



MYS36016

## MYSORE-BALLAL CIRCLE

MEDALL HEALTHCARE PVT LTD

CUSTOMER CHECKLIST

Print Date : 30/11/2023 08:26 AM



Customer Name	MR. MANJUNATH R		
Ref Dr Name	MediWheel		
Customer Id	MYS36016	Visit ID	712340567
Age	48Y/MALE	Phone No	9448803526
DOB	01 Feb 1975	Visit Date	30/11/2023
Company Name	MediWheel		

Package Name : Mediwheel Full Body Health Checkup Male Above 40

S.No	Modality	Study	AccessionNo	Time	Signature
1	LAB	BLOOD UREA NITROGEN (BUN)			
2	LAB	GLUCOSE - FASTING			
3	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)			
4	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c)			
5	LAB	LIPID PROFILE			
6	LAB	LIVER FUNCTION TEST (LFT)			
7	LAB	URIC ACID			
8	LAB	URINE GLUCOSE - FASTING			
9	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)			
10	LAB	COMPLETE BLOOD COUNT WITH ESR			
11	LAB	THYROID PROFILE/ TFT( T3, T4, TSH)			
12	LAB	TOTAL PROSTATE SPECIFIC ANTIGEN - PSA			
13	LAB	STOOL ANALYSIS - ROUTINE			
14	LAB	URINE ROUTINE			
15	LAB	CREATININE			
16	LAB	BLOOD GROUP & RH TYPE (Forward Reverse)			
17	LAB	BUN/CREATININE RATIO			
18	OTHERS	physical examination	MYS2853426102651		
19	US	ULTRASOUND ABDOMEN	MYS2853426103462		
20	OTHERS	Treadmill 2D Echo ✓	MYS2853426127528		
21	OTHERS	Dental Consultation	MYS2853426134969		
22	OTHERS	EYE CHECKUP	MYS2853426135592		
23	X-RAY	X RAY CHEST ✓	MYS2853426145199		
24	OTHERS	Consultation Physician	MYS2853426148004		
25	ECHO	ELECTROCARDIOGRAM ECG ✓	MYS2853426149333		

Registered By  
(ABHISHEK.N)

BP - 130/80 rest of Hg.

P - 76b/min

Dr. Consultation not required  
Tharun

Customer Name	MR.MANJUNATH R	Customer ID	MYS36016
Age & Gender	48Y/MALE	Visit Date	30/11/2023
Ref Doctor	MediWheel		

## 2 D ECHOCARDIOGRAPHIC STUDY

### M mode measurement:

AORTA	:	3.0cms
LEFT ATRIUM	:	3.0cms
LEFT VENTRICLE (DIASTOLE)	:	4.6cms
(SYSTOLE)	:	2.8cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.1cms
POSTERIOR WALL (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.1cms
EDV	:	81ml
ESV	:	33ml
FRACTIONAL SHORTENING	:	36%
EJECTION FRACTION	:	63%
RVID	:	1.5cms

### DOPPLER MEASUREMENTS:

MITRAL VALVE	:	'E' - 0.81m/s	'A' - 0.39m/s	NO MR
AORTIC VALVE	:	1.00m/s		NO AR
TRICUSPID VALVE	:	'E' - 0.75m/s	'A' - 0.27m/s	NO TR
PULMONARY VALVE	:	0.79m/s		NO PR

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### 2D ECHOCARDIOGRAPHY FINDINGS:

Left ventricle : Normal size, Normal systolic function.  
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapse.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

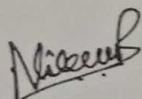
IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

### IMPRESSION:

- NORMAL SIZED CARDIAC CHAMBERS.
- NORMAL LV SYSTOLIC FUNCTION. EF: 63%.
- NO REGIONAL WALL MOTION ABNORMALITIES.
- NORMAL VALVES.
- NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.

