





2023031118112113

2023-03-11 18:38:50

D. Name:  
Age:  
Gender:

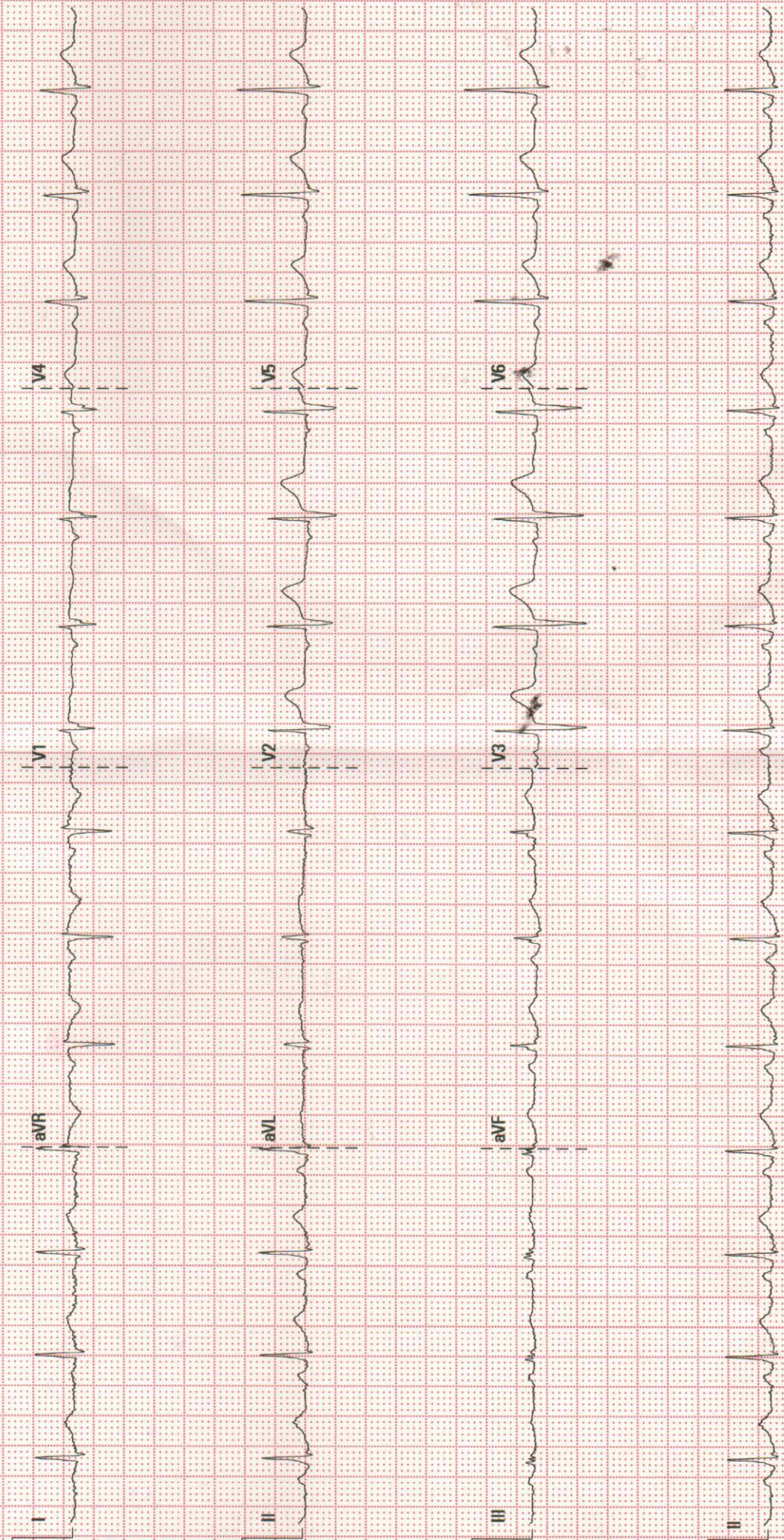
*Govind Prasad Subramani*  
*47y/M*  
*-am*

Vent. Rate 86 bpm  
PR Interval 152 ms  
QRS Duration 78 ms  
QT/QTc Interval 358/404 ms  
P/QRS/T Axes 65/46/44 deg  
QTc: Hodges

Sinus rhythm  
— Interpretation made without knowing patient's gender/age —

Normal ECG

Unconfirmed Diagnosis.



