



TEST REPORT

Reg.No	: TPT0104328	Reg.Date	: 01-Oct-2023 /11:58
Name	: MR.KUMAR HARIJANA PAWAN	Collection	: 01-Oct-2023 /09:32
Age\Sex	: 29 Years\Male	Received	: 01-Oct-2023 /17:00
Referred By	: APOLLO CLINIC	Report	: 01-Oct-2023 /17:13
Referral Dr	: APOLLO CLINIC	Barcode	: 002067999400

Clinical Biochemistry
POST LUNCH BLOOD GLUCOSE (PLBS)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
POST LUNCH PLASMA GLUCOSE	110.32	mg/dL	Non Diabetic State: :70-140

Method:Hexokinase/GOD-POD

Sample Type : Flouride plasma(P)

Please Correlate With Clinical Findings If Necessary Discuss

* This Is an Electronically Authenticated Report *



**Dr.NAGENDRA
PRASAD**
MD PATH
Consultant Pathologist

**** END OF REPORT ****



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Clinical Pathology
COMPLETE URINE EXAMINATION (CUE)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
<u>PHYSICAL EXAMINATION</u>			
COLOUR	PALE YELLOW	-	Straw to Yellow
APPEARANCE	CLEAR	-	Clear
<u>CHEMICAL EXAMINATION</u>			
REACTION	6.0	-	4.6 - 8.0
Method:pH (Double) Indicator			
SPECIFIC GRAVITY	1.020	-	1.003 - 1.035
Method:pH Indicator			
PROTEINS	NEGATIVE	-	Negative
Method:Protein error of Indicator			
GLUCOSE	NEGATIVE	-	Negative
Method:GOD POD			
BILIRUBIN (BILE PIGMENTS)	NEGATIVE	-	Negative
Method:Diazonium Method/Fouchets Method			
BILE SALTS	ABSENT	-	Absent
Method:Hays Method			
KETONE BODIES	NEGATIVE	-	Negative
Method:Nitroprusside Reaction/Rotheras Method			
UROBILINOGEN	NORMAL	-	Normal
Method:Diazonium Method			
NITRITE	NEGATIVE	-	Negative
Method:Diazonium Method			
<u>MICROSCOPIC EXAMINATION</u>			
Pus Cells	2 - 4 /HPF	cells/hpf	0 - 4
RBC	NIL	cells/hpf	0 -2
Epithelial Cells	1- 2 /HPF	cells/hpf	0-4
CASTS	ABSENT	-	Absent
CRYSTALS	ABSENT	-	Absent
Others	NIL	-	
Blood	ABSENT	-	Absent
Method:Physical Examination			

Sample Type : URINE

Please Correlate With Clinical Findings If Necessary Discuss
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Clinical Biochemistry
FASTING BLOOD GLUCOSE (FBS)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
FASTING PLASMA GLUCOSE-	89.35	mg/dL	74-99

Method:Hexokinase/GOD-POD

Sample Type : Flouride plasma(F)

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Name	: MR.KUMAR HARIJANA PAWAN	Collection	: 01-Oct-2023 /09:32
Age\Sex	: 29 Years\Male	Received	: 01-Oct-2023 /13:57
Referred By	: APOLLO CLINIC	Report	: 04-Oct-2023 /07:37
Referral Dr	: APOLLO CLINIC	Barcode	: 002067999600

Haematology

*BLOOD GROUPING AND Rh TYPING

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
BLOOD GROUP	" A "	-	
Method:Forward & Reverse Grouping (By Column Agglutination Technique - GEL Card)			
RH (D) FACTOR	POSITIVE	-	

Sample Type : WB EDTA

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Report : 04-Oct-2023 /07:37
Barcode : 002067999600

