భారత ప్రభుత్వం
Government of India

తడివాక వెంకట నరేశ్
Tadivaaka Venkatanaresh
పుట్టిన తేది/DOB: 01/06/1991
పురుషుడు/ MALE

2206 5356 7621
VID : 9146 1615 9180 3507

నా ఆధార్, నా గుర్తింపు

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

ఆధార్

చిరునామా:
S/O తడివాక శ్రీనివాస రావ్, 13-17, మొదుకూరు,
మొదుకూరు, మొదుకూరు, మొదుకూరు, గుంటూరు,
ఆంధ్ర ప్రదేశ్ - 522318

Address:
S/O Tadivaaka Srinivasa Rao, 13-17,
modukuru, modukuru, modukuru,
Modukuru, Guntur,
Andhra Pradesh - 522318

QR Code with Photograph

2206 5356 7621
VID : 9146 1615 9180 3507

help@uidai.gov.in   www.uidai.gov.in

```
. . . . . . . . . . . . . . . . . . . . .            P      31  °
0568647                      Intervals:    QRS    25  °
. . . . . . . . .    Male    RR   909  ms  T      25  °          5.79              UNCONFIRMED REPORT
32 years                     P    114  ms
. . . . . cm  /  . . . . . kg  PR   156  ms  P (II)   0.09 mV
                             QRS   94  ms  S (V1)  -1.02 mV
                             QT   394  ms  R (V5)   1.56 mV
                             QTC  415  ms  Sokol.   2.89 mV
```

10 mm/mV   10 mm/mV

I   aVR   V1   V4

II   aVL   V2   V5

III   aVF   V3   V6

II
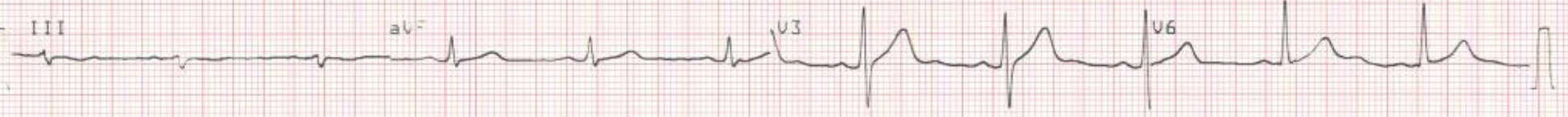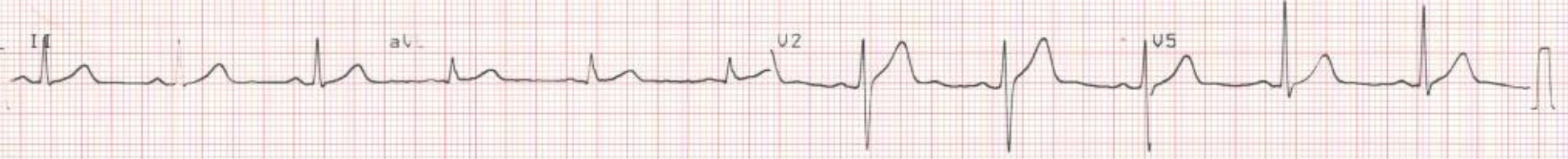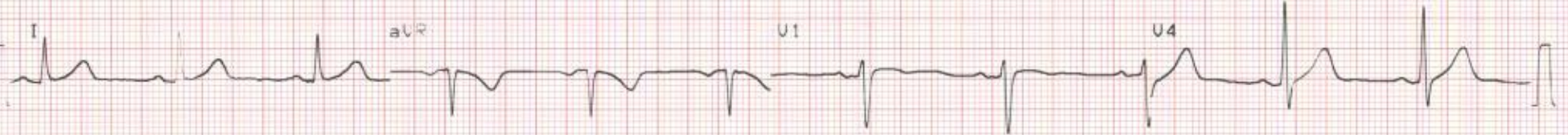
10 mm/mV

Dr. B. NAGARAJU
Regd.No: 70760   MBBS, M.D, DM
CONSULTANT CARDIOLOGIST
YODA DIAGNOSTICS-GUNTUR

25 mm/s   0.05-25Hz   F 2 55F SB   Sa 08-JUL-23 09:11:42   AT- 32 1.37 C

SCHILLER   Part No 2:157017M   CE 0123

Visit ID	: YGT19050		UHID/MR No	: YGT.0000018919
Patient Name	: Mr. TADIVAAKA VENKATA NARESH		Client Code	: 1409
Age/Gender	: 32 Y 0 M 0 D /M		Barcode No	: 10568647
DOB	:		Registration	: 08/Jul/2023 08:49AM
Ref Doctor	: SELF		Collected	: 08/Jul/2023 08:49AM
Client Name	: MEDI WHEELS		Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N		Reported	: 08/Jul/2023 10:42AM
Hospital Name	:			

DEPARTMENT OF RADIOLOGY

ULTRASOUND WHOLE ABDOMEN

Clinical Details : General check-up.

LIVER : Enlarged in size (16.0cm) and Increased echo-texture. No focal lesion is seen. Intra hepatic biliary channels are not dilated.

GALL BLADDER : Well distended. No evidence of wall thickening / calculi.

Visualised common bile duct & portal vein appears normal.

PANCREAS : Normal in size and outlines. Parenchymal texture normal. No ductal dilatation. No calcifications / calculi.

SPLEEN : Normal in size (12.0cm) and echotexture. No focal lesion is seen.

RIGHT KIDNEY : measures (12.0x5.5cm). Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

LEFT KIDNEY : measures (11.5x6.5cm). Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

URINARY BLADDER : Well distended. No evidence of wall thickening / calculi.

PROSTATE : Normal in size vol-(14cc) and echo-texture.