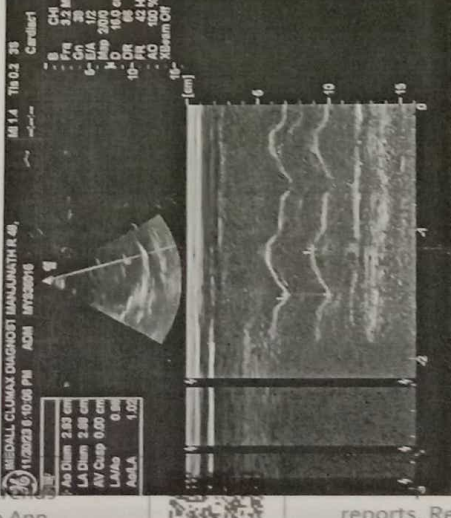
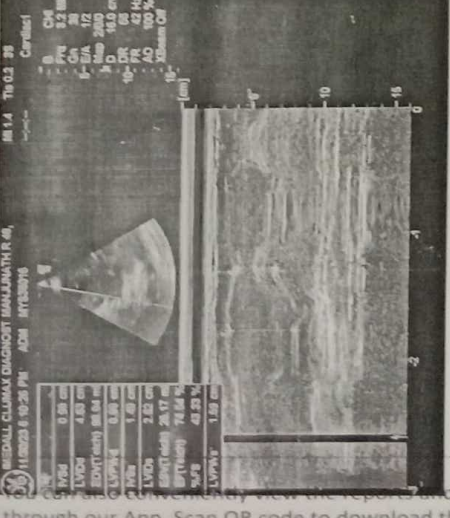
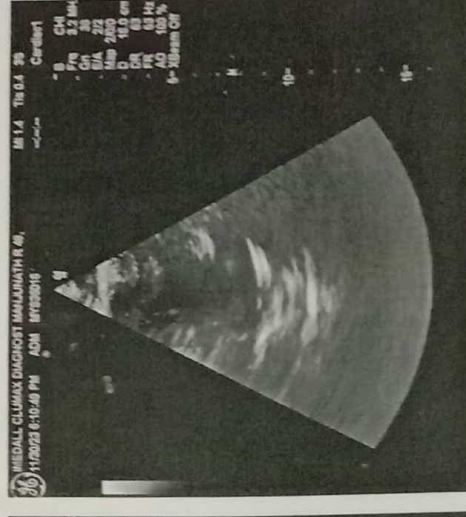
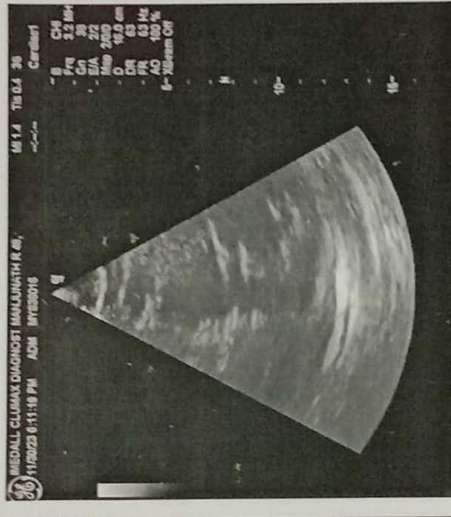
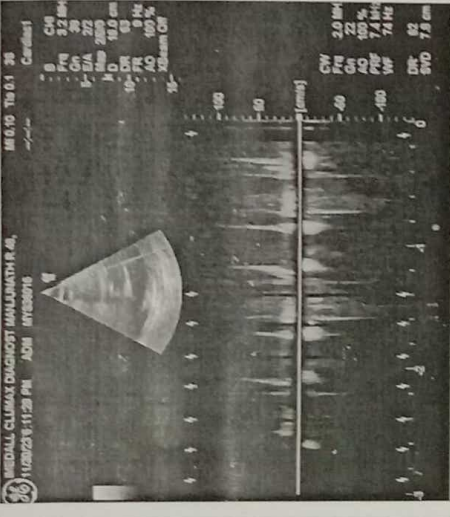
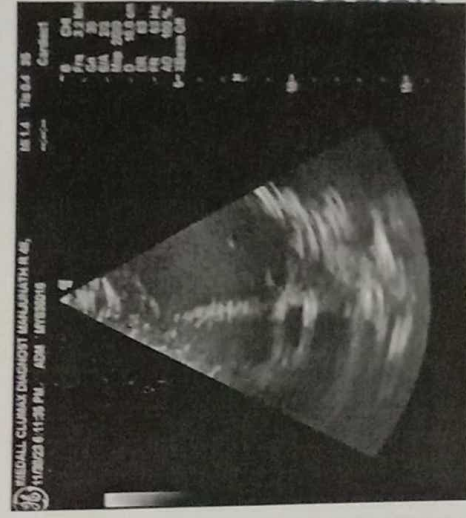
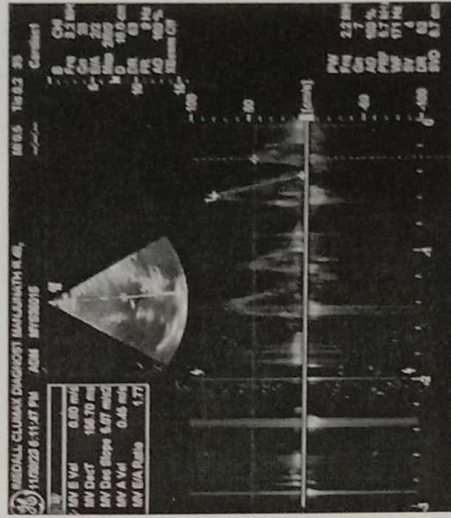
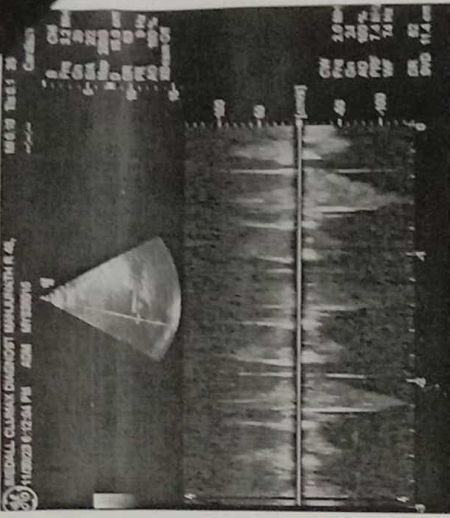