*D-11/3/23*

25 mm/s

10 mm/mV

50 Hz

BDR 35 Hz

NH HOSUR CLINIC

02.07.00/V28.4.1

SN FN-79009482



**COLOUR DOPPLER ECHOCARDIOGRAPHY REPORT**

**NAME : Mr. Guha Prasad Subramani**

**AGE /SEX: 47Y/Male**

**ID NO : 26655**

**DATE: 11/03/2023**

**REF. BY: Dr.EHC**

**MEASUREMENTS**

AO : 26 mm	LVID (d) : 45 mm	IVS (d) : 09 mm
LA : 34 mm	LVID (s) : 28 mm	PW (d) : 09 mm
EF : 60%	ESV : 28 ml	EDV : 92 ml

**VALVES**

MITRAL VALVE : Normal  
AORTIC VALVE : Normal  
TRICUSPID VALVE : Normal  
PULMONARY VALVE : Normal

**CHAMBERS**

LEFT ATRIUM : Normal Sized  
RIGHT ATRIUM : Normal Sized, 33 mm  
LEFT VENTRICLE : Normal Sized, Normal LV Systolic Function  
RIGHT VENTRICLE : Normal Sized, 29mm, TAPSE – 18 mm, Normal RV Function

**SEPTAE**

IVS : Intact  
IAS : Intact



**GREAT ARTERIES**

AORTA : Annulus-19mm, Ascending Aorta -27mm, Normal Sized,  
Normal Arch

PULMONARY : Normal

**DOPPLER DATA**

MITRAL VALVE : E/A-0.7/0.5m/s, MR-Trivial

AORTIC VALVE : Peak Gradient-4 mmHg, AR-Trivial

TRICUSPID VALVE : TR- Trivial, PASP-28mmHg

PULMONARY VALVE : Peak gradient -3mmHg

**WALL MOTION ABNORMALITIES: No R W M A**

PERICARDIUM : Nil

VEGETATION / THROMBUS : Nil

**OTHER FINDING:**

IVC-13mm, Normal Sized, Collapsing well, Normal RA Pressure

**FINALING DIAGNOSIS :**

- NORMAL CHAMBER DIMENSIONS
- NORMAL VALVES
- NORMAL PA PRESSURE
- NO R W M A
- NORMAL LV SYSTOLIC FUNCTION
- LVEF-60%

Done By: Ms.Gunavalli  
Cardiac Sonographer

  
Signature



<b>Patient name</b>	<b>Mr Guha Prasad Subramaniam</b>	<b>Patient ID</b>	<b>20020000026655</b>
<b>Age</b>	<b>47 years</b>	<b>Sex</b>	<b>Male</b>
<b>Referring doctor</b>	<b>EHP Medi-wheel</b>	<b>Date</b>	<b>10.03.2023</b>

**ULTRASOUND ABDOMEN AND PELVIS**

**Findings**

**Liver is mild enlarged in size (15.6cm) and shows mild diffuse increased echopattern.** 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-** visualized part of the pancreatic head and body appears normal in size, contour and echogenicity. Rest of the pancreas is obscured by bowel gas.

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

**Right Kidney** is normal in size (11.1 x 4.6cm), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Left Kidney** is normal in size (10.6 x 5.6cm), 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.

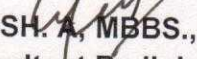
**Prostate** is normal in echopattern and size, measures ~ 15cc.

