



Name	: MRS. SANGEETA DEVI	UHID No.	: AFB000324755
FATHER	: SHIV KUMAR	Date	: 27-07-2024 11:22:58
Age / Gender	: 45 Yrs / FEMALE	Doctor / Unit	: DR. PRABHSARAN AHUJA /
CPG	: CORPORATE CASH/ArcoFemi HealthCare Ltd	Department	: Health Check Up
Inst. Name	: ArcoFemi Healthcare Ltd		
Address	: H.NO. E-607, HAPPY HOMES, SEC-76, FARIDABAD, HARYANA, INDIA		

DR. PRABHSARAN AHUJA, MBBS, Director - PHC-Health Check Up,
PHC (1st Floor), OPD Timings Mon to Sat 9:00 a.m to 3:00p.m.

Note :
Nature of illness, prognosis, potential side effects of medication used, risk of allergic reaction, need for follow-up & monitoring has been explained to the Patient/attendants in their own language.
WHEN TO OBTAIN URGENT CARE : In case high grade fever, recurrent vomiting, profuse diarrhea, severe oral ulcers, skin rash breathlessness, dizziness, loss of consciousness, bleeding from any site or new relevant/ alarming symptom

UHID 324755
DOB 7/27/1979 45 Years

MRS SANGEETA DEVI
Female

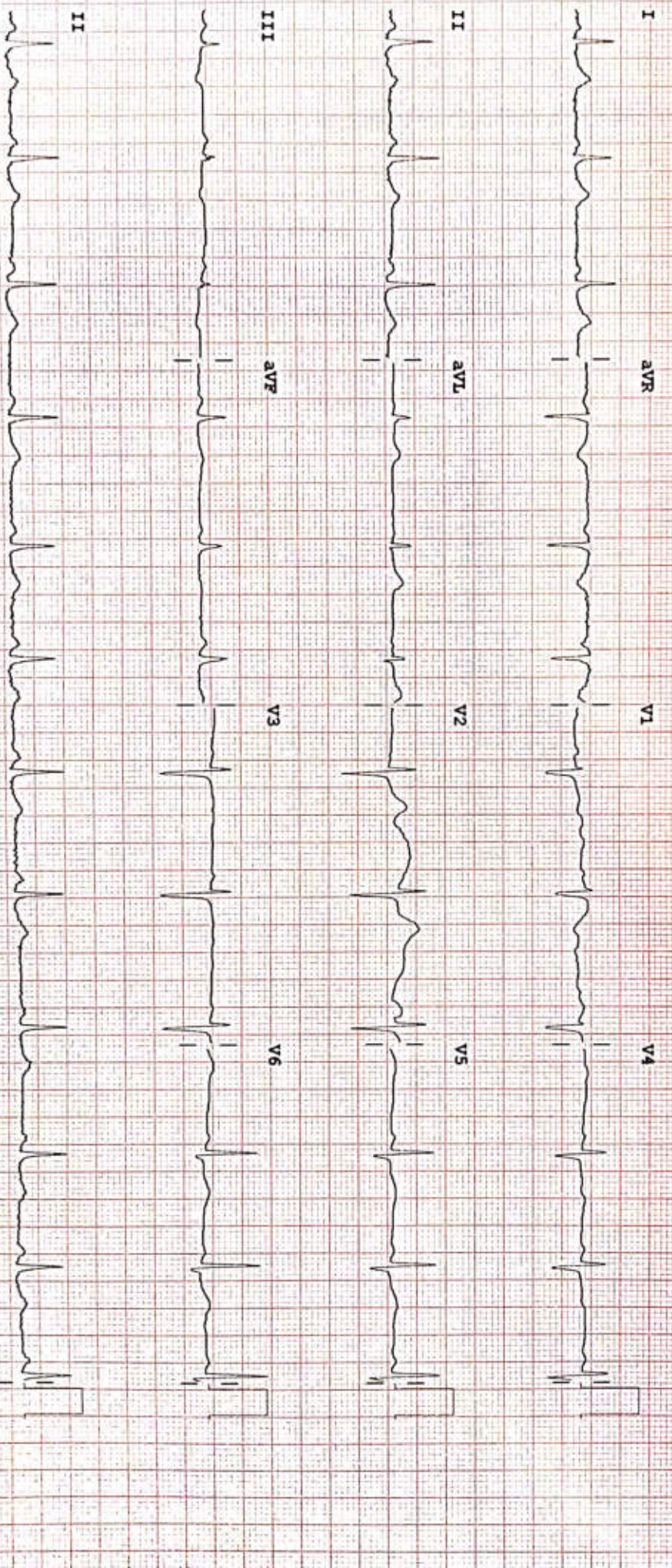
7/27/2024 11:34:08 AM
ASIAN HOSPITAL

Rate 68

PR 146
QRSD 78
QT 383
QTc 408

--AXIS--
P 58
QRS 40
T 13

12 Lead; Standard Placement



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

100B

P?

MEDTRONIC INC. OK USA Eq per MARS3A

NON INVASIVE CARDIOLOGY

Patient Name	: MRS. SANGEETA DEVI	IPD No.	:	
Age	: 45 Yrs	UHID	:	AFB000324755
Gender	: FEMALE	Bill No.	:	AFBHC240007673
Ref. Doctor	: DR. PRABHSARAN AHUJA	Bill Date	:	27-07-2024 11:31:07
Ward	:	Room No.	:	
		Procedure Date	:	27-07-2024 12:07:20