No enlarged nodes are visualised. No retro-peritoneal lesion is identified. Great vessels appear normal.

No free fluid is seen in peritoneal cavity.

IMPRESSION:

- MILD HEPATOMEGALY WITH GRADE - II FATTY LIVER.

Verified By :
Kollipara Venkateswara Rao

Approved By :

Dr.SUSHMA VUYYURU
MBBS;MD(Radio-Diagnosis)
CONSULTANT RADIOLOGIST

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DEPARTMENT OF RADIOLOGY

suggested clinical correlation and follow up

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DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Findings:

Soft tissues/ bony cage normal.

Trachea and Mediastinal structures are normal.

Heart size and configuration are normal.

Aorta and pulmonary vascularity are normal.

Lung parenchyma and CP angles are clear.

Bilateral hilae and diaphragmatic contours are normal.

IMPRESSION :

- No Significant Abnormality Detected.

Suggested Clinical Correlation & Follow up.

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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological. Ref. Range	Method

ESR (ERYTHROCYTE SEDIMENTATION RATE)

Sample Type : WHOLE BLOOD EDTA

ERYTHROCYTE SEDIMENTATION RATE	**20**	mm/1st hr	0 - 15	Capillary Photometry

COMMENTS:
ESR is an acute phase reactant which indicates presence and intensity of an inflammatory process. It is never   diagnostic of a specific disease. It is used to monitor the course or response to treatment of certain diseases.   Extremely high levels are found in cases of malignancy, hematologic diseases, collagen disorders and renal diseases.

Increased levels may indicate: Chronic renal failure (e.g., nephritis, nephrosis), malignant diseases (e.g., multiple myeloma, Hodgkin disease, advanced Carcinomas), bacterial infections (e.g., abdominal infections, acute pelvic inflammatory disease, syphilis, pneumonia), inflammatory diseases (e.g. temporal arteritis, polymyalgia rheumatic, rheumatoid arthritis, rheumatic fever, systemic lupus erythematosus [SLE]), necrotic diseases (e.g., acute myocardial infarction, necrotic tumor, gangrene of an extremity), diseases associated with increased proteins (e.g., hyperfibrinogenemia, macroglobulinemia), and severe anemias (e.g., iron deficiency or B12 deficiency).
Falsely decreased levels may indicate: Sickle cell anemia, spherocytosis, hypofibrinogenemia, or polycythemia vera.

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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological. Ref. Range	Method

BLOOD GROUP ABO & RH Typing

Sample Type : WHOLE BLOOD EDTA

ABO	O			
Rh Typing	POSITIVE			

Method : Hemagglutination Tube method by forward and reverse grouping

COMMENTS:

The test will detect common blood grouping system A, B, O, AB and Rhesus (RhD). Unusual blood groups or rare subtypes will not be detected by this method. Further investigation by a blood transfusion laboratory, will be necessary to identify such groups.

Disclaimer: There is no trackable record of previous ABO & RH test for this patient in this lab. Please correlate with previous blood group findings. Advsied cross matching before transfusion

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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological. Ref. Range	Method

CBC(COMPLETE BLOOD COUNT)

Sample Type : WHOLE BLOOD EDTA

Test Name	Result	Unit	Biological. Ref. Range	Method
HAEMOGLOBIN (HB)	13.5	g/dl	13.0 - 17.0	Cyanide-free SLS method
RBC COUNT(RED BLOOD CELL COUNT)	4.89	million/cmm	4.50 - 5.50	Impedance
PCV/HAEMATOCRIT	**39.3**	%	40.0 - 50.0	RBC pulse height detection
MCV	**80.3**	fL	83 - 101	Automated/Calculated
MCH	27.6	pg	27 - 32	Automated/Calculated
MCHC	34.3	g/dl	31.5 - 34.5	Automated/Calculated
RDW - CV	12.4	%	11.0-16.0	Automated Calculated
RDW - SD	38.7	fl	35.0-56.0	Calculated
MPV	8.5	fL	6.5 - 10.0	Calculated
PDW	16.1	fL	8.30-25.00	Calculated
PCT	0.25	%	0.15-0.62	Calculated
TOTAL LEUCOCYTE COUNT	8,890	cells/ml	4000 - 11000	Flow Cytometry
DLC (by Flow cytometry/Microscopy)				
NEUTROPHIL	61	%	40 - 80	Impedance
LYMPHOCYTE	34	%	20 - 40	Impedance
EOSINOPHIL	01	%	01 - 06	Impedance
MONOCYTE	04	%	02 - 10	Impedance
BASOPHIL	0	%	0 - 1	Impedance
PLATELET COUNT	2.92	Lakhs/cumm	1.50 - 4.10	Impedance

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Client Add	: F-701, Lado Sarai, Mehravli, N		Reported	: 08/Jul/2023 11:04AM
Hospital Name	:			

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

THYROID PROFILE (T3,T4,TSH)

Sample Type : SERUM

Test Name	Result	Unit	Biological. Ref. Range	Method
T3	0.97	ng/ml	0.60 - 1.78	CLIA
T4	10.97	ug/dl	4.82-15.65	CLIA
TSH	1.96	ulU/mL	0.30 - 5.60	CLIA

INTERPRETATION:
1. Serum T3, T4 and TSH are the measurements form three components of thyroid screening panel and are useful in diagnosing various disorders of thyroid gland function.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values along with depressed TSH levels.
3. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
4. Normal T4 levels accompanied by high T3 levels are seen in patients with T3 thyrotoxicosis. Slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propanolol and propylthiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors (secondary hyperthyroidism).
6. Low levels of Thyroid hormones (T3, T4 & FT3, FT4) are seen in cases of primary, secondary and tertiary hypothyroidism and sometimes in non-thyroidal illness also.
7. Increased levels are found in Grave's disease, hyperthyroidism and thyroid hormone resistance.
8. TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.
9. REFERENCE RANGE :

PREGNANCY	TSH in uI U/ mL
1st Trimester	0.60 - 3.40
2nd Trimester	0.37 - 3.60
3rd Trimester	0.38 – 4.04

(References range recommended by the American Thyroid Association)
Comments:

1. During pregnancy, Free thyroid profile (FT3, FT4 & TSH) is recommended.

2. TSH levels are subject to circadian variation, reaches peak levels between 2-4 AM and at a minimum between 6-10 PM. The variation of the day has influence on the measured serum TSH concentrations.