DR. NIKHIL B  
INTERVENTIONAL CARDIOLOGIST  
NB/MS

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### ABDOMINO-PELVIC ULTRASONOGRAPHY

**LIVER** is normal in size and shows slightly increased echotexture.

No evidence of focal lesion or intrahepatic biliary ductal dilatation.

Hepatic and portal vein radicals are normal.

**GALL BLADDER** show normal shape and has clear contents.

Gall bladder wall is of normal thickness. CBD is of normal calibre.

**PANCREAS** has normal shape, size and uniform echopattern.

No evidence of ductal dilatation or calcification.

**SPLEEN** show normal shape, size and echopattern.

**KIDNEYS** move well with respiration and have normal shape, size and echopattern.

Cortico- medullary differentiations are well madeout.

No evidence of calculus or hydronephrosis.

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	10.3	2.1
Left Kidney	10.9	2.2

**URINARY BLADDER** show normal shape and wall thickness.

It has clear contents.

**PROSTATE** shows normal shape, size and echopattern.

No evidence of ascites.

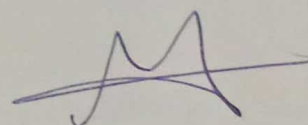
#### IMPRESSION:

➤ **GRADE I FATTY CHANGES IN LIVER.**

#### CONSULTANT RADIOLOGISTS

**DR. ANITHA ADARSH**

MB/MS



**DR. MOHAN B**



Medall Diagnostics  
Ballal Circle(Ashoka circle) - Mysore



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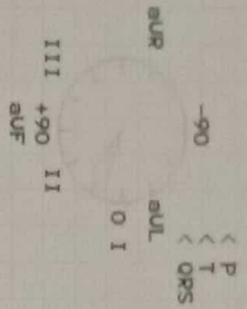


