DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report: XRAY

Patient Name	:	MRS. ANURADHA SINGH	IPD No.	:	
Age	:	30 Yrs 7 Mth	UHID	T:	APH000020770
Gender	:	FEMALE	Bill No.	:	APHHC240000284
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	24-02-2024 10:30:05
Ward	:		Room No.	:	
			Print Date	:	24-02-2024 16:00:47

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.

	E	End of	Repo	rt
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Prepare By. MD.SALMAN 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: ULTRASOUND

Patient Name	:	MRS. ANURADHA SINGH	IPD No.	:	
Age	:	30 Yrs 7 Mth	UHID	T:	APH000020770
Gender	:	FEMALE	Bill No.	T:	APHHC240000284
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	24-02-2024 10:30:05
Ward	:		Room No.	:	
			Print Date	:	24-02-2024 12:21:08

WHOLE ABDOMEN:

Both the hepatic lobes are normal in size and echotexture (Liver measures 11.8 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 (9.4 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (8.1 cm), Left kidney (8.4 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder appears normal.

Uterus is anteverted (measures 8.0 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 (3.9 mm).

Both ovaries are normal in size and echotexture.

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

No significant lymphadenopathy seen.

No dilated bowel loop seen.

Diagon correlate dinically

IMPRESSION:- No significant abnormality detected.

riease correlate cirrically							
	End of Report						
Prepare By. MD.SALMAN	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.

Bill No.	Г	APHHC240000284	Bill Date	1:	24-02-2024 10:30		
Patient Name	Г	MRS. ANURADHA SINGH	UHID	1	APH000020770		
Age / Gender	Г	30 Yrs 7 Mth / FEMALE	Patient Type	1	OPD	If PHC	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed	1	1		
Sample ID		APH24006475	Current Ward / Bed		1		
	F		Receiving Date & Time	1	24-02-2024 15:51		
	Г		Reporting Date & Time	1	24-02-2024 23:49		

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	20 mL	
COLOUR	Pale Straw	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)	1.010	1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES		2-3 /HPF 0 - 5						
RBC's		Nil						
EPITHELIAL CELLS		5-7						
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.	F	APHHC240000284	Bill Date	F	24-02-2024 10:30		
Patient Name	1	MRS. ANURADHA SINGH	UHID	Г	APH000020770		
Age / Gender	F	30 Yrs 7 Mth / FEMALE	Patient Type	Г	OPD	If PHC :	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed		1		
Sample ID	1	APH24006378	Current Ward / Bed		1		
	:		Receiving Date & Time	:	24-02-2024 13:16		
	Γ		Reporting Date & Time		27-02-2024 17:52		

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)	3.03	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.45	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	1.64	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.	:	APHHC240000284	Bill Date	1:	24-02-2024 10:30		
Patient Name	F	MRS. ANURADHA SINGH	UHID	1	APH000020770		
Age / Gender	F	30 Yrs 7 Mth / FEMALE	Patient Type	1	OPD I	f PHC :	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	1	APH24006375	Current Ward / Bed		1		
	1		Receiving Date & Time	1:	24-02-2024 13:16		
	Γ		Reporting Date & Time	1:	25-02-2024 02:56		

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)	"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.	F	APHHC240000284	Bill Date	:	24-02-2024 10:30		
Patient Name	1	MRS. ANURADHA SINGH	UHID	1:	APH000020770		
Age / Gender	F	30 Yrs 7 Mth / FEMALE	Patient Type	1	OPD	If PHC :	
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	1	APH24006484	Current Ward / Bed	:	1		
	1		Receiving Date & Time	:	24-02-2024 15:59		
	Γ		Reporting Date & Time	1:	24-02-2024 17:07		

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		15	mg/dL	15 - 45
BUN (CALCULATED)		7.0	mg/dL	7 - 21
CREATININE-SERUM (Modified Jaffe's Kinetic)	L	0.5	mg/dL	0.6 - 1.1
GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		80.0	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)

