




PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : 040-42038139, 27845852
7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com



TEST REPORT

Name : **MR.B KALYAN NAIK [SPOUSE]** TID/SID : UMR1068824/ 25349447
 Age / Gender : 29 Years / Male Registered on : 25-Mar-2023 / 09:22 AM
 Ref.By : - Collected on : 25-Mar-2023 / 09:27 AM
 Req.No  Reported on : 25-Mar-2023 / 16:02 PM
 BIL2940104 Reference : Medi Wheel

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Yellow		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.010		1.003-1.030
Reaction and pH Method:Double Indicator	6.5		5.0-8.0
Protein Method:Protein Error of pH indicators	Negative		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
Microscopic Examination			
Pus cells (leukocytes) Method:Microscopy Of Sediment	1 - 2	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	Nil	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf

Lab Timings (Weekdays) : 7.00 am to 8.30 pm
Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm
& 5.45 pm to 7.45 pm
Sundays & Holidays : 7.30 am to 9.30 am




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Certificate No.:MC-2566

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DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

* Sample processed at Parkline

--- End Of Report ---

Dr.Jyothi Kiranmai
Regd. No: 52272
MD PATHOLOGY






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Ref.By : - Collected on : 25-Mar-2023 / 09:27 AM
Req.No  Reported on : 25-Mar-2023 / 14:59 PM
Reference : Medi Wheel
BIL2940104

DEPARTMENT OF HEMATOLOGY

Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	AB
Rh Typing (D)	POSITIVE -
Method:Agglutination	

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DEPARTMENT OF HEMATOLOGY

Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	06	mm/hour	0-10 mm/hour
Method:Westergren			

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Req.No	:  BIL2940104	Reported on	: 25-Mar-2023 / 14:59 PM
		Reference	: Medi Wheel

DEPARTMENT OF HEMATOLOGY

Hemogram, EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	14.4	g/dL	13.0-17.0 g/dL
Erythrocyte Count(RBC) Method:Electrical Impedence	4.8	mill /cu.mm	4.5-5.5 mill /cu.mm
PCV/HCT Method:Numeric Integration	42	%	40-50 %
MCV Method:Calculated	87	fL	83-101 fL
MCH Method:Calculated	29.6	pg	27-32 pg
MCHC Method:Calculated	33.9	gm/dL	31.5-34.5 gm/dL
RDW (CV) Method:Calculated	14.8	%	11.6-14.0 %
Total WBC Count Method:Impedence flowcytometry/Light scattering	5.1	10 ³ /μL	4-10 10cap;3/μL 10 ³ /μL
Differential Count			
Neutrophils Method:Flowcytometry/Microscopy	47	%	40-80 %
Lymphocytes Method:Flowcytometry/Microscopy	45	%	20-40 %
Monocytes Method:Flowcytometry/Microscopy	6	%	2-10 %
Eosinophils Method:Flowcytometry/Microscopy	2	%	1-6 %
Basophils Method:Flowcytometry/Microscopy	0	%	0-2 %
Platelet Count Method:Electrical Impedence	122	10 ³ /μL	150-410 10 ³ /μL

Peripheral Smear

Lab Timings (Weekdays) : 7.00 am to 8.30 pm
Sundays & Holidays : 7.00 am to 1.00 pm

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DEPARTMENT OF HEMATOLOGY

Hemogram, EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
RBC Method:Microscopy	Normocytic Normochromic		
WBC Method:Microscopy	Relative Lymphocytosis. No abnormal cells seen.		
Platelets Method:Microscopy	Thrombocytopenia +.Giant platelets seen.		

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Age / Gender : 29 Years / Male Registered on : 25-Mar-2023 / 09:22 AM
Ref.By : - Collected on : 25-Mar-2023 / 09:27 AM
Req.No :  Reported on : 25-Mar-2023 / 16:05 PM
Reference : Medi Wheel
BIL2940104

DEPARTMENT OF CLINICAL CHEMISTRY I

Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen. Method:Calculated	8.9	mg/dL	7-23 mg/dL

Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine. Method:Alkaline Picrate	0.99	mg/dL	0.60-1.30 mg/dL

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TEST REPORT

Name : **MR.B KALYAN NAIK [SPOUSE]** TID/SID : UMR1068824/ 25349448F
Age / Gender : 29 Years / Male Registered on : 25-Mar-2023 / 09:22 AM
Ref.By : - Collected on : 25-Mar-2023 / 09:27 AM
Req.No :  Reported on : 25-Mar-2023 / 16:05 PM
Reference : Medi Wheel
BIL2940104

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	96	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : \geq 126 mg/dL

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TEST REPORT

Name : **MR.B KALYAN NAIK [SPOUSE]** TID/SID : UMR1068824/ 25349448P
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BIL2940104

