Bill No.	:	APHHC240000395	E	Bill Date	T	09-03-2024 08:54		
Patient Name	:	MRS. SWATI KUMARI	ι	JHID	1	APH000021279		
Age / Gender	:	35 Yrs 9 Mth / FEMALE	F	Patient Type	1	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	V	Nard / Bed	1	1		
Sample ID	:	APH24008480	C	Current Ward / Bed	1	1		
	:		F	Receiving Date & Time	1	09-03-2024 09:44		
	Г		F	Reporting Date & Time	F	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 BELOW40@2550

# CBC -1 (COMPLETE BLOOD COUNT)

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		6.5	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.4	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	11.7	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		37.5	%	36 - 46
MEAN CORPUSCULAR VOLUME		86.4	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	26.9	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	L	31.1	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		173	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		43.5	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		14.0	%	11.6 - 14

#### DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	65	mm 1st hr	0 - 20
BASOPHILS		0	%	0 - 1
			0.4	2 4
EOSINOPHILS		1	%	1 - 5
MONOCYTES		6	%	2 - 10
LYMPHOCYTES		25	%	20 - 40
NEUTROPHILS		68	%	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.	:	APHHC240000395	Bill Date	:	09-03-2024 08:54		
Patient Name	:	MRS. SWATI KUMARI	UHID	1	APH000021279		
Age / Gender	:	35 Yrs 9 Mth / FEMALE	Patient Type	1	OPD If PHC :		
Ref. Consultant		MEDIWHEEL	Ward / Bed	1	1		
Sample ID	:	APH24008619	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	09-03-2024 14:01		
	П		Reporting Date & Time	:	09-03-2024 17:24		

### **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		30 mL			
COLOUR		Pale Straw		Pale Yellow	
TURBIDITY	Clear				

#### **CHEMICAL EXAMINATION**

PH (Double pH indicator method)	7.5	5.0 - 8.5
PROTEINS (Protein-error-of-indicators)	Negative	Negative
SUGAR (GOD POD Method)	Negative	Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	1.010	1.005 - 1.030

#### MICROSCOPIC EXAMINATION

LEUCOCYTES		1-2	/HPF	0 - 5			
RBC's		Nil					
EPITHELIAL CELLS	2-3						
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.	:	APHHC240000395	Bill Date	:	09-03-2024 08:54		
Patient Name	:	MRS. SWATI KUMARI	UHID	:	APH000021279		
Age / Gender		35 Yrs 9 Mth / FEMALE	Patient Type	:	OPD If PHC :		
Ref. Consultant		MEDIWHEEL	Ward / Bed	:	1		
Sample ID	:	APH24008628	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	09-03-2024 15:44		
	П		Reporting Date & Time	:	09-03-2024 16:41		

#### **BIOCHEMISTRY REPORTING**

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

#### MEDIWHEEL FULL BODY HEALTH CHECKUP\_FEMALE BELOW40@2550

BLOOD UREA Urease-GLDH,Kinetic	24	mg/dL	15 - 45
BUN (CALCULATED)	11.2	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	0.6	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)	87.0	mg/dL	70 - 100
A 12	 	/ 11	

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) 84.0 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)		141	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	44	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection		88	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		59	mg/dL	0 - 160
NON-HDL CHOLESTROL		97.0	mg/dL	0 - 125
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
LDL CHOLESTROL / HDL CHOLESTROL		2.0		½Average 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		12	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)	0.59	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	0.13	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	0.46	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	8.0	g/dL	6 - 8.1
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)	4.0	g/dL	