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENTS	ABSOLUTE VALUE		NORMAL VALUE
Aortic Root Diameter	2.4		2.0-3.7cm < 2.2cm/M2
Aortic Valve Opening	N		1.5-2.6cm
Left Atrial Dimension	3.4		1.9-4.0cm < 2.2cm/M2
RV Dimensions	N		0.7-2.6cm
RV thickness	N		0.3-0.9cm
LV ED Dimension	3.9		3.7-5.6 cm < 3.2cm /M2
LV ES Dimension	2.8		2.2-4.0 cm
IVS thickness	ED - 1.0	ES-1.4	0.6-1.2cm
LVPW Thickness	ED - 1.0	ES-1.3	0.5-1.1cm
IVS/ LVPW Ratio	N		
Mitral Valve	DE-N	EF -N	

INDICES OF LV FUNCTION		
EPSS		<9mm
FS%		24-42%
LV Ejection Fraction	60%	60+/-6%

NON INVASIVE CARDIOLOGY

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MORPHOLOGICAL DATA

Mitral Valve : AML PML	Normal	Interatrial Septum	Intact
Aortic Valve	Normal	Interventricular Septum	Intact
Tricuspid Valve	Normal	Pulmonary Artery	Normal
Pulmonary Valve	Normal	Aorta	Normal
Right Ventricle	Normal	Right Atrium	Normal
Left Ventricle	Normal	Left Atrium	Normal

DOPPLER STUDY

	Cm/s	Cm/s	
MITRAL VELOCITY	E-95	A-51	MR 2/4
TRICUSPID VELOCITY	cm/s		TR 2/4
AORTIC VELOCITY	100 cm/s		AR 0/4
PULMONARY VELOCITY	78 cm/s		PR 0/4
PA Pressure	38 mmHg		

NON INVASIVE CARDIOLOGY

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NON INVASIVE CARDIOLOGY

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DOPPLER STUDY

	Cm/s	Cm/s	
MITRAL VELOCITY	E-95	A-51	MR 2/4
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NON INVASIVE CARDIOLOGY

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Age	: 45 Yrs	UHID	:	AFB000324755
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COLOUR FLOW MAPPING

Mild MR, Mild TR.