Haematology COMPLETE BLOOD PICTURE(CBP)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
HAEMOGLOBIN Method:Spectrophotometry	13.1	g/dL	13.0-17.0
P C V Method:Automated cell counter.	41.5	%	40-50
M C V Method:calculated	83.5	fl	83-101
M C H Method:calculated	26.1	pg	27-32
M C H C Method:calculated	33.9	g/dL	31.5-34.5
R D W Method:calculated	12.6	%	11.6-14.0
R D W (SD) Method:calculated	41.8	fl	39-46
TOTAL RBC COUNT Method:Electrical Impedance	4.56	mil./cmm	4.5-5.5
PLATELET COUNT Method:Electrical Impedance	2.18	lakhs/cumm	1.5-4.1
TOTAL WBC COUNT Method:Electrical Impedance	5,400	cells/cmm	4000-10000
<u>DIFFERENTIAL COUNT.</u>			
NEUTROPHILS. Method:Flow Cytometry / Microscopy.	63	%	40-80
LYMPHOCYTES Method:Flow Cytometry / Microscopy.	27	%	20-40
EOSINOPHILS Method:Flow Cytometry / Microscopy.	04	%	1-6
MONOCYTES Method:Flow Cytometry / Microscopy.	06	%	2-10
BASOPHILS Method:Flow Cytometry / Microscopy.	00	%	0-2

PERIPHERAL SMEAR.

Sample Type : WB EDTA

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Nagendra

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Clinical Biochemistry

KIDNEY FUNCTION TEST (UREA, CREA, Na+, K+)(KFT)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
BLOOD UREA. Method:Urease (GLDH) /Kinetic	14.28	mg/dL	16-48
SERUM CREATININE Method:Jaffes Kinetic	1.09	mg/dL	0.90-1.3
SERUM SODIUM Method:ISE Direct	140.32	mmoL/L	135-150
SERUM POTASSIUM Method:ISE Direct	3.8	mmoL/L	3.5-5.0
SERUM CHLORIDE Method:ISE Direct	98.2	mmoL/L	94-110

Sample Type : Serum

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HORMONES THYROID PROFILE (T3,T4,TSH) (TFT)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
TOTAL TRIIODOTHYRONINE (T3) Method:ECLIA	1.13	ng/mL	0.80-2.00
TOTAL THYROXINE (T4) Method:ECLIA	7.14	µg/dL	5.1-14.1
THYROID STIMULATING HORMONE (TSH) Method:ECLIA	2.15	µIU/mL	0.27-4.20

Interpretation:

1. The assay uses 4th generation highly sensitive TSH with a sensitivity of 0.005mIU/mL
2. TSH is used primarily to screen for thyroid disorders as follows:
 - . -Screening for thyroid dysfunction
 - . -Diagnosis of hyperthyroidism (Decreased TSH)
 - . -Diagnosis of Hypothyroidism (Elevated TSH)
 - . -Diagnosis of pituitary and hypothalamic disorders
 - . -Monitoring Thyroid replacement therapy

TSH in Pregnancy: In the First trimester, maternal thyroxine-binding globulin rises and Free thyroid hormone T4 decreases. TSH levels decrease due to the thyrotropic effect of hCG. In later trimesters, TSH increases.

Trimester Specific ranges during pregnancy:

Trimester TSH (mIU/L) or µIU/mL

First 0.1-2.5 *

Second 0.2-3.0

Third 0.2-3.0

Ref: National Academy of Clinical Biochemistry and The American Association of Clinical Endocrinologists.

Limitations:

TSH levels increase with obesity and age, upper levels with the euthyroid state may be seen in some cases.

There is no high-dose hook effect at TSH concentrations up to 1000 µIU/mL

Sample Type : Serum

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Clinical Biochemistry LFT WITH GGT

TEST NAME	OBSERVED VALUE		BIOLOGICAL REF. RANGE
<u>LIVER FUNCTION TEST (LFT)</u>			
TOTAL BILIRUBIN	0.72	mg/dL	0.3-1.2
Method:Diazo Method			
DIRECT BILIRUBIN	0.20	mg /dl	0-0.2
Method:Diazo Method			
INDIRECT BILIRUBIN	0.52	mg /dl	0.2-0.8
Method:Diazo Method			
ALKALINE PHOSPHATASE	111.62	U/L	40-129
Method:PNPP-AMP Buffer/Kinetic			
SGOT / AST	40.22	U/L	0-41
Method:Spectrophotometry			
SGPT / ALT	34.19	U/L	Upto 40
Method:MOD-IFCC			
TOTAL PROTEIN.	6.8	gm/dL	6.6-8.7
Method:Biuret/End Point			
ALBUMIN	3.5	gm/dL	3.5-5.2
Method:BCG, Nephelometry, Immunoturbidimetry			
GLOBULIN	3.3	gm/dL	2.5-3.5
A/G RATIO	1.1	Calculated	1-2.1
Method:Biuret/End Point			
<u>GAMMA GLUTAMYL TRANSFERASE (GGT)</u>			
GAMMA GLUTAMYL TRANSFERASE	28.41	U/L	8-61
Method:Enzymatic			