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

LIVER FUNCTION TEST(LFT)

Sample Type : SERUM

Test Name	Result	Unit	Biological. Ref. Range	Method
TOTAL BILIRUBIN	0.66	mg/dl	0.3 - 1.2	JENDRASSIK & GROFF
CONJUGATED BILIRUBIN	0.16	mg/dl	0 - 0.2	DPD
UNCONJUGATED BILIRUBIN	0.50	mg/dl		Calculated
S.G.O.T	22	U/L	< 50	KINETIC WITHOUT P5P-IFCC
S.G.P.T	25	U/L	< 50	KINETIC WITHOUT P5P-IFCC
ALKALINE PHOSPHATASE	81	U/L	30 - 120	IFCC-AMP BUFFER
TOTAL PROTEINS	**8.2**	gm/dl	6.0 - 8.0	Biuret
ALBUMIN	4.6	gm/dl	3.5 - 5.2	BCG
GLOBULIN	3.6	gm/dl		Calculated
A/G RATIO	1.28			Calculated

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

LIPID PROFILE

Sample Type : SERUM

Test Name	Result	Unit	Biological. Ref. Range	Method
TOTAL CHOLESTEROL	197	mg/dl	Refere Table Below	Cholesterol oxidase/peroxidase
H D L CHOLESTEROL	33	mg/dl	> 40	Enzymatic/ Immunoinhibiton
L D L CHOLESTEROL	131.2	mg/dl	Refere Table Below	Enzymatic Selective Protein
TRIGLYCERIDES	**164**	mg/dl	See Table	GPO
VLDL	**32.8**	mg/dl	15 - 30	Calculated
T. CHOLESTEROL/ HDL RATIO	5.97		Refere Table Below	Calculated
TRIGLYCEIDES/ HDL RATIO	**4.97**	Ratio	< 2.0	Calculated
NON HDL CHOLESTEROL	**164**	mg/dl	< 130	Calculated

Interpretation

NATIONAL LIPID ASSOCIATION RECOMMENDATIONS (NLA-2014)	TOTAL CHOLESTEROL	TRIGLYCERIDE	LDL CHOLESTEROL	NON HDL CHOLESTEROL
Optimal	<200	<150	<100	<130
Above Optimal	-	-	100-129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220

REMARKS	Cholesterol : HDL Ratio
Low risk	3.3-4.4
Average risk	4.5-7.1
Moderate risk	7.2-11.0
High risk	>11.0

Note:
1.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
2. NLA-2014 identifies Non HDL Cholesterol(an indicator of all atherogenic lipoproteins such as LDL , VLDL, IDL, Lpa, Chylomicron remnants)along with LDL-cholesterol as co- primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL &Non HDL.
3.Apolipoprotein B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved
4. Additional testing for Apolipoprotein B, hsCRP, Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

HBA1C

Sample Type : WHOLE BLOOD EDTA

HBA1c RESULT	**6.9**	%	Normal Glucose tolerance (non-diabetic): <5.6% Pre-diabetic: 5.7-6.4% Diabetic Mellitus: >6.5%	HPLC
ESTIMATED AVG. GLUCOSE	151	mg/dl		

Note:
1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions,targeting a goal of < 7.0 % may not be appropriate.
HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control .

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Test Name	Result	Unit	Biological. Ref. Range	Method

BLOOD UREA NITROGEN (BUN)

Sample Type : Serum

SERUM UREA	17	mg/dL	17 - 43	Urease GLDH
Blood Urea Nitrogen (BUN)	7.9	mg/dl	5 - 25	GLDH-UV

Increased In:
Impaired kidney function, Reduced renal blood flow {CHF, Salt and water depletion, (vomiting, diarrhea, diuresis, sweating), Shock}, Any obstruction of urinary tract, Increased protein catabolism, AMI, Stress

Decreased In:
Diuresis (e.g. with over hydration), Severe liver damage, Late pregnancy, Infancy, Malnutrition, Diet (e.g., low-protein and high-carbohydrate, IV feedings only), Inherited hyperammonemias (urea is virtually absent in blood)

Limitations:
Urea levels increase with age and protein content of the diet.

