

## TRANS-THORACIC ECHO REPORT

Patient MRN : 2014-174

Date : 14.04.2023

Patient Name : Mr.KOPPADA NAGA JAYARAM

Age/Gender : 36 yrs/male

### M-MODE / 2D MEASUREMENTS

LVEF (>55)% : 60%	LVID(d) (40-56)mm : 45mm	LVID (s) mm : 31mm
TAPSE (>16) mm : 20mm	IVS (d) (6-10)mm : 10mm	LV-EDV ml : --
LA (<39) mm : 31mm	PWD (d) (6-10) mm : 10mm	LV-ESV ml : --
RA (<44)mm : 33mm	RV (<35) mm : 27mm	BSA m <sup>2</sup> : --

### DOPPLER MEASUREMENTS

MITRAL VALVE : E/A - 0.6/0.4 M/S, NORMAL LV DIASTOLIC FUNCTION, MR-TRIVIAL

AORTIC VALVE : PG - 3 MMHG /AR-TRIVIAL

TRICUSPID VALVE : TR -TRIVIAL

PULMONARY VALVE : PG - 4 MMHG

PA PRESSURE : PASP- 23 MMHG/ NORMAL PA PRESSURE.

### FINDINGS

SITUS SOLITUS, LEVOCARDIA, AV AND VA CONCORDANT, NORMAL GREAT ARTERY RELATIONSHIP

### VALVES

MITRAL : NORMAL

AORTIC : NORMAL

TRICUSPID : NORMAL

PULMONARY : NORMAL

### CHAMBERS

LV : NORMAL SIZED, NORMAL LV SYSTOLIC FUNCTION.

RV : NORMAL SIZED, NORMAL RV FUNCTION.