Sample Type : Serum

Please Correlate With Clinical Findings If Necessary Discuss

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Clinical Biochemistry
GLYCATED HAEMOGLOBIN (HBA1C)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
GLYCATED HAEMOGLOBIN (HBA1C) Method: Boronate-affinity binding	5.4	%	Normal : < 5.7 Diabetes Mellitus : > 6.5 Increased Risk of Diabetes/Pre - Diabetes : 5.7 - 6.4
AVERAGE BLOOD GLUCOSE Method: Calculation	108.28	mg/dL	90 - 120 - Excellent control 121 - 150 - Good Control 151 - 180 - Average Control 181 - 210 - Action Suggested > 211 - Panic Value

Interpretation:

- HbA1c test is done using HPLC method certified by National Glycohemoglobin Standardization Program(NGSP) and traceable to Diabetes Control and Complications Trial (DCCI) reference assay
- HbA1c assay is used in the screening diagnosis and management of diabetes Mellitus
- It reflects mean glycemia and level of control for the previous 2-3 months Test can be done any time of the day and in non fasted state
- Measurement of HbA1c is recommended at 3 months intervals if glycemic control is poor or therapy has changed.
- A good control of glycemia may reflect on HbA1c Levels towards normal in -3-5 week
- HbA1c assay may be unreliable in case of altered red cell turnover hemolytic anemia and renal failure may decrease the Hba1c value in such cases Fasting blood glucose or Fructosamine assay are recommended to be used as a measure of glucose control
- Hemoglobinopathies may lead to an artifactual increase in assay value this can be ruled out by Hemoglobin electrophoresis studies Splenectomy and polycythemia raises Hba1c levels
- Pregnancy in the 2nd 3rd-trimester affects Glycemic control Hence Hba1c are not utilized in the diagnosis of gestational diabetes or in the postnatal period Recommended use of GDM GTT during pregnancy

Related tests:

fasting Blood glucose, Fructosamine, Glucose tolerance test /OGTT /GCT, Postprandial Blood Glucose microalbumin

References:

International expert committee report on the A1c assay in the Diagnosis of diabetes

Sample Type : WB EDTA

Please Correlate With Clinical Findings If Necessary Discuss

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Clinical Biochemistry LIPID PROFILE (LPD)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
LIPID PROFILE (LPD)			
TOTAL CHOLESTEROL Method:Spectrophotometry	162.62	mg/dL	Desirable : <200 Borderline : 200 - 239 High : >240
H D L CHOLESTEROL Method:Enzymatic-CHOD-POD	42.30	mg/dL	Negative Risk >60 High Risk : < 40
L D L CHOLESTEROL Method:Friedewald Formula	95.21	mg/dL	<150
V L D L CHOLESTEROL Method:Friedewald Formula	25.11	mg/dL	6.0-38.0
TRIGLYCERIDES, Method:Enzymatic	125.54	mg /dl	Normal: <150 Borderline: 150 -199 High: 200 - 499 Very High: >= 500
CHOL/HDL RATIO	3.84	-	3.5-5.0
LDL/ HDL Ratio	2.25	-	

Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol.

Reference: National Cholesterol Education Program Adult Treatment Plan III (NCEP-ATP 111) report.

Sample Type : Serum

Please Correlate With Clinical Findings If Necessary Discuss

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**Dr.NAGENDRA
PRASAD
MD PATH
Consultant Pathologist**

**** END OF REPORT ****

Name : **Mr . KUMAR HARIJANA PAWAN**
Age/Gender : 29 Years/Male
Ref By : APOLLO CLINIC
Req.No : TPT0104328
Barcode : 0020679997

UMR NO : UMR0386955
Registered On : 01-Oct-2023 11:58 AM
Collection On : 01-Oct-2023 11:58 AM
Reported On : 03-Oct-2023 10:38 AM

ULTRASONOGRAPHY OF ABDOMEN & PELVIS

FINDINGS:

LIVER : Enlarged in size (16.7 cm) with increased echogenicity. No focal lesions.