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

FBS (GLUCOSE FASTING)

Sample Type : FLOURIDE PLASMA

FASTING PLASMA GLUCOSE	**159**	mg/dl	70 - 100	HEXOKINASE

INTERPRETATION:

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)

Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

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CONTACT US

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Ref Doctor	: SELF		Collected	: 08/Jul/2023 12:38PM
Client Name	: MEDI WHEELS		Received	: 08/Jul/2023 12:48PM
Client Add	: F-701, Lado Sarai, Mehravli, N		Reported	: 08/Jul/2023 01:14PM
Hospital Name	:			

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

PPBS (POST PRANDIAL GLUCOSE)

Sample Type : FLOURIDE PLASMA

POST PRANDIAL PLASMA GLUCOSE	**193**	mg/dl	<140	HEXOKINASE

INTERPRETATION:

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)

Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

Verified By :

Kollipara Venkateswara Rao

Approved By :

Dr. Sumalatha
MBBS,DCP
Consultant Pathologist

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6-3-862/A, Lal Bungalow add on, Ameerpet, Hyderabad - 500016

CONTACT US

Visit ID	: YGT19050	UHID/MR No	: YGT.0000018919
Patient Name	: Mr. TADIVAAKA VENKATA NARESH	Client Code	: 1409
Age/Gender	: 32 Y 0 M 0 D /M	Barcode No	: 10568647
DOB	:	Registration	: 08/Jul/2023 08:49AM
Ref Doctor	: SELF	Collected	: 08/Jul/2023 09:03AM
Client Name	: MEDI WHEELS	Received	: 08/Jul/2023 09:21AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 08/Jul/2023 09:54AM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

SERUM CREATININE

Sample Type : SERUM

SERUM CREATININE	**0.64**	mg/dl	0.67 - 1.17	KINETIC-JAFFE

Increased In:

- Diet: ingestion of creatinine (roast meat), Muscle disease: gigantism, acromegaly,
- Impaired kidney function.

Decreased In:

- Pregnancy: Normal value is 0.4-0.6 mg/dL. A value >0.8 mg/dL is abnormal and should alert the clinician to further diagnostic evaluation.
- Creatinine secretion is inhibited by certain drugs (e.g., cimetidine, trimethoprim).

Verified By :

Kollipara Venkateswara Rao

Approved By :

Dr. Sumalatha
MBBS,DCP
Consultant Pathologist

Visit ID	: YGT19050		UHID/MR No	: YGT.0000018919
Patient Name	**: Mr. TADIVAAKA VENKATA NARESH**		Client Code	: 1409
Age/Gender	: 32 Y 0 M 0 D /M		Barcode No	: 10568647
DOB	:		Registration	: 08/Jul/2023 08:49AM
Ref Doctor	: SELF		Collected	: 08/Jul/2023 09:03AM
Client Name	: MEDI WHEELS		Received	: 08/Jul/2023 09:21AM
Client Add	: F-701, Lado Sarai, Mehravli, N		Reported	: 08/Jul/2023 09:54AM
Hospital Name	:			

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

URIC ACID -SERUM

Sample Type : SERUM

SERUM URIC ACID	5.9	mg/dl	3.5 - 7.20	URICASE - PAP

Uric acid is the final product of purine metabolism in the human organism. Uric acid measurements are used in the diagnosis and treatment of numerous renal and metabolic disorders, including renal failure, gout, leukemia, psoriasis, starvation or other wasting conditions, and of patients receiving cytotoxic drugs.

Verified By :

Kollipara Venkateswara Rao

Approved By :

Dr. Sumalatha
MBBS,DCP
Consultant Pathologist

Visit ID	: YGT19050		UHID/MR No	: YGT.0000018919
Patient Name	**: Mr. TADIVAAKA VENKATA NARESH**		Client Code	: 1409
Age/Gender	: 32 Y 0 M 0 D /M		Barcode No	: 10568647
DOB	:		Registration	: 08/Jul/2023 08:49AM
Ref Doctor	: SELF		Collected	: 08/Jul/2023 09:03AM
Client Name	: MEDI WHEELS		Received	: 08/Jul/2023 09:21AM
Client Add	: F-701, Lado Sarai, Mehravli, N		Reported	: 08/Jul/2023 09:54AM
Hospital Name	:			

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological. Ref. Range	Method

BUN/CREATININE RATIO

Sample Type : SERUM

Test Name	Result	Unit	Biological. Ref. Range	Method
Blood Urea Nitrogen (BUN)	7.9	mg/dl	5 - 25	GLDH-UV
SERUM CREATININE	**0.64**	mg/dl	0.67 - 1.17	KINETIC-JAFFE
BUN/CREATININE RATIO	12.40	Ratio	6 - 25	Calculated

Verified By :

Kollipara Venkateswara Rao

Approved By :

Dr. Sumalatha
MBBS,DCP
Consultant Pathologist

Visit ID	**: YGT19050**		UHID/MR No	: YGT.0000018919
Patient Name	**: Mr. TADIVAAKA VENKATA NARESH**		Client Code	: 1409
Age/Gender	: 32 Y 0 M 0 D /M		Barcode No	: 10568647
DOB	:		Registration	: 08/Jul/2023 08:49AM
Ref Doctor	: SELF		Collected	: 08/Jul/2023 08:49AM
Client Name	: MEDI WHEELS		Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N		Reported	: 08/Jul/2023 10:10AM
Hospital Name	:			

DEPARTMENT OF RADIOLOGY

2D ECHO DOPPLER STUDY

MITRAL VALVE	: Normal
AORTIC VALVE	: Normal
TRICUSPID VALVE	: Normal
PULMONARY VALVE	: Normal
RIGHT ATRIUM	: Normal
RIGHT VENTRICLE	: Normal
LEFT ATRIUM	: 3.3 cms
LEFT VENTRICLE	:

EDD : 4.2 cm   IVS(d) : 0.9cm   LVEF : 66%
ESD : 2.6 cm   PW (d) : 1.0cm   FS   : 36%
No RWMA

IAS	: Intact
IVS	: Intact
AORTA	: 3.1cms
PULMONARY ARTERY	: Normal
PERICARDIUM	: Normal
IVS/ SVC/ CS	: Normal
PULMONARY VEINS	: Normal

Verified By :
Kollipara Venkateswara Rao

Approved By :

Dr.B.Nagaraju
MD(Internal Medicine)
DN(CARDIOLOGY)
APNC Reg.No 70760

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6-3-862/A, Lal Bungalow add on, Ameerpet, Hyderabad - 500016
CONTACT US

Visit ID	: YGT19050		UHID/MR No	: YGT.0000018919
Patient Name	**: Mr. TADIVAAKA VENKATA NARESH**		Client Code	: 1409
Age/Gender	: 32 Y 0 M 0 D /M		Barcode No	: 10568647
DOB	:		Registration	: 08/Jul/2023 08:49AM
Ref Doctor	: SELF		Collected	: 08/Jul/2023 08:49AM
Client Name	: MEDI WHEELS		Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N		Reported	: 08/Jul/2023 10:10AM
Hospital Name	:			

DEPARTMENT OF RADIOLOGY

INTRA CARDIAC MASSES : No

DOPPLER STUDY :

MITRAL FLOW   : E 0.9 m/sec, A 0.6 m/sec.