FINAL IMPRESSION

1. No RWMA, LVEF-60%.
2. Normal cardiac chamber dimension.
3. Mild MR, Mild TR (PASP=38mmHg).
4. Normal mitral inflow pattern.
5. No clot/mass/vegetation/PE.

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MD.DM(Cardiology)FSCAI(USA)
Chairman-Cardiology & Cath Lab


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MBBS, PGDCC
Fellowship in Non Invasive
Cardiology
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DR. PRATEEK CHAUDHARY
MBBS,MD,DM(Cardio)
Sr. Consultant Cardiology
Interventional Cardiologist.

DR. DIWAKAR KUMAR
MBBS,MD,DNB(Cardiology)
Consultant Cardiology

For The perusal of a medical professional only

The content of this report is only an opinion based on images and is therefore subject to inherent technical limitations.

It is not the diagnosis & must be correlated clinically.
NOT FOR MEDICOLEGAL PURPOSES
.....End of Report.....

Prepare By.
KUMAR.HRISHIK
ES



FINAL REPORT

Bill No. : AFBHC240007673	Bill Date : 27-07-2024 11:31
Patient Name : MRS. SANGEETA DEVI	UHID : AFB000324755
Age / Gender : 45 Yrs / FEMALE	Patient Type : OPD
Ref. Consultant : DR. PRABHSARAN AHUJA	Ward / Bed : /
Sample ID : AFB24244990	Current Ward / Bed : /
	Receiving Date & Time : 27-07-2024 11:37
	Reporting Date & Time : 27-07-2024 13:40

SEROLOGY REPORTING

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

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE(2D ECHO)

THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.29	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.04	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		0.32	mIU/L	0.27-4.20

**** End of Report ****

IMPORTANT INSTRUCTIONS

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Laboratory test results are to be clinically correlated.
Storage and discard of Specimen shall be as per AIMS specimen retention policy.
Test results are not valid for Medico - Legal purposes.

Results are Verified By

DR. C.P. SHARMA
Ph.D.(Biochemistry)
BIOCHEMIST

DR. SHILPA GUPTA
MD, PATHOLOGY
Associate Director

DR. RAMESH CHANDNA
MD, MICROBIOLOGY, PGDHHM
Chairman (Quality, Safety, LAB Services & Blood Bank)

DR. UMA RANI
MD, PATHOLOGY
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Patient Name	: MRS. SANGEETA DEVI	UHID	: AFB000324755
Age / Gender	: 45 Yrs / FEMALE	Patient Type	: OPD If PHC : :
Ref. Consultant	: DR. PRABHSARAN AHUJA	Ward / Bed	: /
Sample ID	: AFB24244989	Current Ward / Bed	: /
		Receiving Date & Time	: 27-07-2024 11:37
		Reporting Date & Time	: 27-07-2024 13:39

BIOCHEMISTRY REPORTING

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

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE(2D ECHO)

GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		84.0	mg/dL	70 - 100
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Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.
 (As per American Diabetes Association recommendation)

KFT/RFT- KIDNEY/RENAL PANEL 1

BLOOD UREA Urease-GLDH/Kinetic	L	11	mg/dL	15 - 45
CREATININE-SERUM (Modified Jaffe s Kinetic)	L	0.5	mg/dL	0.6 - 1.1
SODIUM-SERUM (Indirect Ion-Selective Electrode)		137	m.mol/L	135 - 145
POTASSIUM-SERUM (Indirect Ion-Selective Electrode)		4.8	m.mol/L	3.5 - 5.1
CHLORIDE-SERUM (Indirect Ion-Selective Electrode)		107	m.mol/L	98 - 107

SERUM PROTEINS

S.PROTEIN-TOTAL (Biuret)		7.2	g/dL	6.6 - 8.3
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		3.7	g/dL	3.5 - 5.2
S.GLOBULIN		3.5	g/dL	2.8-3.8
A/G RATIO	L	1.06		1.5 - 2.5

LIPID PROFILE

CHOLESTROL-TOTAL (CHO-POD)		159	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	36	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	H	120	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)		123	mg/dL	0 - 160
NON-HDL CHOLESTROL		123.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		4.4		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		3.3		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		25	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:
 - Cigarette smoking.
 - Hypertension.
 - Family history of premature coronary heart disease.
 - Pre-existing coronary heart disease.