GALL BLADDER : Partially distended, no calculi. No abnormal wall thickening or peri GB collection.

CBD : Normal

PORTAL VEIN : Normal

SPLEEN : Normal in size (11.7 cm) and echotexture. No focal lesions.

PANCREAS : Normal in shape and size. No focal lesions or peripancreatic collection.

BOTH KIDNEYS : Normal in size, shape and echotexture with maintained Corticomedullary differentiation. **RK** – 9.3 x 4.7 cm **LK** – 9.7 x 5.5 cm
Calculi: Nil Hydronephrosis: Nil

URINARY BLADDER : Distended with normal wall thickening.

PROSTATE : Normal in size, shape and echotexture. No focal lesions or cysts are seen.
No ascites or lymphadenopathy is seen.

RIF/LIF : nil significant

ABDOMINAL WALL : Normal

IMPRESSION :

- **HEPATOMEGALY WITH GRADE I FATTY LIVER CHANGES .**

Suggested clinical and LAB correlation & follow up

***Dr.SANDHYA YADAV, MDRD
CONSULTANT RADIOLOGIST***



Name : **Mr . KUMAR HARIJANA PAWAN**
Age/Gender : 29 Years/Male
Ref By : APOLLO CLINIC
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Reported On : 03-Oct-2023 10:38 AM



Approved By:



Your Apollo order has been confirmed
1 message

28 September 2023 at 13:22

noreply@apolloclinics.info <noreply@apolloclinics.info>
To: likhitha.tirupathi@gmail.com
Cc: rahul.rao@apolloclinic.com, pritam.padyal@apolloclinic.com, syamsunder.m@apolloclinic.com, corporate@apolloclinic.com, deepak.gaddam@apolloclinic.com, ranil.g@apolloclinic.com, devendra.singh@apolloclinic.com, apasara.bagdi@apolloclinic.com, dip.b@apolloclinic.com

Greetings from Apollo!

Respected Sir/Madam,

Please find corporate HC appointment details scheduled for 30-09-2023 at your Likhithas Diagnostics & Speciality Labs- Tirupati Center.

Points to note:-

- Collect photocopy of employee ID proof if health check is through an employer.
- Collect photocopy of personal ID proof if health check is for insurance.
- Collect MER as per package details & that company's format (already shared).
- By 12 noon of appointment date, share Work order number & visit status (Show/No show).
- Upload reports in Adbhutam portal as per specifications given earlier.

Appointment Package Details	Customer Name	Gender	Age	EMO ID	Mobile No	Date of Appointment	App. Ref No	HC Center Name	HC Center Location
Dietician consultation, Lipid Profile (all Parameters), Renal Function Test, Ultrasound - Whole Abdomen, Package Consultation - ENT, 2 D ECHO, Consultation - Dental, Blood Grouping And Typing (A/B0 And Rh), ECG Fitness by General Physician, URINE GLUCOSE (POST PRANDIAL), Urine Routine (CUE), GGTP: Gamma Glutamyl Transpeptidase - Serum, GLUCOSE - SERUM / PLASMA (FASTING AND POST PRANDIAL), THYROID PROFILE - (T3, T4 AND TSH), Glycosylated Hemoglobin (HbA1C) - Whole Blood, LIVER FUNCTION TEST (PACKAGE), X-Ray Chest ARCOFEMI MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	MR. KUMAR HARIJANA	male	29	N/A	customer@mediwheel	30-09-2023 09:00	AHCN-47528062301000	Likhithas Diagnostics & Speciality Labs- Tirupati	TIRUPATI

Please login to AHCN Portal for more details.