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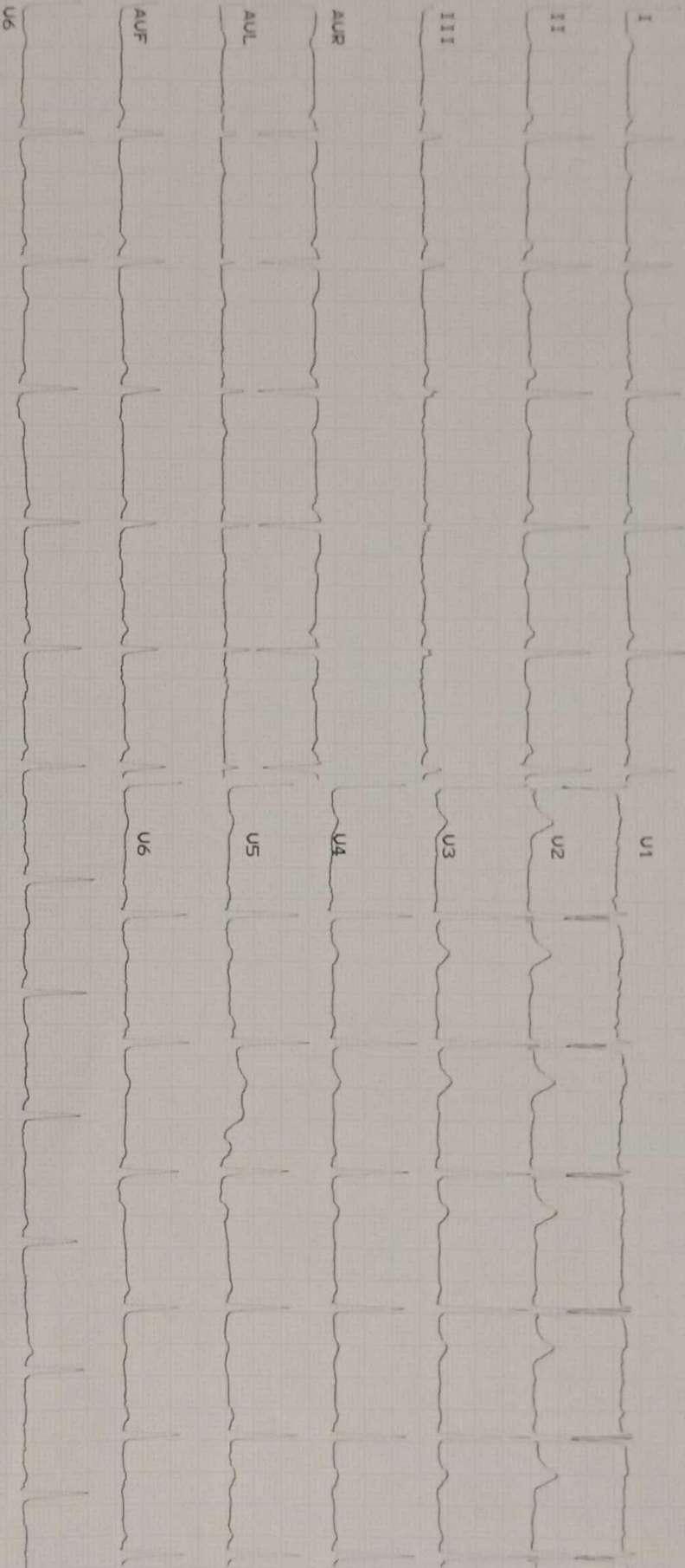
AGE: 48  
 Measurement Results:  
 QRS 390 / 86 ms  
 QT/QTcB 438 ms / 140 ms  
 PR 112 ms  
 P 792 / 790 ms  
 RR/PP 50 / 40 / 20 degrees  
 P/QRS/T 46 / 52 ms  
 QTd/QTcBD 2.1 mV  
 Scale low 9



Interpretation: *Normal sinus rhythm*  
 R/S Inversion area between U1 and U2  
 borderline ECG

*Handwritten signature*

Unconfirmed report.



9.505M NOV. 25mm/s 10mm/mV ADS 50Hz 0.08 - 20Hz 6\_F1 Automatic U6.2 12i (1)

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Type : OP

Ref. Dr : MediWheel

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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BLOOD GROUPING AND Rh TYPING

'O' Positive'

(EDTA Blood/Agglutination)

Remark: Test to be confirmed by gel method.

