELIAL CELLS		2-3					
CASTS		Nil					
CRYSTALS	Nil						
URINE-SUGAR		NEGATIVE					

**	End	of	Rep	ort	**

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000397	Bill Date	1:	09-03-2024 09:11		
Patient Name	:	MRS. JANAKI KUMARI	UHID	1	APH000014332		
Age / Gender		52 Yrs 9 Mth / FEMALE	Patient Type	1	OPD	If PHC :	
Ref. Consultant		MEDIWHEEL	Ward / Bed	1	1		
Sample ID	:	APH24008490	Current Ward / Bed	1	1		
	:		Receiving Date & Time	:	09-03-2024 09:46		
	Г		Reporting Date & Time	1:	09-03-2024 16:56		

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	Н	5.4	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)		12.6	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		41.1	%	36 - 46
MEAN CORPUSCULAR VOLUME	L	76.2	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	23.4	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	L	30.7	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		310	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		44.3	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	16.2	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		57	%	40 - 80				
LYMPHOCYTES		28	%	20 - 40				
MONOCYTES		6	%	2 - 10				
EOSINOPHILS	Н	9	%	1 - 5				
BASOPHILS		0	%	0 - 1				
ESR (Westergren)	Н	31	mm 1st hr	0 - 20				

** End of Report **

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

DR. ASHISH RANJAN SINGH

Ashish

Bill No.	F	APHHC240000397	Bill Date	:	: 09-03-2024 09:11		
Patient Name	F	MRS. JANAKI KUMARI	UHID	:	APH000014332		
Age / Gender	F	52 Yrs 9 Mth / FEMALE	Patient Type	:	OPD	If PHC	:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	:	1		
Sample ID	1	APH24008491	Current Ward / Bed	:	1		
	1		Receiving Date & Time	:	09-03-2024 09:46		
	Γ		Reporting Date & Time	:	09-03-2024 17:40		

BLOOD BANK REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

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.	F	APHHC240000397	Bill Date	:	09-03-2024 09:11		
Patient Name	Γ	MRS. JANAKI KUMARI	UHID	:	APH000014332		
Age / Gender	Г	52 Yrs 9 Mth / FEMALE	Patient Type		OPD	If PHC :	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed		1		
Sample ID		APH24008593	Current Ward / Bed		1		
	F		Receiving Date & Time	:	09-03-2024 13:31		
	Т		Reporting Date & Time		09-03-2024 15:40		

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
				Interval

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

BLOOD UREA Urease-GLDH,Kinetic		41	mg/dL	15 - 45
BUN (CALCULATED)		19.1	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.5	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		89.0	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)	107.0	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-VLDL	L	7	mg/dL	10 - 35
LDL CHOLESTROL / HDL CHOLESTROL		1.9		1/2 Average 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		3.1		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
NON-HDL CHOLESTROL		95.0	mg/dL	0 - 125
S.TRIGLYCERIDES (GPO - POD)		37	mg/dL	0 - 160
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection		87	mg/dL	0 - 100
HDL CHOLESTROL Enzymatic Immunoinhibition		45	mg/dL	>45
CHOLESTROL-TOTAL (CHO-POD)		140	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)		0.88	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	Н	0.23	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.65	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	Н	8.7	g/dL	6 - 8.1

II No.		APHHC240000397			Bill Date		:	09-03-2024 09	9:11		
tient Name	:	MRS. JANAKI KUMARI			UHID		:	APH00001433	32		
je / Gender	:	52 Yrs 9 Mth / FEMALE			Patient Type		:	OPD		If PHC	
ef. Consultant	:	MEDIWHEEL			Ward / Bed		:	1			
mple ID	:	APH24008593			Current Ward / Bed		:	1			
	:				Receiving Date & Tin	ne	:	09-03-2024 13	3:31		
					Reporting Date & Tin	ne	:	09-03-2024 15	40		
ALBUMIN-SER	JM	(Dye Binding-Bromocresol Green)		4.5		g/dL					
S.GLOBULIN			Н	4.:	2	g/dL		2.8	3.8		
A/G RATIO			L	1.	07			1.5	- 2	5	
ALKALINE PHO	SF	HATASE IFCC AMP BUFFER	Н	10	4.8	IU/L		42	- 98		
ASPARTATE AN	ΊIΝ	NO TRANSFERASE (SGOT) (IFCC)		32	3	IU/L		10	- 42		
ALANINE AMIN	Ю	TRANSFERASE(SGPT) (IFCC)		29	6	IU/L		10	- 40		
GAMMA-GLUTA	١M	YLTRANSPEPTIDASE (IFCC)		14	2	IU/L		7 -	35		
LACTATE DEHY	ΥD	ROGENASE (IFCC; L-P)	Н	33	4.0	IU/L		0 -	248		
S.PROTEIN-TO	TΑ	L (Biuret)	Н	8.	7	g/dL		6 -	8.1		
URIC ACID Urica		Talada.		5.1		mg/d		126	3 - 7.	2	