**Fluid** - There is no ascites or pleural effusion. No mass / collection in RIF /LIF.

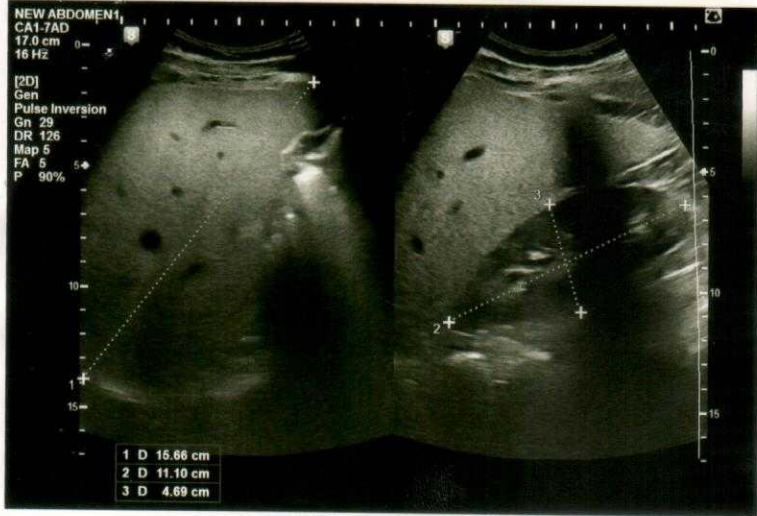
Visualized bowel loops appear normal in caliber and peristalsis. No abnormal dilatation / wall thickening noted.

**IMPRESSION:**

- **Mild hepatomegaly with grade I fatty changes.**

  
**DR. MOURISH. A, MBBS., MDRD.,**  
**Consultant Radiologist.**  
**Reg no:106564**





DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Collected On : 11/03/2023 11:32 AM Received On : 11/03/2023 12:44 PM Reported On : 11/03/2023 03:24 PM

Barcode : 012303111485 Specimen : Serum Consultant : Dr. Manjunath Babu R(CARDIOLOGY - ADULT)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7299816241

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>SERUM CREATININE</b>			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.97	mg/dL	0.66-1.25
eGFR (Calculated)	83.0	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)	14	mg/dL	9.0-20.0
<b>Serum Uric Acid</b> (Colorimetric - Uricase,Peroxidase)	4.0	mg/dL	3.5-8.5
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	<b>238 H</b>	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	140	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	46	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	<b>192.0 H</b>	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	154	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	28.0	mg/dL	0.0-40.0

Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

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

Bilirubin Total (Colorimetric -Diazo Method)	0.30	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)	0.2	mg/dL	0.0-1.1
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Total Protein (Colorimetric - Biuret Method)	7.90	gm/dL	6.3-8.2
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Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.40	gm/dL	3.5-5.0
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Serum Globulin (Calculated)	3.5	gm/dL	2.0-3.5
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Albumin To Globulin (A/G)Ratio (Calculated)	1.26	-	1.0-2.1
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SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	44	U/L	17.0-59.0
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SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	30	U/L	<50.0
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Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	83	U/L	38.0-126.0
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Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	41	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)	1.51	ng/mL	0.97-1.69
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Thyroxine (T4) (Enhanced Chemiluminescence)	8.32	µg/dl	5.53-11.0
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Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence) 2.197  $\mu$ IU/mL 0.4-4.049

--End of Report--



Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry



Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, 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 Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Collected On : 11/03/2023 11:32 AM Received On : 11/03/2023 12:44 PM Reported On : 11/03/2023 01:43 PM

Barcode : 022303110745 Specimen : Whole Blood Consultant : Dr. Manjunath Babu R(CARDIOLOGY - ADULT)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7299816241

## HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Photometric Measurement)	14.8	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	5.19	million/ $\mu$ l	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	44.6	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	86.0	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.5	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.2	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	14.0	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	319	$10^3/\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	6.2	$10^3/\mu$ L	4.0-10.0
<b>DIFFERENTIAL COUNT (DC)</b>			
Neutrophils (VCS Technology Plus Microscopy)	59.4	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	29.8	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	7.4	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	2.8	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.6	%	0.0-2.0



Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Absolute Neutrophil Count (Calculated)	3.69	x10 <sup>3</sup> cells/ $\mu$ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	1.85	x10 <sup>3</sup> cells/ $\mu$ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.46	x10 <sup>3</sup> cells/ $\mu$ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.18	x10 <sup>3</sup> cells/ $\mu$ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.04	-	-

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--

Hema S

Dr. Hema S  
MD, DNB, Pathology  
Associate Consultant



Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

**Note**

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Collected On : 11/03/2023 11:32 AM Received On : 11/03/2023 12:43 PM Reported On : 11/03/2023 02:31 PM

Barcode : 012303111484 Specimen : Whole Blood Consultant : Dr. Manjunath Babu R(CARDIOLOGY - ADULT)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7299816241

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>HBA1C</b>			
HbA1c (HPLC NGSP Certified)	<b>5.7 H</b>	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	116.89	-	-

**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

Note

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- Kindly correlate clinically.



MC-2688





## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Collected On : 11/03/2023 11:32 AM Received On : 11/03/2023 12:44 PM Reported On : 11/03/2023 02:23 PM

Barcode : 022303110746 Specimen : Whole Blood - ESR Consultant : Dr. Manjunath Babu R(CARDIOLOGY - ADULT)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7299816241

### HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Westergren Method)	6	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--

*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 Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Collected On : 11/03/2023 11:32 AM Received On : 11/03/2023 12:50 PM Reported On : 11/03/2023 02:24 PM

Barcode : 032303110275 Specimen : Urine Consultant : Dr. Manjunath Babu R(CARDIOLOGY - ADULT)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7299816241

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)	6.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.019	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	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)	Trace	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present

MICROSCOPIC EXAMINATION

Pus Cells	0.6	/hpf	0-5
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Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

RBC	1.6	/hpf	0-4
Epithelial Cells	0.4	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	9.1	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

--End of Report--



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

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- Kindly correlate clinically.



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Collected On : 11/03/2023 11:33 AM Received On : 11/03/2023 12:44 PM Reported On : 11/03/2023 02:45 PM

Barcode : 012303111489 Specimen : Plasma Consultant : Dr. Manjunath Babu R(CARDIOLOGY - ADULT)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7299816241

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Post Prandial Blood Sugar (PPBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	109	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

--End of Report--

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

Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

Note

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  - Results relate to the sample only.
  - Kindly correlate clinically.
- (Post Prandial Blood Sugar (PPBS) -> Auto Authorized)





## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Collected On : 11/03/2023 11:32 AM Received On : 11/03/2023 12:44 PM Reported On : 11/03/2023 02:45 PM

Barcode : 012303111483 Specimen : Plasma Consultant : Dr. Manjunath Babu R(CARDIOLOGY - ADULT)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7299816241

### BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	<b>108 H</b>	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

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

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



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

Collected On : 11/03/2023 11:32 AM Received On : 11/03/2023 12:51 PM Reported On : 11/03/2023 01:50 PM

Barcode : 032303110276 Specimen : Stool Consultant : Dr. Manjunath Babu R(CARDIOLOGY - ADULT)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7299816241

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Colour	Brownish	-	-
Consistency	Semi Solid	-	-
Mucus	Absent	-	-

CHEMICAL EXAMINATION

Stool For Occult Blood (Standard Guaiac Method)	Negative	-	-
Reaction	Alkaline	-	-

MICROSCOPE EXAMINATION

Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Pus Cells	3-4	/hpf	0-5

--End of Report--

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

Patient Name : Mr Guha Prasad Subramaniam MRN : 20020000026655 Gender/Age : MALE , 47y (03/10/1975)

**Note**

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