RWMA : NO RWMA

LVOT : NORMAL

LEFT ATRIUM : NORMAL SIZED

RIGHT ATRIUM : NORMAL SIZED

**SEPTAE**

**IVS** : INTACT

**IAS** : INTACT

**ARTERIES & VEINS**

**AORTA** : AORTIC ANNULUS - 18 MM, ASCENDING AORTA- 27 MM,  
NORMAL ARCH NORMAL SIZED.

**PULMONARY ARTERY** : NORMAL

**IVC, SVC & CS** : IVC – 13 MM, NORMAL SIZED, COLLAPSING, NORMAL RA PRESSURE.

**PULMONARY VEINS** : NORMAL

**PERICARDIUM** : NORMAL

**VEGETATION / THROMBUS / TUMOR**: NIL

**OTHER FINDINGS:**

SINUS RHYTHM- 90 BPM

NO PREVIOUS ECHO REPORT

**CONCLUSION**

NORMAL CHAMBER DIMENSIONS

NORMAL PA PRESSURE

NO RWMA

NORMAL LV SYSTOLIC FUNCTION

LVEF:- 60%

  
CHANDANA V  
CARDIAC SONOGRAPHER

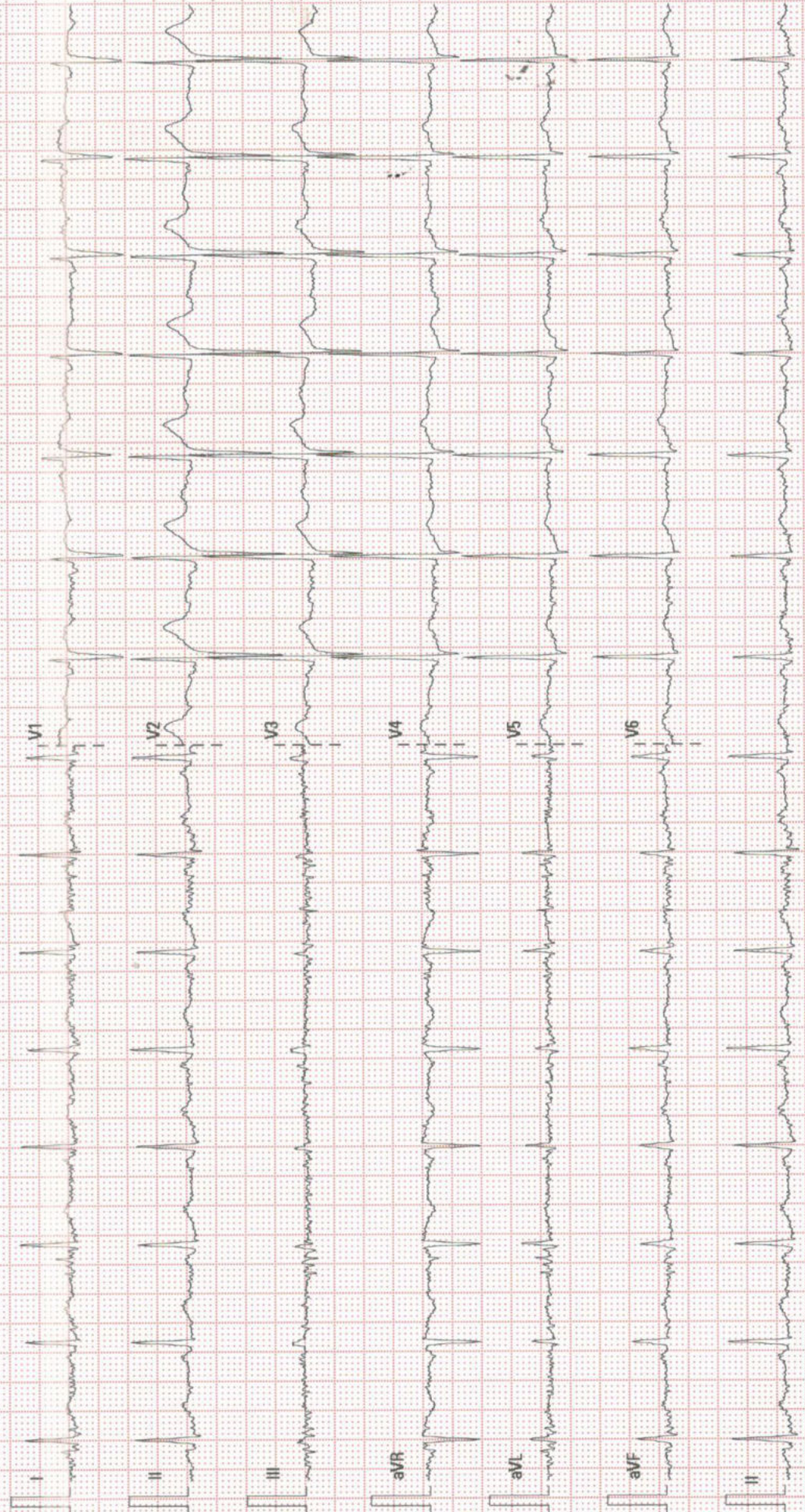
ID: 2014-174  
Name: MR. KOPPADA JAYARAM  
Age: 36 Years  
Gender: Male

14-04-2023 09:51:51

Vent. Rate 90 bpm  
PR Interval 146 ms  
QRS Duration 94 ms  
QT/QTc Interval 360/413 ms  
P/QRS/T Axis 55/44/58 deg  
RV5/SV1 1.788/0.918 mV  
RV5 + SV1 2.706 mV  
QTc/Hodges