**Complete Blood Count With - ESR**

Haemoglobin

15.6

g/dL

13.5 - 18.0

(EDTA Blood/Spectrophotometry)

**INTERPRETATION:** Haemoglobin values vary in Men, Women & Children. Low haemoglobin values may be due to nutritional deficiency, blood loss, renal failure etc. Higher values are often due to dehydration, smoking, high altitudes, hypoxia etc.

PCV (Packed Cell Volume) / Haematocrit

45.0

%

42 - 52

(EDTA Blood/Derived)

RBC Count

5.09

mill/cu.mm

4.7 - 6.0

(EDTA Blood/Automated Blood cell Counter)

MCV (Mean Corpuscular Volume)

89.0

fL

78 - 100

(EDTA Blood/Derived from Impedance)

MCH (Mean Corpuscular Haemoglobin)

30.7

pg

27 - 32

(EDTA Blood/Derived)

MCHC (Mean Corpuscular Haemoglobin concentration)

34.6

g/dL

32 - 36

(EDTA Blood/Derived)

RDW-CV

13.3

%

11.5 - 16.0

(Derived)

RDW-SD

41.43

fL

39 - 46

(Derived)

Total WBC Count (TC)

9000

cells/cu.m  
m

4000 - 11000

(EDTA Blood/Derived from Impedance)

Neutrophils

55

%

40 - 75

(Blood/Impedance Variation & Flow Cytometry)

  
Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY



  
DR KIRAN H S MD  
Consultant Pathologist  
KMC No: 86542

APPROVED BY

The results pertain to sample tested.

Page 1 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #NEW KANTHA RAJ URS ROAD, KRISHNAMURTHY PURAM, MYSORE, KARNATAKA, INDIA,.



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Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	25	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	15	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	5	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	0	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	4.95	10 <sup>3</sup> / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.25	10 <sup>3</sup> / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	1.35	10 <sup>3</sup> / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.45	10 <sup>3</sup> / µl	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10 <sup>3</sup> / µl	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	288	10 <sup>3</sup> / µl	150 - 450
MPV (Blood/Derived)	10.5	fL	7.9 - 13.7
PCT	0.30	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	20	mm/hr	< 15

  
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Sr. Lab Technician

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
BUN / Creatinine Ratio	8.2		
Glucose Fasting (FBS) (Plasma - F/GOD- POD)	90	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Urine sugar, Fasting (Urine - F)	Nil		Nil
Glucose Postprandial (PPBS) (Plasma - PP/GOD - POD)	155	mg/dL	70 - 140

**INTERPRETATION:**

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Urine Sugar (PP-2 hours) (Urine - PP)	Positive(+++)		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	8.2	mg/dL	7.0 - 21
Creatinine (Serum/Jaffe Kinetic)	1.0	mg/dL	0.9 - 1.3

**INTERPRETATION:** Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Uricase/Peroxidase)	4.6	mg/dL	3.5 - 7.2
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**Liver Function Test**

Bilirubin(Total) (Serum/Diazotized Sulfanilic Acid)	0.6	mg/dL	0.1 - 1.2
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Sr. Lab Technician

VERIFIED BY



  
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KMC No: 86542

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Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.2	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.40	mg/dL	0.1 - 1.0
Total Protein (Serum/Biuret)	7.2	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.3	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.90	gm/dL	2.3 - 3.6
A : G Ratio (Serum/Derived)	1.48		1.1 - 2.2

**INTERPRETATION:** Remark : Electrophoresis is the preferred method

SGOT/AST (Aspartate Aminotransferase) (Serum/IFCC / Kinetic)	21	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/IFCC / Kinetic)	22	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/PNPP / Kinetic)	88	U/L	53 - 128
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	13	U/L	< 55

**Lipid Profile**

Cholesterol Total (Serum/Oxidase / Peroxidase method)	<b>214</b>	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
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Sr. Lab Technician

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	160	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

**INTERPRETATION:** The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the 'usual' circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	28	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
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LDL Cholesterol (Serum/Calculated)	154	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
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VLDL Cholesterol (Serum/Calculated)	32	mg/dL	< 30
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Non HDL Cholesterol (Serum/Calculated)	186.0	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220
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**INTERPRETATION:** 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.  
2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

  
Mr. S. Mohan Kumar  
Sr. Lab Technician

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Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	7.6		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	5.7		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	5.5		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