LIVER FUNCTION TESTS (LFT)



FINAL REPORT

Bill No.	: AFBHC240007673	Bill Date	: 27-07-2024 11:31
Patient Name	: MRS. SANGEETA DEVI	UHID	: AFB000324755
Age / Gender	: 45 Yrs / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: DR. PRABHSARAN AHUJA	Ward / Bed	: /
Sample ID	: AFB24244989	Current Ward / Bed	: /
		Receiving Date & Time	: 27-07-2024 11:37
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BILIRUBIN-TOTAL (DPD)		0.70	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)		0.14	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.56	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)		7.2	g/dL	6.6 - 8.3
ALBUMIN-SERUM (Dye Binding Bromocresol Green)		3.7	g/dL	3.5 - 5.2
S.GLOBULIN		3.5	g/dL	2.8-3.8
A/G RATIO	L	1.06		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)	H	132.0	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (SGOT) (IFCC)		25.0	IU/L	0 - 35
ALANINE AMINO TRANSFERASE(SGPT) (IFCC)		18.0	IU/L	0 - 35
GAMMA-GLUTAMYLTRANSPEPTIDASE (IFCC)		16.0	IU/L	0 - 38
LACTATE DEHYDROGENASE (IFCC; L-P)		188.0	IU/L	0 - 248

**** End of Report ****

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FINAL REPORT

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Patient Name	: MRS. SANGEETA DEVI	UHID	: AFB000324755
Age / Gender	: 45 Yrs / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: DR. PRABHSARAN AHUJA	Ward / Bed	: /
Sample ID	: AFB24244988	Current Ward / Bed	: /
		Receiving Date & Time	: 27-07-2024 11:37
		Reporting Date & Time	: 27-07-2024 13:53

BLOOD BANK REPORTING

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

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE(2D ECHO)

BLOOD GROUP (ABO & RH)

ABO GROUP	AB
RH TYPE	NEGATIVE
DU	NEGATIVE

**** End of Report ****

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Consultant


FINAL REPORT

Reg. No.	: AFBHC240007673	Bill Date	: 27-07-2024 11:31
Patient Name	: MRS. SANGEETA DEVI	UHID	: AFB000324755
Age / Gender	: 45 Yrs / FEMALE	Patient Type	: OPD
Ref. Consultant	: DR. PRABHSARAN AHUJA	Ward / Bed	: /
Sample ID	: AFB24245079	Current Ward / Bed	: /
		Receiving Date & Time	: 27-07-2024 12:31
		Reporting Date & Time	: 27-07-2024 16:08

CLINICAL PATH REPORTING

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

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE(2D ECHO)
PHYSICAL EXAMINATION

QUANTITY		30 mL	
COLOUR		Pale yellow	Pale Yellow
TURBIDITY		Slight	

CHEMICAL EXAMINATION

PH (Double pH indicator method)		5.0	5.0 - 8.5
PROTEINS (Protein-error-of-indicators)		Negative	Negative
SUGAR (GOD POD Method)		Negative	Negative
SPECIFIC GRAVITY, URINE (Apparent pKa change)	L	1.005	1.005 - 1.030
UROBILINOGEN (Modified Erlich Reaction)		Normal	NORMAL
BILIRUBIN (Azo Coupling)		Negative	NEGATIVE
KETONES (Acetoacetic acid reaction with sodium nitroprusside)		Negative	
NITRITE (Kinetic cadmium-reduction)		Negative	NEGATIVE