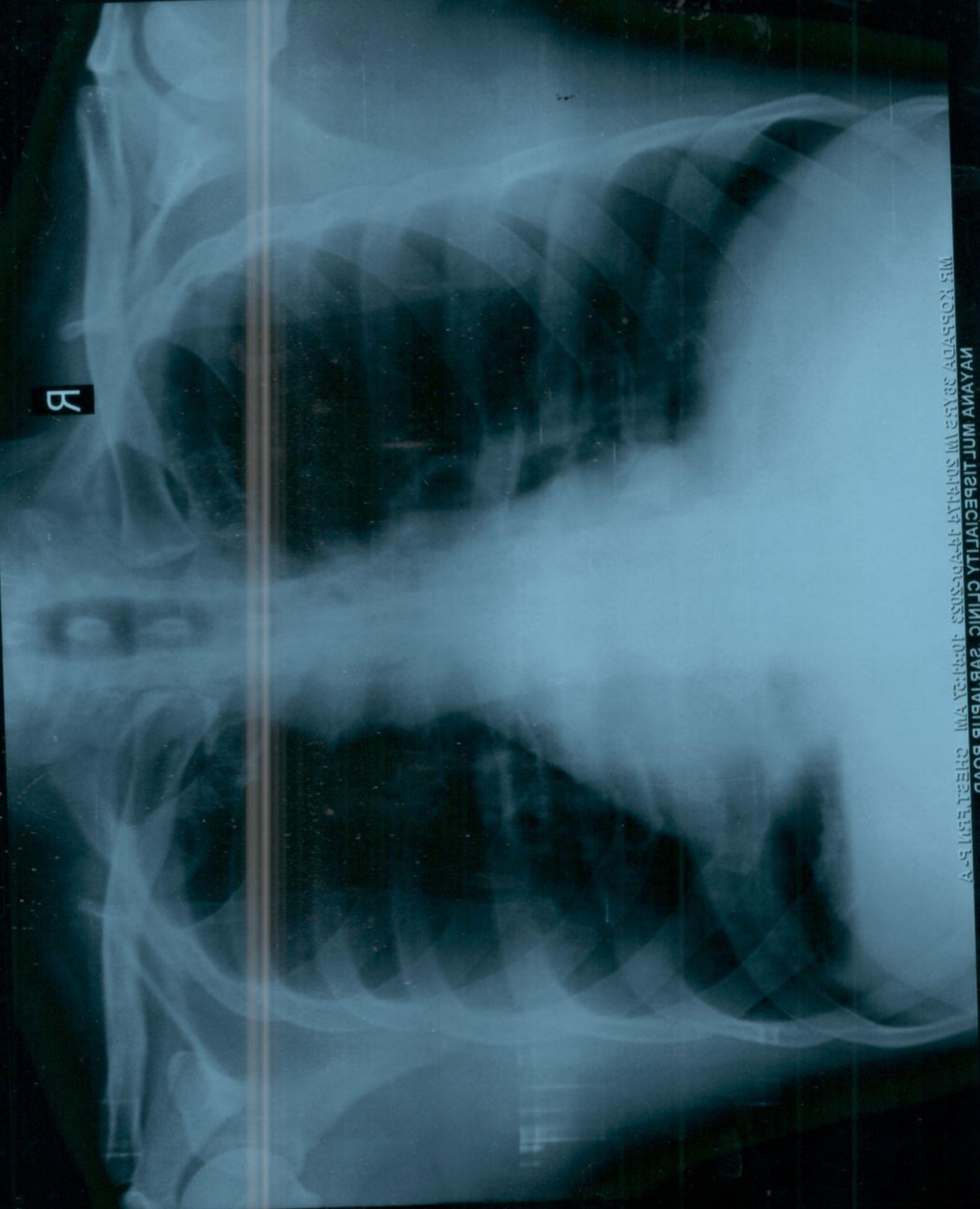
Sinus rhythm  
ST junctional depression is nonspecific  
Borderline ECG

Unconfirmed Diagnosis



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MR. KOBBADE SURESH M. SPECIALIST IN RADIOLOGICAL INVESTIGATION CHEST/ENT/PA  
NAYANA MULTISPECIALITY CLINIC, SARJAPUR ROAD



Patient Name : Mr.KOPPADA NAGA JAYARAM  
Age : 36 Years  
Referring Doctor : PKG

Patient ID : 2014- 0174  
Sex : male  
Date : 14 .04.2023

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

**Liver** is normal in size (13.3 cm) and shows mild diffuse increase in echogenicity. No intra or extra hepatic biliary duct dilatation. No focal lesions.

**Portal vein** is normal in size, course and caliber. **CBD** is not dilated.

**Gall bladder** is normal without evidence of calculi, wall thickening or pericholecystic fluid.

**Pancreas** to the extent visualized, appears normal in size, contour and echogenicity.

**Spleen** is normal in size (10.3cm), shape, contour and echopattern. No evidence of mass or focal lesions.

**Right Kidney** is normal in size (measures 8.8 cm in length & 1.5cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Left Kidney** is normal in size (measures 9.9 cm in length & 1.5 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Retroperitoneum** – Obscured by bowel gas.

**Urinary Bladder** is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

**Prostate** is normal in echopattern and size, (Volume =18.3cc).

**Fluid** - There is no ascites or pleural effusion.

IMPRESSION:

- GRADE I FATTY LIVER

  
Dr. Ananthalakshmi.S  
Sonologist



**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 11:00 AM Reported On : 14/04/2023 12:21 PM

Barcode : 012304140775 Specimen : Serum Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>SERUM CREATININE</b>			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.78	mg/dL	0.66-1.25
eGFR (Calculated)	112.7	mL/min/1.73m <sup>2</sup>	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric – Urease)	12	mg/dL	9.0-20.0
<b>Serum Uric Acid</b> (Colorimetric - Uricase,Peroxidase)	4.4	mg/dL	3.5-8.5
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	<b>210 H</b>	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	<b>187 H</b>	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	41	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	<b>169.0 H</b>	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	137	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	37.4	mg/dL	0.0-40.0