AORTIC FLOW   : 1.0m/sec

PULMONARY FLOW   : 1.0m/sec

TRICUSPID FLOW   : NORMAL

COLOUR FLOW MAPPING:

IMPRESSION :

* NORMAL SIZED CARDIAC CHAMBERS
* NO RWMA OF LV
* GOOD LV FUNCTION
* NORMAL LV FILLING PATTERN

* NO MR/ AR/ PR

* NO TR / PAH
* NO PE / CLOT / VEGETATION

CONSULTANT CARDIOLOGIST

Verified By :

Kollipara Venkateswara Rao

Approved By :

Dr.B.Nagaraju
MD(Internal Medicine)
DN(CARDIOLOGY)
APNC Reg.No 70760

Visit ID	: YGT19050	UHID/MR No	: YGT.0000018919
Patient Name	**: Mr. TADIVAAKA VENKATA NARESH**	Client Code	: 1409
Age/Gender	: 32 Y 0 M 0 D /M	Barcode No	: 10568647
DOB	:	Registration	: 08/Jul/2023 08:49AM
Ref Doctor	: SELF	Collected	: 08/Jul/2023 09:03AM
Client Name	: MEDI WHEELS	Received	: 08/Jul/2023 09:21AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 08/Jul/2023 10:51AM
Hospital Name	:		

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological. Ref. Range	Method

CUE (COMPLETE URINE EXAMINATION)

Sample Type : SPOT URINE

PHYSICAL EXAMINATION

Test Name	Result	Unit	Biological. Ref. Range	Method
TOTAL VOLUME	25 ML	ml		
COLOUR	PALE YELLOW			
APPEARANCE	CLEAR			
SPECIFIC GRAVITY	1.020		1.003 - 1.035	Bromothymol Blue

CHEMICAL EXAMINATION

Test Name	Result	Unit	Biological. Ref. Range	Method
pH	6.0		4.6 - 8.0	Double Indicator
PROTEIN	NEGATIVE		NEGATIVE	Protein - error of Indicators
GLUCOSE(U)	NEGATIVE		NEGATIVE	Glucose Oxidase
UROBILINOGEN	NEGATIVE	mg/dl	< 1.0	Ehrlichs Reaction
KETONE BODIES	NEGATIVE		NEGATIVE	Nitroprasside
BILIRUBIN - TOTAL	NEGATIVE		Negative	Azo-coupling Reaction
BLOOD	NEGATIVE		NEGATIVE	Tetramethylbenzidine
LEUCOCYTE	NEGATIVE		Negative	by an azo-coupling reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization Reaction

MICROSCOPIC EXAMINATION

Test Name	Result	Unit	Biological. Ref. Range	Method
PUS CELLS	2-3	cells/HPF	0-5	
EPITHELIAL CELLS	1-2	/hpf	0 - 15	
RBCs	NIL	Cells/HPF	Nil	
CRYSTALS	NIL	Nil	Nil	
CASTS	NIL	/HPF	Nil	
BUDDING YEAST	NIL		Nil	
BACTERIA	NIL		Nil	
OTHER	NIL			

Verified By :

Kollipara Venkateswara Rao

Approved By :

Dr. Sumalatha
MBBS,DCP
Consultant Pathologist

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CONTACT US

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological. Ref. Range	Method

*** End Of Report ***

Verified By :

Kollipara Venkateswara Rao

Approved By :

Dr. Sumalatha
MBBS,DCP
Consultant Pathologist

YGT 19050.

DATE: 08-07-23

NAME: J.V. Naresh

AGE: 32/M   ADDRESS: _____

TYPE OF LENS: GLASS ☐   CONTACTS ☐

CR ☐   POLYCARBONATE ☐

COATINGS : ARC ☐   HARD COAT ☐

TINT : White ☐   SP2 ☐ PHOTO GREY ☐

BIFOCALS : KRYPTOK ☐   EXECUTIVE ☐

"D" ☐   PROGRESSIVE ☐

	R			L		
	SPH	CYL	AXIS	SPH	CYL	AXIS
DV	-175	-075	80	-2.00	-050	100
ADD						

INSTRUCTIONS _____

I.P.D. _____ D.V. _____

N.V. _____ CONSTANT USE _____

YGT 19050.