### Glycosylated Haemoglobin (HbA1c)

HbA1C (Whole Blood/HPLC)	7.0	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: $\geq$ 6.5
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**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control  $\geq$  8.1 %

Estimated Average Glucose (Whole Blood)	154.2	mg/dl
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### **INTERPRETATION: Comments**

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycaemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

### URINE ROUTINE

### PHYSICAL EXAMINATION

  
Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY



  
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Colour (Urine/Physical examination)	PALE YELLOW		Yellow to Amber
Volume (Urine/Physical examination)	15		ml
Appearance (Urine)	CLEAR		
<b><u>CHEMICAL EXAMINATION</u></b>			
pH (Urine)	6.0		4.5 - 8.0
Specific Gravity (Urine/Dip Stick - Reagent strip method)	1.010		1.002 - 1.035
Protein (Urine/Dip Stick - Reagent strip method)	Negative		Negative
Glucose (Urine)	Nil		Nil
Ketone (Urine/Dip Stick - Reagent strip method)	Nil		Nil
Leukocytes (Urine)	NEGATIVE	leuco/uL	Negative
Nitrite (Urine/Dip Stick - Reagent strip method)	Nil		Nil
Bilirubin (Urine)	Negative	mg/dL	Negative
Blood (Urine)	Nil		Nil
Urobilinogen (Urine/Dip Stick - Reagent strip method)	NORMAL		Within normal limits

**Urine Microscopy Pictures**

  
Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY



  
DR KIRAN H S MD  
Consultant Pathologist  
KMC No: 86542

APPROVED BY

Name : Mr. MANJUNATH R

PID No. : MYS36016

SID No. : 712340567

Age / Sex : 48 Year(s) / Male

Type : OP

Ref. Dr : MediWheel

Register On : 30/11/2023 8:26 AM

Collection On : 30/11/2023 9:35 AM

Report On : 01/12/2023 8:09 AM

Printed On : 01/12/2023 8:10 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
RBCs (Urine/Microscopy)	NIL	/hpf	NIL
Pus Cells (Urine/Microscopy)	2-3	/hpf	< 5
Epithelial Cells (Urine/Microscopy)	1-2	/hpf	No ranges
Others (Urine)	NIL		Nil

  
Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY



  
DR KIRAN H S MD  
Consultant Pathologist  
KMC No: 86542

APPROVED BY

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Prostate specific antigen - Total(PSA) (Serum/Manometric method)	0.693	ng/ml	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0

**INTERPRETATION:REMARK :** PSA alone should not be used as an absolute indicator of malignancy.

**THYROID PROFILE / TFT**

T3 (Triiodothyronine) - Total (Serum/ECLIA)	1.10	ng/ml	0.7 - 2.04
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**INTERPRETATION:**

**Comment :**

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Tyroxine) - Total (Serum/ECLIA)	8.07	µg/dl	4.2 - 12.0
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**INTERPRETATION:**

**Comment :**

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/ECLIA)	2.36	µIU/mL	0.35 - 5.50
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**INTERPRETATION:**

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

**Comment :**

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.



APPROVED BY

-- End of Report --

The results pertain to sample tested.

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Lab Address: BANGALORE REFERENCE LABORATORY-CLUMAX DIAGNOSTIC AND RESEARCH CENTRE PVT LTD. (A UNIT OF MEDALL HEALTHCARE PVT. LTD.),Old No 66 & New No 1, 2nd Main Road, Bashyam Circle, Sankey Cross Road Malleswaram, Gayathri Devi Park Extension, Kodandarampura, Sadashiva Nagar, Bengaluru, Karnataka-560003,.



Name	Mr. MANJUNATH R	ID	MYS36016
Age & Gender	48Y/M	Visit Date	Nov 30 2023 8:26AM
Ref Doctor	MediWheel		

**X - RAY CHEST PA VIEW**

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

***Impression: No significant abnormality detected.***



**DR. MOHAN. B**  
**(DMRD, DNB, EDIR, FELLOW IN CARDIAC**  
**MRI)**  
**CONSULTANT RADIOLOGIST**

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Age & Gender	48Y/M	Visit Date	Nov 30 2023 8:26AM
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