MICROSCOPIC EXAMINATION

LEUCOCYTES		0-1	/HPF	0 - 5
RBCS		Nil		
EPITHELIAL CELLS (URINE)		10-15		
CASTS		Nil		
CRYSTALS		Nil		

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Sample ID	: AFB24244987	Current Ward / Bed	: /
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HAEMATOLOGY REPORTING

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

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE(2D ECHO)

ESR (Westergren)		15	mm 1st hr	0 - 20
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CBC -1 (COMPLETE BLOOD COUNT)

TEST	FLAG	RESULT	UOM	BIOL. REF. INT.
TOTAL LEUCOCYTE COUNT (Flow Cytometry)	H	11.6	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.1	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)		12.9	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		38.5	%	36 - 46
MEAN CORPUSCULAR VOLUME		94.8	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		31.8	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		33.5	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		282	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	46.5	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)		13.4	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

TEST	RESULT	UOM	BIOL. REF. INT.
NEUTROPHILS	56	%	40 - 80
LYMPHOCYTES	34	%	20 - 40
MONOCYTES	7	%	2 - 10
EOSINOPHILS	3	%	1 - 5
BASOPHILS	0	%	0 - 1

GLYCATED HAEMOGLOBIN (HBA1C)

HBA1C (HPLC)		5.2	%	4.27 - 6.07
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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

recent food intake, it is a more useful tool for monitoring diabetics.

End of Report

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DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MRS. SANGEETA DEVI	IPD No.	:	
Age	: 45 Yrs	UHID	:	AFB000324755
Gender	: FEMALE	Bill No.	:	AFBHC240007673
Ref. Doctor	: DR. PRABHSARAN AHUJA	Bill Date	:	27-07-2024 11:31:07
Ward	:	Room No.	:	
		Print Date	:	30-07-2024 10:35:29

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.
LALITA.ANAND

DR. RAVI GARG, MD (Radiodiagnosis),
Fellowship in Sonography, Specialist in
Fetal Medicine,
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. SANGEETA DEVI	IPD No.	:	
Age	: 45 Yrs	UHID	:	AFB000324755
Gender	: FEMALE	Bill No.	:	AFBHC240007673
Ref. Doctor	: DR. PRABHSARAN AHUJA	Bill Date	:	27-07-2024 11:31:07
Ward	:	Room No.	:	
		Print Date	:	27-07-2024 15:45:27

USG Abdomen:

Sonographic evaluation of the abdomen & pelvis was performed with a curvilinear transducer, in transverse and longitudinal planes, with gray scale and color Doppler evaluations.

Liver: Measures 13cms in size- Normal in size and **increased in texture**. No evidence of any focal lesions / IHBRD noted. Normal Portal vein caliber noted.

GB: Well-distended; Normal wall-thickness noted. The lumen appears echofree at present scan. CBD is normal in calibre.

Spleen: Normal in size and normal in texture.

Pancreas: Visualized parts are normal in size and texture. No evidence of any focal lesions / calcifications noted.

Kidneys: Normal in size, shape and echotexture; CMD maintained bilaterally. No evidence of any hydronephrosis noted bilaterally. **A small calculus of size ~3.0mm is seen at mid-pole of left kidney.**

Urinary Bladder: Well distended; Normal wall thickness noted. No evidence of any calculi noted.

Uterus: Anteverted; Normal in size & texture. ET: 3.0mm. **A small subserosal fibroid is noted in anterior wall, measuring ~8.0x5.1mm.**

Ovaries: Bilateral ovaries are normal in size; No evidence of any focal lesions noted in bilateral adnexa.

POD: Clear

Visualized bowel shows normal wall thickness and peristaltic movements. No evidence of any sonographically significant free fluid noted.

IMPRESSION: Sonographic features are suggestive of:

- **Grade I hepatosteatorosis.**
- **Left nephrolithiasis.**
- **Small subserosal uterine fibroid.**

Suggested: Clinical correlation.

.....End of Report.....

Prepare By.
SAPNA.ARYA

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Fellowship in Sonography, Specialist in
Fetal Medicine,
Consultant