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Post Prandial Method:GOD - PAP	108	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : \geq 200 mg/dL

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DEPARTMENT OF CLINICAL CHEMISTRY I

Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	5.7	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	116	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

Note:Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

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Reference : Medi Wheel
BIL2940104

DEPARTMENT OF CLINICAL CHEMISTRY I

Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	145	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	46	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	78	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	21	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	106	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	3.15		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	1.70		

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DEPARTMENT OF CLINICAL CHEMISTRY I

Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	1.18	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.21	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.97	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	39	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	29	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	57	U/L	30-115 U/L
PROTEINS			
Total Protein. Method:Biuret	7.36	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.20	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	3.16	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.33		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	21	U/L	7.0-50.0 U/L

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DEPARTMENT OF CLINICAL CHEMISTRY I

Prostate Specific Antigen (PSA) Total, Serum

Investigation	Observed Value	Biological Reference Interval
Prostate Specific Antigen (PSA) Total Method:Enhanced chemiluminescence	0.556 ng/mL	0-3.9 ng/mL

Interpretation:

- 1.Prostate specific antigen (PSA) is a glycoprotein that is expressed by both normal and neoplastic prostate tissue
- 2.Elevated serum PSA concentrations are found in men with prostate cancer, benign prostatic hyperplasia (BPH) or inflammatory conditions of other adjacent genitourinary tissues. PSA can also be elevated after digital rectal examination,prostatic massage,cystoscopy,needle biopsy etc
- 3.Measurement of serum PSA by itself is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels are also observed in patients with benign prostatic hyperplasia.
4. When employed for the management of prostate cancer patients, serial measurement of PSA is useful in detecting residual tumor and recurrent cancer after radical prostatectomy.
- 5.PSA has been demonstrated to be an accurate marker for monitoring advanced clinical stage in untreated patients and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti-androgen therapy.

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DEPARTMENT OF CLINICAL CHEMISTRY I

Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.32	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	6.84	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	3.08	µIU/mL	0.400-4.049 µIU/mL

Note: Change in method and reference range
NOTE:

TSH - Reference ranges during pregnancy:*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3dr Trimester : 0.30 - 3.00

*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result form TSH secreting pituitary tumors(secondary).

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DEPARTMENT OF CLINICAL CHEMISTRY I

Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid. Method:Uricase	4.79	mg/dL	2.5-8.0 mg/dL

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DEPARTMENT OF HEALTH CHECKUP

Glucose Urine Fasting

Urine Glucose Fasting Nil NIL
Method:Reagent strip/Reflectance photometry

Glucose Urine Post Prandial

Urine Glucose Post Prandial Nil NIL
Method:Reagent strip/Reflectance photometry

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MEDICAL EXAMINATION REPORT

Name	Mr. B. Kalyan Naik		Date :	25/03/2023
Company	CO: mediwheel		Reg. No. :	2940104
Contact No.	6300698421		Sex	<input checked="" type="checkbox"/> M <input type="checkbox"/> F
			Age :	<input type="checkbox"/> 29
Type	Pre-Emp		Emp. No.:	Spouse
	Overseas		Height	190cm
	Annual	<input checked="" type="checkbox"/>	Weight	28kg
Remarks	Both physical and lab parameters wnl.			
Fitness Status	Medically Fit / Unfit		DR. PRIYANKA SANNIDHI Physician's Signature Regn. No : 11351 MBBS	

COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Mr. B. Kalyan Naik

AGE 29 ye Male

MARITAL STATUS Married CHILDREN: M F

IDENTIFICATION (IF ANY) A mole on the right cheek.

PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer

Any personal H/o Major illness like : Typhoid..... NIL..... Jaundice..... NIL..... Etc.

Any H/o STD..... Skin infection..... NIL

H/o Blood Transfusion..... Recent Vaccination..... COVID-19 2 Doses.

H/o Epilepsy..... NIL..... Giddiness..... NIL

H/o Surgery..... RTA 2016..... Fracture in the past..... leg knee

Any Personal H/O. leg knee c Rod fixation done.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

occasional

Present illness / Medication

GENERAL EXAMINATION

Conjunctiva :

Skin :

Ears :

Nose :

Throat & Oral Cavity :

Bone, Joints : (N)

Nutritional Status : well Nourished

Lymph Nodes : NPD

Edema Feet : NIL

Varicose Veins : NIL

NPD

RO

Distant Vision : Near Vision :

Right Eye: 6/6

With glasses / Without glasses

left Eye: 6/6

with glasses / without glasses

Colour Vision: DL normal

Right Ear

Hearing: (N)

Rinee's Test ;

Weber Test :

Discharge : NIL

Right Eye: N6

With glasses / Without glasses

left Eye: N6

with glasses / without glasses

Ophthalmologist's Signature

Dr. KATTA
M.B.B.S., D.O., F.R.F.