ill No.	:	APHHC240000395			Bill Date			09-03-2024 08:54			
atient Name	1:	MRS. SWATI KUMARI			UHID		:	APH000021279			
ge / Gender	1:	35 Yrs 9 Mth / FEMALE			Patient Type		:	OPD	If PHC		
ef. Consultant	1:	MEDIWHEEL	Ward / Bed			:	1				
ample ID	1:	APH24008628	Current Ward / Bed			:	1				
	1:			Receiving Date & Time			:	09-03-2024 15:44			
	$\top$				Reporting Date & Tir	me	:	09-03-2024 16:41			
S.GLOBULIN			Н	4.	0	g/dL		2.8-3.8			
A/G RATIO			L	1.	00			1.5 - 2	.5		
ALKALINE PH	lOSI	PHATASE IFCC AMP BUFFER		65	.0	IU/L		42 - 98			
ASPARTATE.	AMI	NO TRANSFERASE (SGOT) (IFCC)		25	.0	IU/L		10 - 42			
ALANINE AM	INO	TRANSFERASE(SGPT) (IFCC)		25	.5	IU/L		10 - 40			
GAMMA-GLU	TAM	IYLTRANSPEPTIDASE (IFCC)		15	.7	IU/L		7 - 35			
LACTATE DE	HYD	PROGENASE (IFCC; L-P)		18	6.6	IU/L		0 - 248	3		
C DD OTELL T				10.0	<b>.</b>	1 - 7.01					
S.PROTEIN-1	OTA	AL (Biuret)		8.0	J	g/dL		6 - 8.1			
URIC ACID u	icase ·	- Trinder		4.4	<b>,</b>	mg/c	JL	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.	:	APHHC240000395	Bill Date	F	09-03-2024 08:54		
Patient Name	:	MRS. SWATI KUMARI	UHID		APH000021279		
Age / Gender	:	35 Yrs 9 Mth / FEMALE	Patient Type		OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed		1		
Sample ID	:	APH24008628	Current Ward / Bed		1		
	:		Receiving Date & Time	-	09-03-2024 15:44		
			Reporting Date & Time		09-03-2024 16:41		

Sample Type: EDTA Whole Blood, Plasma, 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.

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

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000395	Bill Date		09-03-2024 08:54		
Patient Name	F	MRS. SWATI KUMARI	UHID	:	APH000021279		
Age / Gender	F	35 Yrs 9 Mth / FEMALE	Patient Type	:	OPD	If PHC	1:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	:	1		
Sample ID	1	APH24008481	Current Ward / Bed	:	1		
	1		Receiving Date & Time	:	09-03-2024 09:44		
	Ť		Reporting Date & Time	:	09-03-2024 17 39		

### **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)	"B"
RH TYPE	POSITIVE

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

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

Ashish

DR. ASHISH RANJAN SINGH

Bill No.	1:	APHHC240000395	Bill Date	Ti	09-03-2024 08:54		
Patient Name	F	MRS. SWATI KUMARI	UHID	1	APH000021279		
Age / Gender	F	35 Yrs 9 Mth / FEMALE	Patient Type	1	OPD	If PHC	:
Ref. Consultant		MEDIWHEEL	Ward / Bed	1	1		
Sample ID		APH24008484	Current Ward / Bed	1	1		
	1		Receiving Date & Time	1:	09-03-2024 09:44		
	Т		Reporting Date & Time	1:	09-03-2024 17:10		

### **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)		2.63	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.32	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	Н	6.88	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

# **DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING**

Report: ULTRASOUND

Patient Name	:	MRS. SWATI KUMARI	IPD No.	:	
Age	T:	35 Yrs 9 Mth	UHID	:	APH000021279
Gender	1:	FEMALE	Bill No.	:	APHHC240000395
Ref. Doctor	1:	MEDIWHEEL	Bill Date	:	09-03-2024 08:54:09
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 11:09:59

#### **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 post-operative status.

CBD is normal in calibre (measures 5.3 mm).

Pancreas is normal in size and echotexture.

Spleen is normal in size (7.6 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (10.4 cm), Left kidney (10.6 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is retroverted (measures 7.2 x 5.5 x 4.3 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 (8.3 mm).

Both ovaries are normal in size and echotexture. Right ovary measures 2.7 x 1.8 cm, left ovary measures 2.4 x 1.9 cm.

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.	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.

MD.SALMAN

# **DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING**

Report: XRAY

Patient Name	:	MRS. SWATI KUMARI	IPD No.	:	
Age	:	35 Yrs 9 Mth	UHID	:	APH000021279
Gender	:	FEMALE	Bill No.	:	APHHC240000395
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	09-03-2024 08:54:09
Ward	:		Room No.	:	
			Print Date	:	09-03-2024 12:59:56

### **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.

-cusc	iato o	linical	. y .

.....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.