DATE: 08-07-23

NAME: T.V. Naresh

AGE: 32/M   ADDRESS: _____

TYPE OF LENS: GLASS ☐ CONTACTS ☐

CR ☐ POLYCARBONATE ☐

COATINGS : ARC ☐ HARD COAT ☐

TINT : White ☐ SP2 ☐ PHOTO GREY ☐

BIFOCALS : KRYPTOK ☐ EXECUTIVE ☐

"D" ☐ PROGRESSIVE ☐

	R			L		
	SPH	CYL	AXIS	SPH	CYL	AXIS
DV	175	075	80	2.00	050	100
ADD						

INSTRUCTIONS _____

I.P.D. _____ D.V. _____

N.V. _____ CONSTANT USE _____

Guntur, Andhra Pradesh, India
3-1-219/2, Old Club Rd, Gunturi Vari Thota, Kothapeta,
Guntur, Andhra Pradesh 522001, India
Lat 16.29921°
Long 80.451623°
08/07/23 12:31 PM GMT +05:30

Google

Yoda Diagnostic Guntur

Exercise Trend
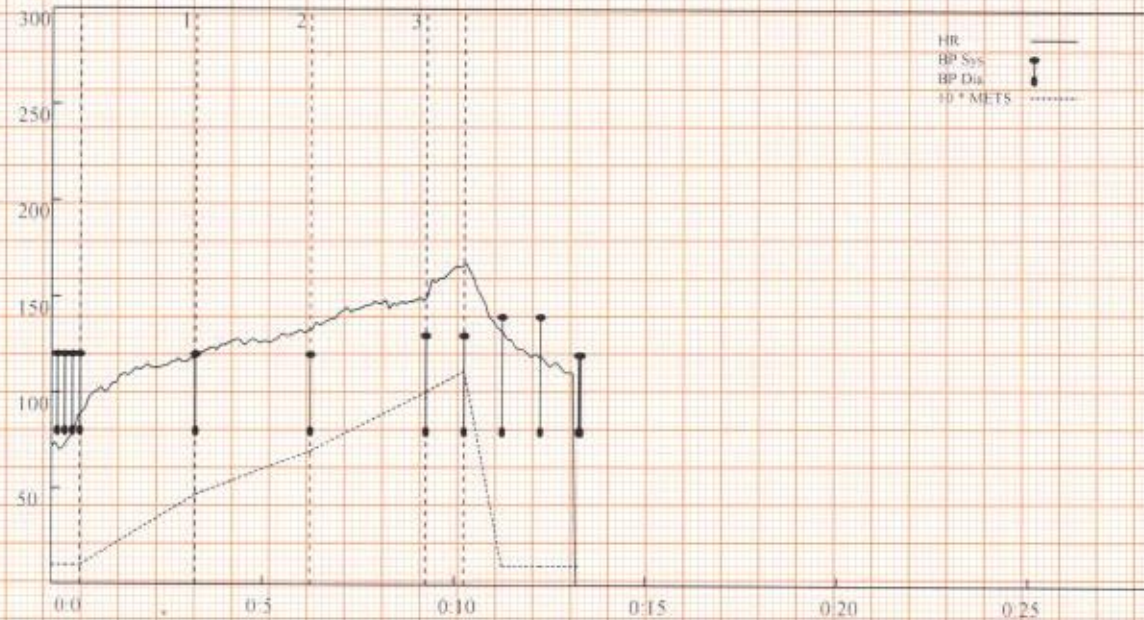
Interpretation

The Patient Exercised according to Bruce Protocol for 0:10:00 achieving a work level of 11.2 METS.

Resting Heart Rate, initially 72 bpm rose to a max. heart rate of 166bpm (88% of Predicted Maximum Heart Rate).

Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 140/80 mmHg

* NO SIGNIFICANT ST T CHANGES DURING EXERCISE & RECOVERY
* GOOD EFFORT TOLERANCE
* TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHEMIA

Dr. B. NAGARAJU
Regd.No: 70760   MBBS, M.D, DM
CONSULTANT CARDIOLOGIST
YODA DIAGNOSTICS

Ref. Doctor: **DR SELF**   Doctor: **DR NAGARAJU**

Yoda Diagnostic Guntur

Name: MR.VENKATA NARESH T　　　　　Date: 08-07-2023　　　Time: 09:41

Age: 32	Gender: M	Height: 174 cms	Weight: 78 Kg

ID: 10568647

Clinical History: NO

Medications: NO

Test Details:

Protocol: Bruce	Predicted Max HR: 188	Target HR: 159
Exercise Time: 0:10:00	Achieved Max HR: 166 (88% of Predicted MHR)	
Max BP: 140/80	Max BP x HR: 23240	Max Mets: 11.2

Test Termination Criteria:

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	ST Level mm	ST Slope mV/S
Supine	00:09	1	0	0	72	120/80	8640	2.3 V2	2 V2
Standing	00:11	1	0	0	70	120/80	8400	2.4 V2	1.9 V2
HyperVentilation	00:11	1	0	0	74	120/80	8880	2.3 V2	1.7 V2
PreTest	00:12	1	1.6	0	79	120/80	9480	2.5 V2	1.9 V2
Stage 1	03:00	4.7	2.7	10	118	120/80	14160	1.7 V2	1.9 V3
Stage 2	03:00	7	4	12	131	120/80	15720	1.2 V2	1.9 V4
Stage 3	03:00	10.1	5.5	14	150	130/80	19500	-0.9 V4	-2 aVR
Peak Exercise	01:00	11.2	6.8	16	166	130/80	21580	-3.4 V4	2.1 V3
Recovery1	01:00	1	0	0	135	140/80	18900	2 V2	3.2 V3
Recovery2	01:00	1	0	0	121	140/80	16940	1.5 V2	2 V3
Recovery3	01:00	1	0	0	111	120/80	13320	1 V2	1.7 V2

SCHILLER

Yoda Diagnostic Guntur

MR.VENKATA NARESH T

Bruce Protocol

HR: 72 bpm

ID: 10568647   Date: 08-07-2023   Exec Time : 0:00:00   Stage Time: 00:09

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)   Stage: Supine   Speed: 0 km/h   Slope: 0%   THR: 159 bpm   STLevel(mm) STSlope(mV/s)

