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

Report: ULTRASOUND

Patient Name	:	MR. VIJAY KUMAR SINGH	IPD No.	T	
Age	:	39 Yrs 6 Mth	UHID	T	APH000024442
Gender	:	MALE	Bill No.	T:	APHHC240001123
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	08-06-2024 08:39:50
Ward	:		Room No.	:	
			Print Date	:	08-06-2024 11:02:53

# **WHOLE ABDOMEN:**

Both the hepatic lobes are normal in size and echotexture (Liver measures 13.1 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 (8.5 cm) and echotexture.

Both kidneys are normal in size and echotexture (Right kidney (9.2 cm), Left kidney (10.5 cm). Cortico-medullary distinction is maintained. No calculus or hydronephrosis seen.

Urinary bladder is distended and appears normal. Wall thickness is normal.

Prostate appears normal in size (Vol. 10.2 cc), outline and echotexture.

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. 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.

Bill No.	1:	APHHC240001123	Bill Date	:	08-06-2024 08:39		
Patient Name	F	MR. VIJAY KUMAR SINGH	UHID	:	APH000024442		
Age / Gender	F	39 Yrs 6 Mth / MALE	Patient Type	:	OPD	If PHC :	
Ref. Consultant		MEDIWHEEL	Ward / Bed	:	1		
Sample ID		APH24023736	Current Ward / Bed	:	1		
	:		Receiving Date & Time	-	08-06-2024 09:31		
	Г		Reporting Date & Time	:	08-06-2024 12:27		

#### **SEROLOGY REPORTING**

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

, ,,									
MEDIWHEEL FULL BODY HEALTH CHECKUP _MALE(ABOVE 40)@2550									
PROSTATIC SPECIFIC ANTIGEN(TOTAL) (ELFA)	0.32	ng/mL	0 - 4						

#### Note:

TPSA as a Tumor marker is used as an additional test for prognosis and monitoring of therapy for patients with diagnosed malignant tumors. It may offer a diagnostic value for screening patients with suspected malignancies, as high values may be experienced in situations like benign prostatic hyperplasia, prostatitis, bladder catheterisation, urinary retention, endoscopic examination. Value in between 4-10ng/ml may be an indication of Benign Prostate Hyperplasia or prostate Carcinoma, values greater than 10ng/ml may indicate high risk of Carcinoma.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.

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

IMPORTANT INSTRUCTIONS

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

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.

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240001123	Bill Date	1:	08-06-2024 08:39		
Patient Name	Г	MR. VIJAY KUMAR SINGH	UHID	T	APH000024442		
Age / Gender	F	39 Yrs 6 Mth / MALE	Patient Type	T	OPD	If PHC	1:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	F	APH24023736	Current Ward / Bed	T	1		
	F		Receiving Date & Time	T	08-06-2024 09:31		
	Г		Reporting Date & Time	F	08-06-2024 12:27		

Sample Type: Serum

# MEDIWHEEL FULL BODY HEALTH CHECKUP \_MALE(ABOVE 40)@2550

# THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)	3.40	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)	1.00	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	3.74	mIU/L	0.27-4.20

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

# **IMPORTANT INSTRUCTIONS**

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

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.

31

DR. ASHISH RANJAN SINGH MBBS,MD CONSULTANT

Bill No.	:	APHHC240001123	Bill Date	T	08-06-2024 08:39		
Patient Name	F	MR. VIJAY KUMAR SINGH	UHID	Г	APH000024442		
Age / Gender	F	39 Yrs 6 Mth / MALE	Patient Type	Г	OPD	If PHC	:
Ref. Consultant	1	MEDIWHEEL	Ward / Bed	Г	1		
Sample ID	:	APH24023775	Current Ward / Bed		1		
	1		Receiving Date & Time		08-06-2024 12:08		
	Г		Reporting Date & Time		08-06-2024 13:30		

#### **CLINICAL PATH REPORTING**

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

# MEDIWHEEL FULL BODY HEALTH CHECKUP \_MALE(ABOVE 40)@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)	1.025	1.005 - 1.030

#### MICROSCOPIC EXAMINATION

LEUCOCYTES		1-2	/HPF	0 - 5				
RBC's		Nil						
EPITHELIAL CELLS		0-1						
CASTS		Nil						
CRYSTALS		Nil						
LIRINE-SLIGAR		Nil						

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

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

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.