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	T	APHHC240000397	Bi	ill Date	:	: 09-03-2024 09:11		
Patient Name	Г	MRS. JANAKI KUMARI	UI	HID	┌	APH000014332		
Age / Gender	Г	52 Yrs 9 Mth / FEMALE	Pa	atient Type	Γ	OPD If PH	С	:
Ref. Consultant	1	MEDIWHEEL	W	/ard / Bed	Γ	1		
Sample ID	1	APH24008593	Cı	urrent Ward / Bed	Γ	1		
	F		Re	eceiving Date & Time	:	09-03-2024 13:31		
	Т		Re	eporting Date & Time	⋷	09-03-2024 15:40		

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

HBA1C (Turbidimetric Immuno-inhibition)	Н	6.5	%	4.0 - 6.2

INTERPRETATION:

HbA1c %	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.

** End of Report **

IMPORTANT INSTRUCTIONS

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

DR. ASHISH RANJAN SINGH

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: ULTRASOUND

Patient Name	:	MRS. JANAKI KUMARI	IPD No.	:	
Age	:	52 Yrs 9 Mth	UHID	T:	APH000014332
Gender	:	FEMALE	Bill No.	T:	APHHC240000397
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-03-2024 09:11:50
Ward	:		Room No.	:	
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refused	bv	patient

	Er	ıd of	Rep	ort	
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Prepare By. MD.SALMAN

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.

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Ref. Consultant	Г	MEDIWHEEL	Ward / Bed		1		
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BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference
				Interval

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)	107.0	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)

S.PROTEIN-TOTAL (Biuret)	Н	8.7	g/dL	6 - 8.1

** End of Report **

IMPORTANT INSTRUCTIONS

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

DR. ASHISH RANJAN SINGH

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			Reporting Date & Time	ŀ	09-03-2024 15:40		

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

HBA1C (Turbidimetric Immuno-inhibition)	Н	6.5	%	4.0 - 6.2

INTERPRETATION:

HbA1c %	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.

** End of Report **

IMPORTANT INSTRUCTIONS

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

DR. ASHISH RANJAN SINGH

Bill No.	1:	APHHC240000397	Bill Date	09-03-2024 09:11		
Patient Name	1	MRS. JANAKI KUMARI	UHID	APH000014332		
Age / Gender	1	52 Yrs 9 Mth / FEMALE	Patient Type	OPD	If PHC :	
Ref. Consultant	1:	MEDIWHEEL	Ward / Bed	1		
Sample ID	:	APH24008594	Current Ward / Bed	1		
	1:		Receiving Date & Time	09-03-2024 13:31		
	Т		Reporting Date & Time	09-03-2024 17:25		

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

URINE-SUGAR NEGATIVE

** End of Report **

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Patient Name	F	MRS. JANAKI KUMARI	UHID		APH000014332		
Age / Gender	F	52 Yrs 9 Mth / FEMALE	Patient Type		OPD	If PHC :	
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Sample ID	1	APH24008490	Current Ward / Bed		1		
	:		Receiving Date & Time	:	09-03-2024 09:46		
	Г		Reporting Date & Time	:	09-03-2024 16:56		

HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE(AVOVE-40)@2800

ESR (Westergren)	Н	31	mm 1st hr	0 - 20

** End of Report **

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