GLUCUSE-PL	ASMA (POST PRANDIAL)	(UV Hexokinase)	86.0	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)		148	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	:	52	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection		86	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		51	mg/dL	0 - 160
NON-HDL CHOLESTROL	!	96.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		2.8		%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		1.7		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
CHOLESTROL-VLDL		10	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)	0.99	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	0.20	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	0.79	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	6.9	g/dL	6 - 8.1
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)	3.9	g/dL	

Bill No.	Г			Bill Date		:	24-02-2024 10:30					
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Age / Gender	1	30 Yrs 7 Mth / FEMALE		Patient Type			:	OPD	If PHC :			
Ref. Consultant	T	MEDIWHEEL			Ward / Bed		:	1				
Sample ID	1	APH24006484			Current Ward / Bed		:	1				
	1				Receiving Date & Tim			1e	:	24-02-2024 15:59		
					Reporting Date & Tim	ı e	:	24-02-2024 17:07	,			
S.GLOBULIN				3.0		g/dL		2.8-3.8	3			
A/G RATIO			L	1.3	30			15-2	2.5			
ALKALINE PHO	OSF	PHATASE IFCC AMP BUFFER		67	6	IU/L		42 - 98	3			
ASPARTATE A	ΜII	NO TRANSFERASE (SGOT) (IFCC)		25	8	IU/L		10 - 42	2			
ALANINE AMIN	VO	TRANSFERASE(SGPT) (IFCC)		24	2	IU/L		10 - 40)			
GAMMA-GLUT	ΑM	YLTRANSPEPTIDASE (IFCC)		9.8		IU/L		7 - 35				
LACTATE DEH	ΥD	ROGENASE (IFCC; L-P)		16	3.5	IU/L		0 - 24	8			
C DROTEIN TO	\T ^	.1		6.9		g/dL		6 - 8.1	1			
S.PROTEIN-TO	JΙΡ	AL (Biuret)		10.8		y/aL		0 - 0.1	<u> </u>			
URIC ACID Urica	se -	Trinder		2.6		mg/d	IL	2.6 - 7	7.2			

** End of Report **

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

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240000284	Bill Date	:	24-02-2024 10:30		
Patient Name	:	MRS. ANURADHA SINGH	UHID		APH000020770		
Age / Gender		30 Yrs 7 Mth / FEMALE	Patient Type		OPD	If PHC	:
Ref. Consultant		MEDIWHEEL	Ward / Bed		1		
Sample ID	:	APH24006484	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	24-02-2024 15:59		
			Reporting Date & Time	:	24-02-2024 17:07		

Sample Type: EDTA Whole Blood, Plasma, Serum

MEDIWHEEL FULL BODY HEALTH CHECKUP_FEMALE BELOW40@2550

HBA1C (Turbidimetric Immuno-inhibition)	4.8	%	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
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Bill No.	Г	APHHC240000284	Bill Date	1:	24-02-2024 10:30		
Patient Name	Г	MRS. ANURADHA SINGH	UHID	1	APH000020770		
Age / Gender	Г	30 Yrs 7 Mth / FEMALE	Patient Type	1	OPD	If PHC	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed	1	1		
Sample ID		APH24006374	Current Ward / Bed		1		
	F		Receiving Date & Time	1	24-02-2024 13:16		
	Г		Reporting Date & Time	1	24-02-2024 17:13		

HAEMATOLOGY REPORTING

Test (Methodology)		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)		3.9	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		3.9	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)		12.2	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		36.4	%	36 - 46
MEAN CORPUSCULAR VOLUME		93.3	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		31.3	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.5	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		150	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)		47.0	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		14.1	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	Н	32	mm 1st hr	0 - 20		
DASOPHILS 0 - 1						
BASOPHILS		n	%	0 - 1		
EOSINOPHILS		1	%	1 - 5		
MONOCYTES		5	%	2 - 10		
LYMPHOCYTES		35	%	20 - 40		
NEUTROPHILS		59	%	40 - 80		

** End of Report **

IMPORTANT INSTRUCTIONS
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DR. ASHISH RANJAN SINGH

MBBS,MD CONSULTANT

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