Patient Name : Mr Koppada Naga Jayaram MRN : 20140000000174 Gender/Age : MALE , 36y (10/06/1986)

Cholesterol /HDL Ratio (Calculated)	5.2 H	-	0.0-5.0
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#### LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.68	mg/dL	0.2-1.3
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Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.10	mg/dL	0.0-0.3
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Unconjugated Bilirubin (Indirect) (Calculated)	0.59	mg/dL	0.0-1.1
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Total Protein (Colorimetric - Biuret Method)	7.70	gm/dL	6.3-8.2
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Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.80	gm/dL	3.5-5.0
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Serum Globulin (Calculated)	2.91	gm/dL	2.0-3.5
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Albumin To Globulin (A/G)Ratio (Calculated)	1.65	-	1.0-2.1
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SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	24	U/L	17.0-59.0
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SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	17	U/L	<50.0
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Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	80	U/L	38.0-126.0
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Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	27	U/L	15.0-73.0
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#### Interpretation Notes

- Indirect Bilirubin result is a calculated parameter (Indirect Bilirubin = Total Bilirubin - Direct Bilirubin). Indirect bilirubin result includes the delta bilirubin fraction also. Delta Bilirubin is the bilirubin which is covalently bound to albumin. Delta Bilirubin is not expected to be present in healthy adults or neonates.

#### THYROID PROFILE (T3, T4, TSH)

Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)	1.26	ng/mL	0.97-1.69
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Thyroxine (T4) (Enhanced Chemiluminescence)	7.38	µg/dl	5.53-11.0
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Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence) 1.098  $\mu$ IU/mL 0.4-4.049

--End of Report--



Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry



Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

**Note**

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.  
(Lipid Profile, -> Auto Authorized)  
(CR, -> Auto Authorized)  
(LFT, -> Auto Authorized)  
(, -> Auto Authorized)  
(Uric Acid, -> Auto Authorized)  
(Blood Urea Nitrogen (Bun) -> Auto Authorized)



## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 11:00 AM Reported On : 14/04/2023 11:32 AM

Barcode : 022304140482 Specimen : Whole Blood Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

## HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Photometric Measurement)	16.3	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	<b>5.74 H</b>	million/ $\mu$ l	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	<b>50.2 H</b>	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	87.4	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.4	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.5	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.1	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	311	$10^3/\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	6.3	$10^3/\mu$ L	4.0-10.0
<b>DIFFERENTIAL COUNT (DC)</b>			
Neutrophils (VCS Technology Plus Microscopy)	62.1	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	29.5	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	6.2	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	1.1	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	1.1	%	0.0-2.0

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Absolute Neutrophil Count (Calculated)	3.92	$\times 10^3$ cells/ $\mu$ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	1.86	$\times 10^3$ cells/ $\mu$ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.4	$\times 10^3$ cells/ $\mu$ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.07	$\times 10^3$ cells/ $\mu$ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.07	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

#### Interpretation Notes

- Haemoglobin , RBC Count and PCV: If below reference range, indicates Anemia. Further evaluation is suggested .  
RBC Indices aid in typing of anemia.  
WBC Count: If below reference range, susceptibility to infection.  
If above reference range- Infection\*  
If very high in lakhs-Leukemia  
Neutrophils -If above reference range-acute infection, mostly bacterial  
Lymphocytes -If above reference range-chronic infection/ viral infection  
Monocytes -If above reference range- TB,Typhoid,UTI  
Eosinophils -If above reference range -Allergy,cough,Common cold,Asthma & worms  
Basophils - If above reference range, Leukemia, allergy  
Platelets: If below reference range- bleeding disorder, Dengue, drug- induced, malignancies  
\* In bacterial infection with fever total WBC count increases.  
Eg Tonsillitis,Sinusitis,Bronchitis,Pneumonia,Appendicitis,UTI -12000-25000 cells/cumm.  
In typhoid and viral fever WBC may be normal.  
**DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.**

--End of Report--



Dr. Deepak M B  
MD, PDF, Hematopathology  
Consultant

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

**Note**

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- Kindly correlate clinically.



**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 11:00 AM Reported On : 14/04/2023 11:36 AM

Barcode : 012304140774 Specimen : Whole Blood Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

**BIOCHEMISTRY****Test Result Unit Biological Reference Interval****HBA1C**

HbA1c (HPLC NGSP Certified)	4.9	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
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Estimated Average Glucose (Calculated)	93.93	-	-
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**Interpretation:**

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

**--End of Report--**

Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry

Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

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- Kindly correlate clinically.



## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 11:00 AM Reported On : 14/04/2023 11:28 AM

Barcode : 012304140773 Specimen : Plasma Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

### BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	88	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020

--End of Report--



Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry



Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry

#### Note

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- Kindly correlate clinically.

(Fasting Blood Sugar (FBS) -> Auto Authorized)



## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 11:00 AM Reported On : 14/04/2023 11:28 AM

Barcode : 012304140773 Specimen : Plasma Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

### BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	88	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020

--End of Report--



Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry



Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry

#### Note

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- Kindly correlate clinically.

(Fasting Blood Sugar (FBS) -> Auto Authorized)



## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 11:00 AM Reported On : 14/04/2023 11:59 AM

Barcode : 022304140483 Specimen : Whole Blood - ESR Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

### HEMATOLOGY


Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Westergren Method)	2	mm/1hr	0.0-10.0

#### Interpretation Notes

- ESR high - Infections, chronic disorders,, plasma cell dyscrasias.

**DISCLAIMER:**All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert

--End of Report--



Dr. Shalini K S  
DCP, DNB, Pathology  
Consultant

#### Note

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- Results relate to the sample only.
- Kindly correlate clinically.





## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 10:56 AM Reported On : 14/04/2023 11:37 AM

Barcode : 032304140115 Specimen : Urine Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

### CLINICAL PATHOLOGY

Test	Result	Unit
<b>Urine For Sugar (Fasting)</b> (Enzyme Method (GOD POD))	Not Present	-

--End of Report--

*Hema S*

Dr. Hema S  
MD, DNB, Pathology  
Associate Consultant

#### Note

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- Kindly correlate clinically.



**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 10:56 AM Reported On : 14/04/2023 11:57 AM

Barcode : 032304140115 Specimen : Urine Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
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**URINE ROUTINE & MICROSCOPY****PHYSICAL EXAMINATION**

Colour	STRAW	-	-
Appearance	Clear	-	-

**CHEMICAL EXAMINATION**

pH(Reaction) (pH Indicator Method)	6.5	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.020	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present
Bile Salts (Azo Coupling Method)	Not Present	-	Not Present
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present
Urobilinogen (Azo Coupling Method)	Normal	-	Normal
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present

**MICROSCOPIC EXAMINATION**

Pus Cells	0.4	/hpf	0-5
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Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

RBC	0.4	/hpf	0-4
Epithelial Cells	0.5	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	12.0	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

#### Interpretation Notes

- Since the analytical methodology of Urine Microscopy is Flow cytometry based and FDA approved the results of automated urine microscopy which includes RBCs, WBCs Epithelial cells etc are being reported in decimal fraction. Rounding off the value to nearest whole number is suggested.

--End of Report--

*Hema S*

Dr. Hema S  
MD, DNB, Pathology  
Associate Consultant

#### Note

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 08:58 AM Received On : 14/04/2023 11:09 AM Reported On : 14/04/2023 11:41 AM

Barcode : 1B2304140019 Specimen : Whole Blood Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
<b>BLOOD GROUP &amp; RH TYPING</b>		
Blood Group (Column Agglutination Technology)	AB	-
RH Typing (Column Agglutination Technology)	Positive	-

--End of Report--

Dr. Prathip Kumar B R  
MBBS,MD, Immunohaematology & Blood Transfusion  
Consultant

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 10:53 AM Received On : 14/04/2023 01:02 PM Reported On : 14/04/2023 01:39 PM

Barcode : 012304141226 Specimen : Plasma Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Post Prandial Blood Sugar (PPBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	87	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

--End of Report--

Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry

Note

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- (Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Koppada Naga Jayaram MRN : 2014000000174 Gender/Age : MALE , 36y (10/06/1986)

Collected On : 14/04/2023 10:53 AM Received On : 14/04/2023 12:54 PM Reported On : 14/04/2023 01:06 PM

Barcode : 032304140210 Specimen : Urine Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9666140375

### CLINICAL PATHOLOGY

Test	Result	Unit
<b>Urine For Sugar (Post Prandial)</b> (Enzyme Method (GOD POD))	Not Present	-

--End of Report--



Dr. Sudarshan Chougule  
MBBS, MD, Pathology  
Consultant & Head - Hematology & Flow Cytometry

#### Note

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