Lead	STLevel(mm)	STSlope(mV/s)		Lead	STLevel(mm)	STSlope(mV/s)
I	0.5	0.2		V1	0.8	0.8
II	0.9	0.6		V2	2.3	2
III	0.7	0.4		V3	1.2	1.3
aVR	-1.1	-0.6		V4	0.8	1.1
aVL	-0.1	-0.1		V5	0.9	0.9
aVF	0.6	0.5		V6	0.8	0.6

II

Chart Speed: 25 mm/sec   Amplitude: 10mm/mV   Filter: 25 Hz Mains Filter: ON   ISO = R - 60 ms J = R + 60 ms Post J = J + 80 ms   Schiller Spandan CS-10 Version 2.14

MICRO MED CHARTS

MR.VENKATA NARESH T

Bruce Protocol

ID: 10568647   Date: 08-07-2023   Exec Time : 0:00:00   Stage Time: 00:11

Stage: Standing   Speed: 0   Slope: 0 %   THR: 159 bpm

HR: 70 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

Lead	STLevel(mm)	STSlope(mV/s)
I	0.6	0.2
II	1.1	0.7
III	0.6	0.5
aVR	-1	-0.6
aVL	0	-0.1
aVF	0.9	0.6

STLevel(mm) STSlope(mV/s)

Lead	STLevel(mm)	STSlope(mV/s)
V1	0.8	0.6
V2	2.4	1.9
V3	1.5	1.2
V4	1.2	1.1
V5	1	0.8
V6	0.9	0.6

II

MR.VENKATA NARESH T

Bruce Protocol

ID: 10568647   Date: 08-07-2023   Exec Time : 0:00:00   Stage Time: 00:11

Stage: HyperVentilation   Speed: 0   Slope: 0 %   THR: 159 bpm

HR: 74 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)

	STLevel(mm)	STSlope(mV/s)	Lead		STLevel(mm)	STSlope(mV/s)	Lead
	0.7	0.2	I		0.5	0.6	V1
	0.9	0.7	II		2.3	1.7	V2
	0.5	0.4	III		1.3	1.3	V3
	-0.9	-0.6	aVR		1	1.1	V4
	0.2	-0.1	aVL		0.9	0.9	V5
	0.8	0.6	aVF		0.8	0.5	V6

II

Chart Speed: 25 mm/sec   Amplitude: 10mm/mV   Filter: 25 Hz Mains Filter: ON   ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms   Schiller Spandan CS-10 Version 2.14

Yoda Diagnostic Guntur

MR.VENKATA NARESH T

Bruce Protocol

ID: 10568647	Date: 08-07-2023	Exec Time : 0:03:00	Stage Time: 03:00	
Stage: 1	Speed: 2.7 kmph	Slope: 10 %	THR: 159 bpm	

HR: 118 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)

STLevel(mm)	STSlope(mV/s)	Lead		Lead	STLevel(mm)	STSlope(mV/s)
0.2	0.4	I		V1	0.4	0.4
0.3	0.8	II		V2	1.7	1.8
0.2	0.5	III		V3	1.2	1.9
-0.3	-0.7	aVR		V4	0.4	1.4
0.1	0	aVL		V5	0.4	1.2
0.1	0.6	aVF		V6	0.5	0.8

II

Chart Speed: 25 mm/sec   Amplitude: 10mm/mV   Filter: 25 Hz   Mains Filter: ON   ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandan CS-10 Version 2.14

MICRO MED CHARTS

Yoda Diagnostic Guntur

MR.VENKATA NARESH T

Bruce Protocol

	ID: 10568647	Date: 08-07-2023	Exec Time : 0:06:00	Stage Time: 03:00
	Stage: 2	Speed: 4 kmph	Slope: 12 %	THR: 159 bpm

HR: 131 bpm

BP: 120/80 mmHg

STLevel(mm)	STSlope(mV/s)	Lead		STLevel(mm)	STSlope(mV/s)
-0.3	0.6	I	V1	0	0.2
-0.9	0.9	II	V2	1.2	1.8
-0.5	0.4	III	V3	0.2	1.6
0.8	-0.9	aVR	V4	-0.2	1.9
0.2	0	aVL	V5	0.9	1.4
-0.7	0.6	aVF	V6	-0.5	0.9
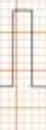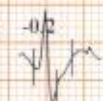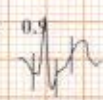
II
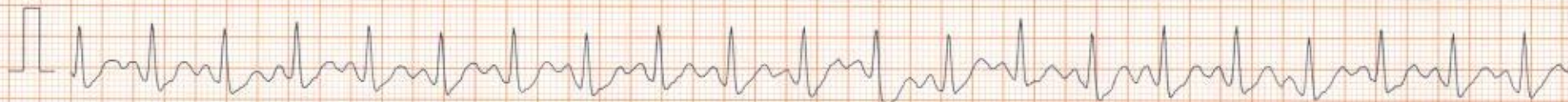
MICRO MED CHARTS

Yoda Diagnostic Guntur

MR.VENKATA NARESH T

Bruce Protocol

HR: 150 bpm

BP: 130/80 mmHg

ID: 10568647	Date: 08-07-2023	Exec Time : 0:09:00	Stage Time: 03:00			
Stage: 3	Speed: 5.5 kmph	Slope: 14 %	THR: 159 bpm			

STLevel(mm)   STSlope(mV/s)

STLevel(mm)   STSlope(mV/s)

STLevel	STSlope	Lead		Lead	STLevel	STSlope
0.3	1.1	I		V1	0.1	0.4
-0.7	1.8	II		V2	0	1.6
-0.8	0.6	III		V3	-0.5	1.9
0.2	-2	aVR		V4	-0.9	1.2
0.4	0.2	aVL		V5	-0.5	0.8
-0.6	1.2	aVF		V6	-0.9	1.8