Left Ear

(N)

NIL

SYSTEMIC EXAMINATION

Pulse : 85 bpm

B.P. : 120/80 mmHg

Lungs : A. Shape of Chest B/L symmetrical
B. Breath Sounds B/L - clear
C. Adventitious Sounds No

Heart : A. Sounds 1 2 ⊕
B. Murmurs No

Nervous System

Abdomen : A. Liver NPD
B. Spleen NPD
C. Piles Haemorrhoidally
D. Any Lump no 2022 feb.

A. Higher Function :
B. Cranial Nerves :
C. Sensory System :
D. Motor System :
E. Jerks : (N)

General : A. Hernia
B. Hydrocele
C. Varicocele (NAD)

Breast : Rt _____ Lt. _____

CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

Date :

Kalyan
Signature

Place :

Note : General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.



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Certificate No. M-0862

ENT CONSULTATION

S.No. 2940104

Emp.No. spouse

Date 25/8/23

Name Mr. B. Kalyan Nair Age 29 Yrs

Sex M/F

EARS :	Right	Left
EAC :	(N)	(N)
TM :	(N) (N)	(N) (N)
TFT :	Rinne's Ac>Bc	Ac>Bc
	Waber's A>Bc	← same as examiner
NOSE :	Septum central I - (N)	
THROAT :	A/P/T, PPR - (N)	
NECK :	No central/lateral neck swelling	
IMPRESSION :	ENT within (N) limits	

Consultant ENT
Dr. POORNIMA
M.B.B.S., D.L.O., (ENT)
Reg No.100155(KMC)

Name: Kalyan Sex: m Age: 29

chief complaint: - General check-up.

Date: 26/3/23

Rx

Oral Examination
calculi + stain

Rx

Stain Gum pain

26/3/23
scaling done
(Dr. Sowmya)

(Dr. Sowmya)



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TEST REPORT

Name : Mr . B KALYAN NAIK [SPOUSE]
Age / Gender : 29 Years / Male
Ref.By :
Req. No : BIL2940104

TID : UMR1068824
Registered on : 25-Mar-2023 09:22 AM
Reported On : 25-Mar-2023 12:10 PM
Reference : Medi Wheel

DEPARTMENT OF ULTRASOUND Ultrasound Whole Abdomen

LIVER : Normal in size and echotexture. No focal lesions.

No IHBD /CBD dilatation. Portal vein is normal in size.

SPLEEN : Normal in size and echotexture. No focal lesion seen.

GALL BLADDER : Well distended. No sludge / gall stones / sol.
Gall bladder -Wall thickness is normal.
No pericholecystic oedema.

PANCREAS : Normal in size and echotexture.No calcification / sol.
Pancreatic duct is normal. No peripancreatic fluid collection.

RIGHT KIDNEY : 11.82 x 4.99 cms.
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.


LEFT KIDNEY : 11.76 x 4.89 cms.
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

URINARY BLADDER : Well distended. Normal ii contour.
Wall thickness is normal. No calculus / sol.

PROSTATE : Normal in size and echotexture.
No calcification / sol.
No pre or para aortic adenopathy / ascites noted.

IMPRESSION : Normal Study.

Clinical correlation


Dr. PRAJAKTA SUKHADEVE
DNB RADIOLOGY
Reg. No. 68493



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TEST REPORT

Name : Mr . B KALYAN NAIK [SPOUSE]
Age / Gender : 29 Years / Male
Ref.By :
Req. No : BIL2940104

TID : UMR1068824
Registered on : 25-Mar-2023 09:22 AM
Reported On : 25-Mar-2023 01:32 PM
Reference : Medi Wheel

X-RAY CHEST PA VIEW

Lung fields are clear.

Cardia is normal.

Hila are normal.

C P angles are free.

Bony cage is normal.

Soft tissues are normal.