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240001123	Bill Date	1	08-06-2024 08:39		
Patient Name	:	MR. VIJAY KUMAR SINGH	UHID	1	APH000024442		
Age / Gender		39 Yrs 6 Mth / MALE	Patient Type	1	OPD	If PHC	:
Ref. Consultant		MEDIWHEEL	Ward / Bed	1	1		
Sample ID	:	APH24023732	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	08-06-2024 09:31		
	П		Reporting Date & Time	:	08-06-2024 10:58		

# **HAEMATOLOGY REPORTING**

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

#### MEDIWHEEL FULL BODY HEALTH CHECKUP \_MALE(ABOVE 40)@2550

#### **CBC -1 (COMPLETE BLOOD COUNT)**

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		5.4	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)	Н	5.7	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		13.9	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		46.6	%	40 - 50
MEAN CORPUSCULAR VOLUME	L	82.5	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	24.6	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	L	29.8	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)	L	140	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	Н	46.2	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	Н	15.8	%	11.6 - 14

#### DIFFERENTIAL LEUCOCYTE COUNT

ESR (Westergren)	10	mm 1st hr	0 - 10
ECD	10	mm 1 at hr	0 10
BASOPHILS	0	%	0 - 1
EOSINOPHILS	1	%	1 - 5
MONOCYTES	7	%	2 - 10
LYMPHOCYTES	27	%	20 - 40
NEUTROPHILS	65	%	40 - 80

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

#### **IMPORTANT INSTRUCTIONS**

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

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.

Ashish

DR. ASHISH RANJAN SINGH

Bill No.	:	APHHC240001123	Bill Date	1	08-06-2024 08:39		
Patient Name	:	MR. VIJAY KUMAR SINGH	UHID	1	APH000024442		
Age / Gender	:	39 Yrs 6 Mth / MALE	Patient Type	1	OPD	If PHC	:
Ref. Consultant	:	MEDIWHEEL	Ward / Bed	1	1		
Sample ID	:	APH24023812	Current Ward / Bed	:	1		
	:		Receiving Date & Time	:	08-06-2024 14:03		
	Г		Reporting Date & Time	:	08-06-2024 15 26		

#### **BIOCHEMISTRY REPORTING**

Te	st (Methodology)	Flag	Result	UOM	Biological Reference
		-			Interval
Sa	mnle Type: FDTA Whole Blood, Plasma, Serum	-		-	

#### MEDIWHEEL FULL BODY HEALTH CHECKUP \_MALE(ABOVE 40)@2550

	23	mg/dL	15 - 45
	10.7	mg/dL	7 - 21
L	0.7	mg/dL	0.9 - 1.3
	91.0	mg/dL	70 - 100
	L	10.7 L 0.7	10.7 mg/dL  L 0.7 mg/dL

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)	137.0	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)	Н	180	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition	L	35	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	Н	116	mg/dL	0 - 100
S.TRIGLYCERIDES (GPO - POD)	Н	170	mg/dL	0 - 160
NON-HDL CHOLESTROL	Н	145.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.1		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		1/2Average Risk < 1.0 Average Risk 1.0-3.6 2 Times Average Risk 3.7-6.3 3 Times Average Risk 6.4-8.0
CHOLESTROL-VLDL		34	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.
  - 2. Hypertension.
  - 3. Family history of premature coronary heart disease.
  - 4. Pre-existing coronary heart disease.

#### LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL (DPD)	0.66	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)	0.10	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT	0.56	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	7.3	g/dL	6 - 8.1

II No. : APHHC240001123				Bill Date		:	08-06-2024 08:39				
atient Name	1	MR. VIJAY KUMAR SINGH	UHID			:	APH000024442				
ge / Gender		39 Yrs 6 Mth / MALE	Patient Type		Patient Type		:	OPD If PHC :			
ef. Consultant					Ward / Bed	:	:	1			
ample ID					Current Ward / Bed		:	/ 08-06-2024 14:03			
	1				Receiving Date & Tin		:				
					Reporting Date & Time		:	08-06-2024 15:26			
ALBUMIN-SEF	ALBUMIN-SERUM (Dye Binding-Bromocresol Green)			4.3		g/dL		3.5 - 5.2			
S.GLOBULIN	S.GLOBULIN			3.0		g/dL		2.8-3.8			
A/G RATIO			L	1.43		IU/L		1.5 - 2.5			
ALKALINE PH	os	PHATASE IFCC AMP BUFFER	115.9		5.9			53 - 128			
ASPARTATE A	MI	NO TRANSFERASE (SGOT) (IFCC)		31.4		IU/L		10 - 42			
ALANINE AMI	NO	TRANSFERASE(SGPT) (IFCC)		32	.8	IU/L		10 - 40			
GAMMA-GLUT	A۱	1YLTRANSPEPTIDASE (IFCC)		31.1		IU/L		11 - 50			
LACTATE DEF	LACTATE DEHYDROGENASE (IFCC; L-P)			149.4		IU/L		0 - 248			
S.PROTEIN-T	OT/	AL (Biuret)		7.3	3	g/dL		6 - 8.1			
		, ,									
URIC ACID Uri	ase	- Trinder		6.0	)	mg/dl	L	2.6 - 7.2			

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

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

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.

DR. ASHISH RANJAN SINGH

Bill No.	T	APHHC240001123	Bill Date	T	08-06-2024 08:39			
Patient Name	Г	MR. VIJAY KUMAR SINGH	UHID	Г	APH000024442			
Age / Gender	Г	39 Yrs 6 Mth / MALE	Patient Type	Г	OPD	If PHC	:	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed		1			
Sample ID	1	APH24023812	Current Ward / Bed	1	1			
	F		Receiving Date & Time	1	08-06-2024 14:03			
	Г		Reporting Date & Time		08-06-2024 15:26			

Sample Type: EDTA Whole Blood, Plasma, Serum

#### MEDIWHEEL FULL BODY HEALTH CHECKUP MALE(ABOVE 40)@2550

HBA1C (Turbidimetric Immuno-inhibition)	6.0	%	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

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.

DR. ASHISH RANJAN SINGH

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

Report: XRAY

Patient Name	:	MR. VIJAY KUMAR SINGH	IPD No.	:	
Age	:	39 Yrs 6 Mth	UHID	:	APH000024442
Gender	1:	MALE	Bill No.	┌	APHHC240001123
Ref. Doctor	:	MEDIWHEEL	Bill Date	:	08-06-2024 08:39:50
Ward	:		Room No.	:	
			Print Date	:	08-06-2024 15:21:57

# **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.

	lease	COPPO	ata a	linical	llv,
г	ICasc	COLLE	iait c	mma	ıγ.

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

Prepare By. MD.SERAJ

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.

Bill No.	F	APHHC240001123	Bill Date	:	08-06-2024 08:39		
Patient Name	Γ	MR. VIJAY KUMAR SINGH	UHID	1	APH000024442		
Age / Gender	Г	39 Yrs 6 Mth / MALE	Patient Type		OPD	If PHC :	
Ref. Consultant	Г	MEDIWHEEL	Ward / Bed		1		
Sample ID		APH24023733	Current Ward / Bed		1		
	F		Receiving Date & Time	:	08-06-2024 09:31		
	Т		Reporting Date & Time		08-06-2024 14:09		

# **BLOOD BANK REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval

Sample Type: EDTA Whole Blood

#### MEDIWHEEL FULL BODY HEALTH CHECKUP \_MALE(ABOVE 40)@2550

BLOOD GROUP (ABO)	"A"
RH TYPE	POSITIVE

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

#### **IMPORTANT INSTRUCTIONS**

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

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.

St.

DR. ASHISH RANJAN SINGH