II

Chart Speed: 25 mm/sec   Amplitude: 10mm/mV   Filter: 25 Hz   Mains Filter: ON   ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandan CS-10 Version 2.14

MICRO MED CHARTS

Yoda Diagnostic Guntur

MR.VENKATA NARESH T
Bruce Protocol

HR: 166 bpm

ID: 10568647	Date: 08-07-2023	Exec Time : 0:10:00	Stage Time: 01:00
Stage: 4 Peak Exercise	Speed: 6.8 kmph	Slope: 16 %	THR: 159 bpm

BP: 130/80 mmHg

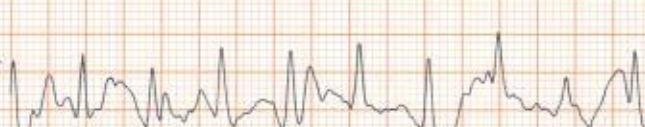| STLevel(mm)	STSlope(mV/s)	Lead		STLevel(mm)	STSlope(mV/s)
-0.7	0.5	I	V1	0.5	-0.1
-1.3	-0.2	II	V2	-0.2	1.3
-0.5	-0.6	III	V3	-0.2	2.1
1.4	-0.4	aVR	V4	-1.4	-1.5
-0.1	0.5	aVL	V5	-0.9	1.6
-0.9	-0.4	aVF	V6	-1.5	1.1
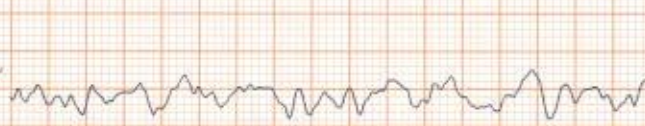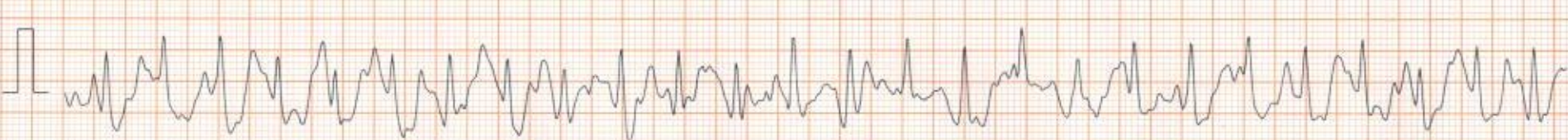
Chart Speed: 25 mm/sec   Amplitude: 10mm/mV   Filter: 25 Hz   Mains Filter: ON   ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms   Schiller Spandan CS-10 Version 2.14

MICRO MED CHARTS

Yoda Diagnostic Guntur

MR.VENKATA NARESH T

Bruce Protocol

STLevel(mm)   STSlope(mV/s)

	ID: 10568647	Date: 08-07-2023	Exec Time : 00:00	Stage Time: 01:00
	Stage: Recovery1	Speed: 0 kmph	Slope: 0 %	THR: 159 bpm

HR: 135 bpm

BP: 140/80 mmHg

STLevel(mm)   STSlope(mV/s)

| Lead	STLevel(mm)	STSlope(mV/s)		Lead	STLevel(mm)	STSlope(mV/s)
I	0.6	0.9		V1	0.9	0.6
II	0.3	1.9		V2	2	2.8
III	-0.1	1.2		V3	1.3	3.2
aVR	-0.6	-1.8		V4	0.9	2.1
aVL	0.3	-0.2		V5	0.6	2.2
aVF	0.1	1.6		V6	0.6	1.6

Chart Speed: 25 mm/sec   Amplitude: 10mm/mV   Filter: 25 Hz   Mains Filter: ON   ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms   Schiller Spandan CS+10 Version 2.14

MR.VENKATA NARESH T

Bruce Protocol

ID: 10568647	Date: 08-07-2023	Exec Time : 00:00
Stage: Recovery2	Speed: 0 kmph	Slope: 0 %

Stage Time: 01:00
THR: 159 bpm

HR: 121 bpm

BP: 140/80 mmHg

STLevel(mm)	STSlope(mV/s)				STLevel(mm)	STSlope(mV/s)
-0.1	0.6	I	V1		0.6	0.6
-0.2	1.2	II	V2		1.5	1.6
0.2	0.6	III	V3		0.4	2
0.4	-1.1	aVR	V4		0.2	1.4
-0.2	0	aVL	V5		0.1	1.3
0	0.8	aVF	V6		-0.2	0.9

II

Chart Speed: 25 mm/sec   Amplitude: 10mm/mV   Filter: 25 Hz   Mains Filter: ON   ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms   Schiller Spandan CS-10 Version:2.14

Yoda Diagnostic Guntur

MR.VENKATA NARESH T

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 10568647

Date: 08-07-2023

Stage: Recovery3

Speed: 0 kmph

Exec Time : 00:00

Slope: 0 %

Stage Time: 01:00

THR: 159 bpm

HR: 111 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

0	0.3	I		V1	0.8	0.6
-0.2	0.8	II		V2	1	1.7
-0.2	0.5	III		V3	0.4	1.6
0.2	-0.8	aVR		V4	-0.1	1.1
0.1	-0.1	aVL		V5	-0.2	0.6
0	0.6	aVF		V6	-0.1	0.6

II

Chart Speed: 25 mm/sec   Amplitude: 10mm/mV   Filter: 25 Hz Mains Filter: ON   ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandan CS-10 Version 2.14

MICRO MED CHARTS

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THADIVAKA.VENKATA NARESH 32Y/M 10568647 CHEST PA 08-Jul-23

YODA DIAGNOSTICS