AHCN Login Url : Click on Link

Regards,
Team Clinic Operations
Apollo Health and Lifestyle Ltd.,



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. KUMAR HARIJANA PAWAN
EC NO.	171396
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	SRIKALAHASTI
BIRTHDATE	06-03-1991
PROPOSED DATE OF HEALTH CHECKUP	30-09-2023
BOOKING REFERENCE NO.	23S171396100070474E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **27-09-2023** till **31-03-2024** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager
HRM Department
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation

CLIENTS DETAILS

1	NAME	PAVAN KUMAR H
2	AGE	32
3	DOB	06-03-1991
4	CELL NO	9844646303
5	A MOLE ON	A mole on left side of the chin
6	MARRIED /NOT	Married
7	ANY HABITS FOR CLIENT	-
8	FATHER NAME AND AGE	Obulesu Goraka Sr 61
9	MOTHER NAME AND AGE	Lakshmidevi Goraka Sr 56
10	BROTHER NAME AND AGE	Vitay Kumar Sr 34
11	SISTER NAME AND AGE	Priyanka Sr 21
12	SPOUSE NAME AND AGE	Amrtha Gyara Sr 27
13	FAMILY PERSONS HEALTHY/NOT	Obulappa Healthy
14	BLOOD GROUP	A+
15	HEIGHT	163
16	WEIGHT	66
17	BP	134/83
18	PULSE	84
19	CHEST EXP	104
20	CHEST INSP	102
21	WAIST	92
22	HIP	104
AADHAR CARD AND PAN CARD COLOUR XEROX MANDATORY		
COVID CERTIFICATE ALSO MANDATORY		
CLIENT LIVE PHOTO WITH JIO TAG MANDATORY		
PLEASE COOPERATE THE CLIENT		

Handwritten signature



భారత ప్రభుత్వం

GOVERNMENT OF INDIA

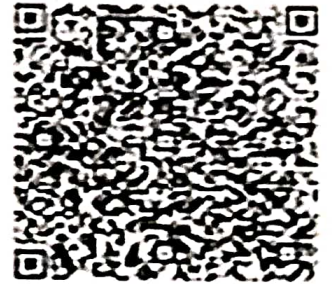
పవన్ కుమార్

Pavankumar



జన్మన సంవత్సరం/Year of Birth: 1991

స్వలింగం / Male



5114 9251 5752

ఆధార్ - సామాన్యుని హక్కు



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

UNIQUE IDENTIFICATION AUTHORITY OF INDIA

పింజానా, 50 ఒబులేసు,
2-187a,
శిబావి,
గొల్లా,
కల్యాణదుర్గం,
అనంతపురం,
ఆంధ్ర ప్రదేశ్,
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515761



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సంఖ్య: సా. 1947.
మొదలం: 540091

Handwritten signature



बैंक ऑफ बड़ोदा
Bank of Baroda

नाम

पवन कुमार एच

Name

Pavan Kumar H

E. C. No.

171396

जारीकर्ता प्राधिकारी

Issuing Authority

P. K. H.



धारक के हस्ताक्षर

Signature of Holder

SRI SAI SUDHA HOSPITALS

Dr. R. SUDHA RANI

M.S., D.O. (JIPMER)
EYE SURGEON



శ్రీ సాయి సుధ ఆసుపత్రి

డా॥ ఆర్. సుధారాణి

M.S., D.O. (JIPMER)

H Kumar

Age 6-32yr/M

Date: 30/9/23

J Route
Chennay

V/A { +0.50 / +3.50 my 110° 6/18.
6/6

Since child had defective vision
in Right eye.
Not with glass overlay

Ⓟ as jaw as her wnl.

ADD
glass

Σ

Name: Kumar Harijan Pawan Age/Gender: 29 Yrs/Male Date: 30/09/2023

ULTRASONOGRAPHY OF ABDOMEN & PELVIS

FINDINGS:

LIVER : Enlarged in size (16.7 cm) with increased echogenicity. No focal lesions.

GALL BLADDER : Partially distended, no calculi. No abnormal wall thickening or peri GB collection.

CBD : Normal

PORTAL VEIN : Normal

SPLEEN : Normal in size (11.7 cm) and echotexture. No focal lesions.

PANCREAS : Normal in shape and size. No focal lesions or peripancreatic collection.

BOTH KIDNEYS : Normal in size, shape and echotexture with maintained Corticomedullary differentiation. RK - 9.3 x 4.7 cm LK - 9.7 x 5.5 cm

Calculi: Nil Hydronephrosis: Nil

URINARY BLADDER : Distended with normal wall thickening.