IMPRESSION : NORMAL CHEST X-RAY

Dr. Syed Anwarul Haq
Reg. No. 68775
Consultant Radiologist

MR.B.KALYAN NAIK

Male 29Years

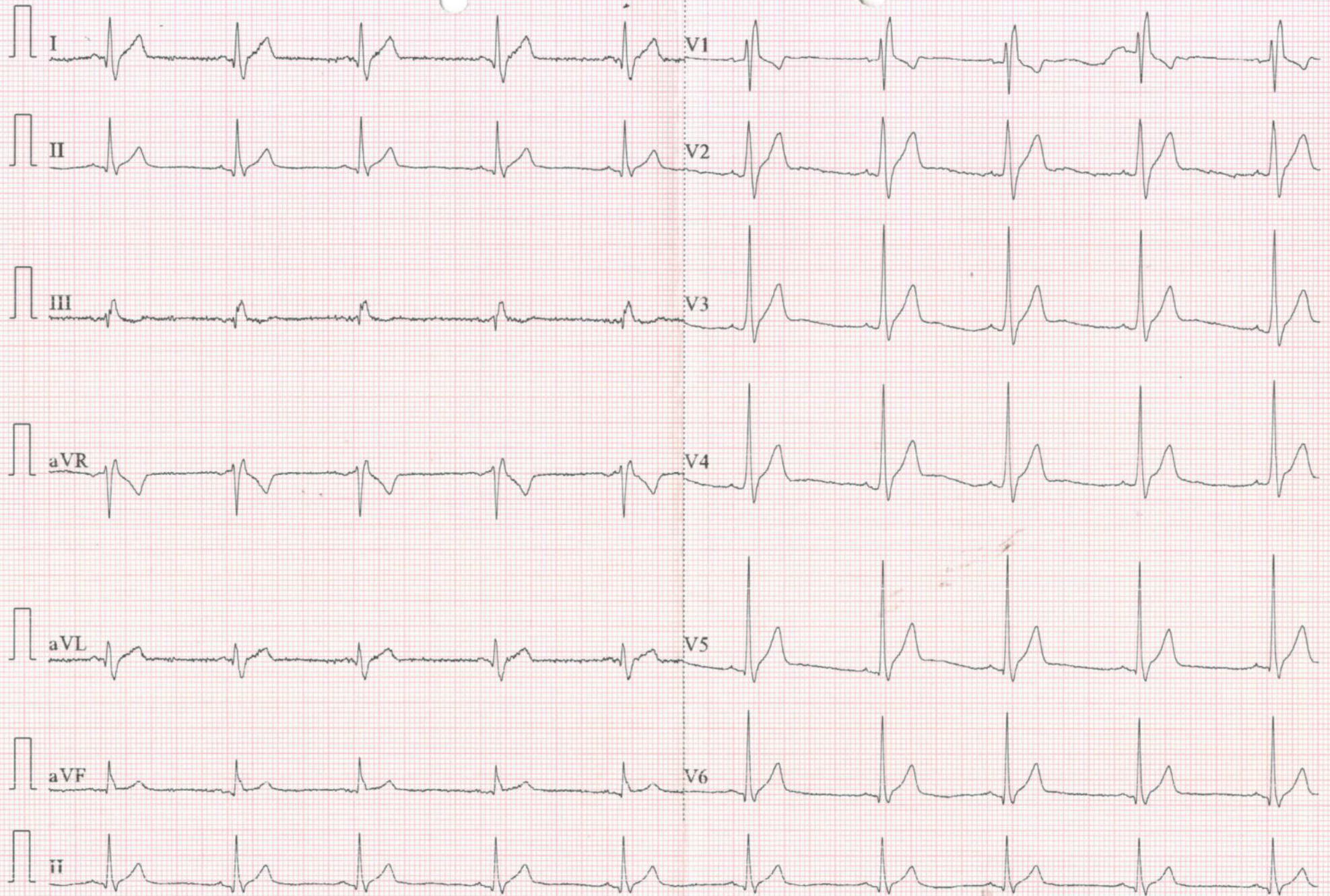
HR : 58 bpm
P : 97 ms
PR : 129 ms
QRS : 128 ms
QT/QTc : 366/362 ms
P/QRS/T : 31/90/29 °
RV5/SV1 : 2.214/0.607 mV

Diagnosis Information:
Sinus Bradycardia
Complete Right Bundle Branch Block
Slight ST Elevation(V4,V5)

RRBBB
sinus bradycardia

DR. PRASHANT P
DM. Cardiology
Reg.No. 1848

Report Confirmed by:



PATIENT SUMMARY REPORT

PARKLINE DIAGNOSTICS PVT.LTD

ID : 2940104
NAME : MR. B. KALYAN NAIK
AGE / SEX : 29 / MALE

HEIGHT (cm) : 190
WEIGHT (kg) : 73
PROTOCOL : BRUCE

REF. BY : MEDIWHEEL
DONE BY : DR. PRASHANT P
TECHNICIAN : G.M SURESH

CASE HISTORY

MEDICATION

OBJECT OF TEST : Routine Check Up.

RISK FACTOR : None.

ACTIVITY : Very Active.

OTHER INVESTIGATION : ECG

REASON FOR TERMINATION : THR ACHIEVE3D

EXERCISE TOLERANCE : Good (> 10 METS).


EXERCISE INDUCED ARRHYTHMIAS : No.

HAEMO RESPONSE : Normal.

CHRONO RESPONSE : Normal.

FINAL IMPRESSION

EXTRA COMMENTS

*TruT
Negative
findings
ischaemia*


Confirmed By : Dr. PRASHANT. P
DM. Cardiology
Reg.No.1848
Signature

BPL DYNATRAC