PROSTATE : Normal in size, shape and echotexture. No focal lesions or cysts are seen.

No ascites or lymphadenopathy is seen.

RIF/LIF : nil significant

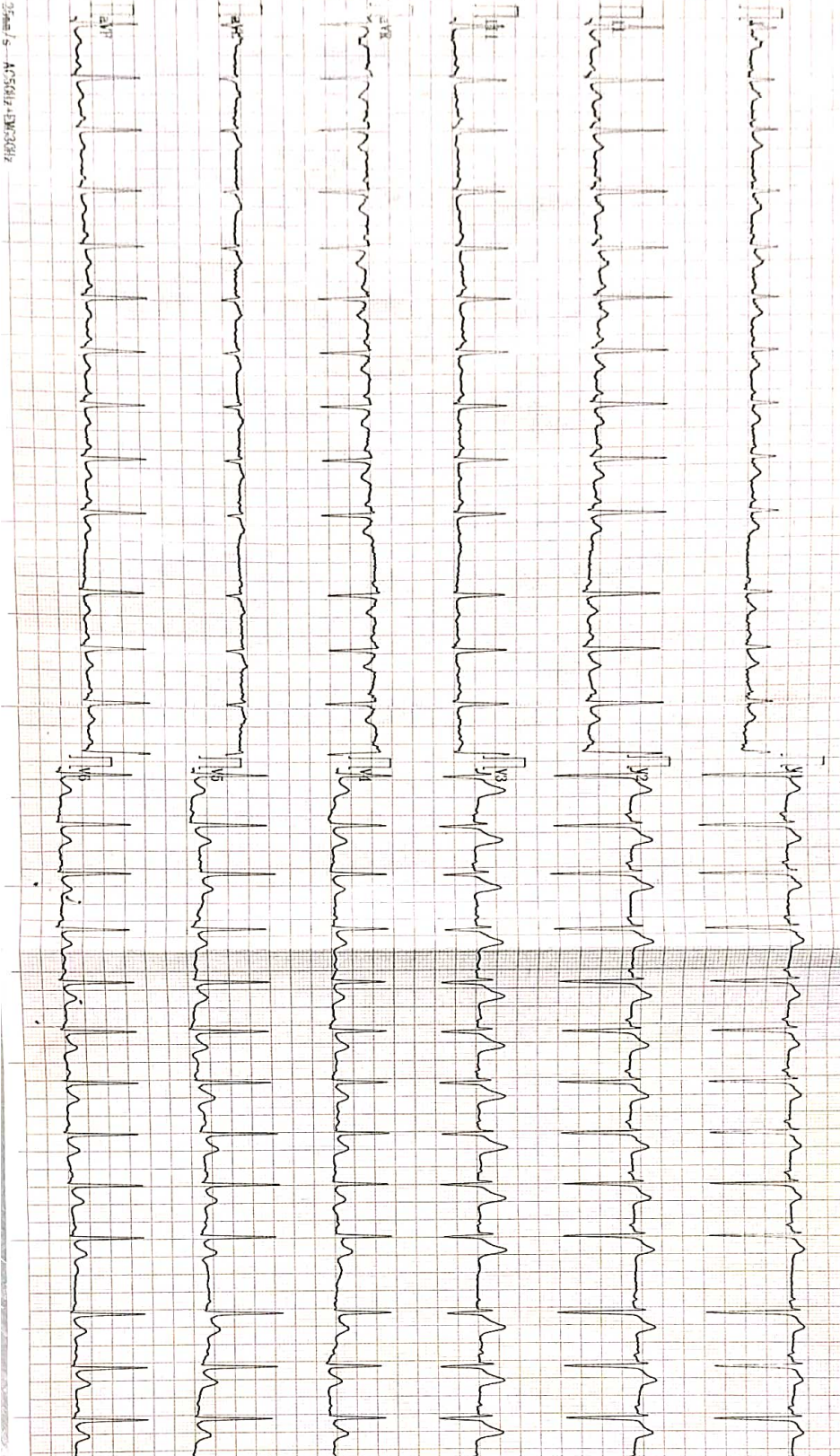
ABDOMINAL WALL : Normal

IMPRESSION :

- **HEPATOMEGALY WITH GRADE I FATTY LIVER CHANGES.**

Suggested clinical and LAB correlation & follow up


DR. SANDHYA YADAV, MDRD
CONSULTANT RADIOLOGIST



35m/1.5 | 2023

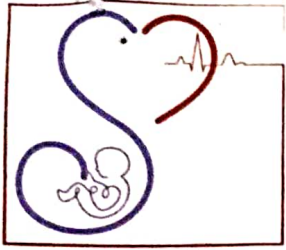
Name : HARJIANI PIMAN
 Sex : Male Age : 29
 Section: 55
 RoomID:
 PwdID:
 II:
 Operator:
 Custom1:
 Custom2:
 Custom3yy:

Data for reference only:
 HR : 98
 PR Interval ms : 124
 P Duration ms : 98
 QRS Duration ms : 84
 T Duration ms : 157
 QT/QTc ms : 366/383
 P/QRS/T Axis - deg : 64.5/70.6/38.0
 R(V5)/S(V1) mV : 1.81/1.95
 R(V5) / S(V1) mV : 3.75

<< Conc. Iustions >>

Normal Sinus Rhythm.
 Cardiac electric axis normal.
 Report need physician confirm

N. S. 2023
 DR. MAGENDRA PRATIWI
 M.D. (Pathology)
 Consultant Pathologist
 Regd.No: 60120



SAI MAHESH
CARDIAC AND MATERNITY CARE
 #10-3-206M , BESIDE ASALATHA HOSPITAL
 REDDY & REDDY COLONY
 TIRUPATI

Patient Data

Last Name PAWAN KUMAR
Age 32 y
Exam Date 30/09/2023
Report Date 30/09/2023

**Cardiac
M-Mode**

Aorta/LA					
Ao Diam	32.0	mm	LA	29.9	mm
LA/Ao	0.93				
Left Ventricle					
IVSd	13.0	mm	LVIDd	45.9	mm
LVPWd	14.7	mm	IVSs	12.2	mm
LVIDs	29.5	mm	LVPWs	14.3	mm
EF	65	%	%LV FS	36	%
LVEDV	96.7	ml	LVESV	33.5	ml
SV	63.2	ml	LV Mass	253	g
Relative Wall Thickness	0.64				
TV					
TAPSE	20.2	mm			

Doppler

Aorta					
AV Vmax	-1.26	m/s	AV max PG	6.3	mmHg
MV E/A					
MV E Vel	0.67	m/s	MV A Vel	0.52	m/s
MV E PG	1.8	mmHg	MV A PG	1.1	mmHg
MV E/A	1.29		MV Dec Time	172	ms
TR					
TR Vmax	-2.20	m/s	TR max PG	19.4	mmHg
RAP	5.0	mmHg	RVSP	24.4	mmHg
Pulmonary A					
PA Vmax	-0.31	m/s	PA max PG	0.4	mmHg
sPAP	24.4	mmHg	Mean Pulmonary Artery Pressure	16.9	mmHg
AVA (VTI)					
AV Vmax	-1.26	m/s			
Pulmonary Capillary Wedge Pressure					
MV E Vel	0.67	m/s			

Observations

Cardiac

LEFT VENTRICLE NORMAL

LEFT ATRIUM + IAS

IVS INTACT

NORMAL

IAS INTACT

AORTA

NORMAL

MITRAL

NORMAL

PULMONARY

NORMAL

TRICUSPID

MILD TR

IMPRESSION

NORMAL CHAMBER SIZE AND VALVES

NO RESTING RWMA

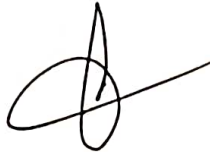
GOOD LV SYSTOLIC FUNCTION (EF - 65 %)

NO RV DYSFUNCTION (TAPSE - 21 MM)

TRIVIAL MR / MILD TR / NO SIGNIFICANT PAH (RVSP - 25 MM HG)

NO CLOT / NO EFFUSION

IVC NON DILATED AND COLLAPSING



Dr. GAJJALA MAHESH REDDY
MBBS., MD., Gen. Medicine., DNB Cardiology
APMC - 80533

Interventional Cardiologist
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