

Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 10:47AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 04:09PM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	14.9	g/dL	13-17	Spectrophotometer
PCV	45.00	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.35	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	84	fL	83-101	Calculated
MCH	27.8	pg	27-32	Calculated
MCHC	33.1	g/dL	31.5-34.5	Calculated
R.D.W	14.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,570	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	56.9	%	40-80	Electrical Impedence
LYMPHOCYTES	26.6	%	20-40	Electrical Impedence
EOSINOPHILS	6.8	%	1-6	Electrical Impedence
MONOCYTES	8.7	%	2-10	Electrical Impedence
BASOPHILS	1	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4307.33	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	2013.62	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	514.76	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	658.59	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	75.7	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	256000	cells/cu.mm	150000-410000	Electrical impedence
----------------	--------	-------------	---------------	----------------------

ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	14	mm at the end of 1 hour	0-15	Modified Westergren
--------------------------------------	----	-------------------------	------	---------------------

PERIPHERAL SMEAR

RBCs: are normocytic normochromic

WBCs: are normal in total number with mild increase in eosinophils.

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD EOSINOPHILIA.

Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 10:47AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 04:09PM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method



SIN No:BED230171128

Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 10:47AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 03:15PM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA

BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination





Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 11:09AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 12:56PM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

GLUCOSE, FASTING , SODIUM FLUORIDE PLASMA	111	mg/dL	70-100	HEXOKINASE
--	------------	-------	--------	------------

Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	175	mg/dL	70-140	HEXOKINASE
---	------------	-------	--------	------------

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach

Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 11:09AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 12:56PM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	6.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	140	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 10:38AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 11:59AM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	178	mg/dL	<200	CHO-POD
TRIGLYCERIDES	99	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	40	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	138	mg/dL	<130	Calculated
LDL CHOLESTEROL	118	mg/dL	<100	Calculated
VLDL CHOLESTEROL	19.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.45		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 10:38AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 11:59AM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.86	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.16	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.70	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	32	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	66.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.11	g/dL	6.6-8.3	Biuret
ALBUMIN	4.50	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.61	g/dL	2.0-3.5	Calculated
A/G RATIO	1.72		0.9-2.0	Calculated



Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 10:38AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 11:59AM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.91	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	20.90	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.18	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.70	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.32	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	135	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.3	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	102	mmol/L	101–109	ISE (Indirect)



Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 10:38AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 11:59AM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	27.00	U/L	<55	IFCC



Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 10:39AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 11:34AM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.13	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	12.10	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	3.190	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0



Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 11:13AM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 11:45AM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	POSITIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	2-3	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 12:10PM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 06:30PM
UHID/MR No : CINR.0000066966	Reported : 22/Jul/2023 06:47PM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL) , URINE	POSITIVE (++++)		NEGATIVE	Dipstick



Patient Name : Mr.REVURI SURESH	Collected : 22/Jul/2023 09:16AM
Age/Gender : 32 Y 7 M 12 D/M	Received : 22/Jul/2023 11:13AM
UHID/MR No : CINR.000066966	Reported : 22/Jul/2023 11:30AM
Visit ID : CINROPV199933	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 104523	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324


Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING) , URINE	NEGATIVE		NEGATIVE	Dipstick

***** End Of Report *****

Result/s to Follow:
PERIPHERAL SMEAR



Dr. Prasanna
M.B.B.S, M.D
Consultant Pathologist



Dr.Nisha
M.B.B.S,MD(Pathology)
Consultant Pathologist



Dr.Anita Shobha Flynn
M.B.B.S MD(Pathology)
Consultant Pathologist



DR.SHIVARAJA SHETTY
M.B.B.S, M.D(Biochemistry)
CONSULTANT BIOCHEMIST



Dr.Anita Shobha Flynn
M.B.B.S,MD(Pathology)
Consultant Pathologist



Name : Mr. Revuri Suresh

Age: 32 Y

Sex: M

UHID: CINR.0000066966



OP Number: CINROPV199933

Bill No : CINR-OCR-87024

Date : 22.07.2023 08:51

Address : bangalore
Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN
INDIA OP AGREEMENT

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE(FASTING)	
2	GAMMA GLUTAMYL TRANSFERASE (GGT)	
3	HbA1c, GLYCATED HEMOGLOBIN	
4	2 D ECHO	
5	LIVER FUNCTION TEST (LFT)	
6	X-RAY CHEST PA	
7	GLUCOSE, FASTING	
8	HEMOGRAM + PERIPHERAL SMEAR	
9	ENT CONSULTATION - 2	
10	FITNESS BY GENERAL PHYSICIAN	
11	DIET CONSULTATION	
12	COMPLETE URINE EXAMINATION	
13	URINE GLUCOSE(POST PRANDIAL)	
14	PERIPHERAL SMEAR	
15	ECG - 2	
16	BLOOD GROUP ABO AND RH FACTOR	
17	LIPID PROFILE	
18	BODY MASS INDEX (BMI) - 6	
19	OPHTHAL BY GENERAL PHYSICIAN - 5	
20	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
21	ULTRASOUND - WHOLE ABDOMEN - 9	
22	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
23	DENTAL CONSULTATION - 1	
24	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) - 11.30 pm	

And's only: Nona

Date : 22-07-2023
MR NO : CINR.0000066966

Department : GENERAL
Doctor :

Name : Mr. Revuri Suresh

Registration No :

Age/ Gender : 32 Y / Male

Qualification :

Consultation Timing: 08:51

Height : 171 cm	Weight : 79.6 kg	BMI : 27.2 kg/m ²	Waist Circum :
Temp : 98°F	Pulse : 110 / min	Resp :	B.P : 140 / 84 mmHg

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

OPHTHAL PRESCRIPTION

PATIENT NAME: Mr. Revuri Suresh .

DATE: 22/7/23

UHID NO: 66966

AGE: 32y

OPTOMETRIST NAME: Mr Gowtham M H

GENDER: M

This is to certify that I have examined

years and findings of his/her eye examination are as follows,

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance	+1.00	-1.25	180	6/6	+1.25	-1.25	180	6/6(P)
Add	—	—	16	—	—	—	16	—

PD - RE: _____ LE: _____

Colour Vision: Normal

Remarks:

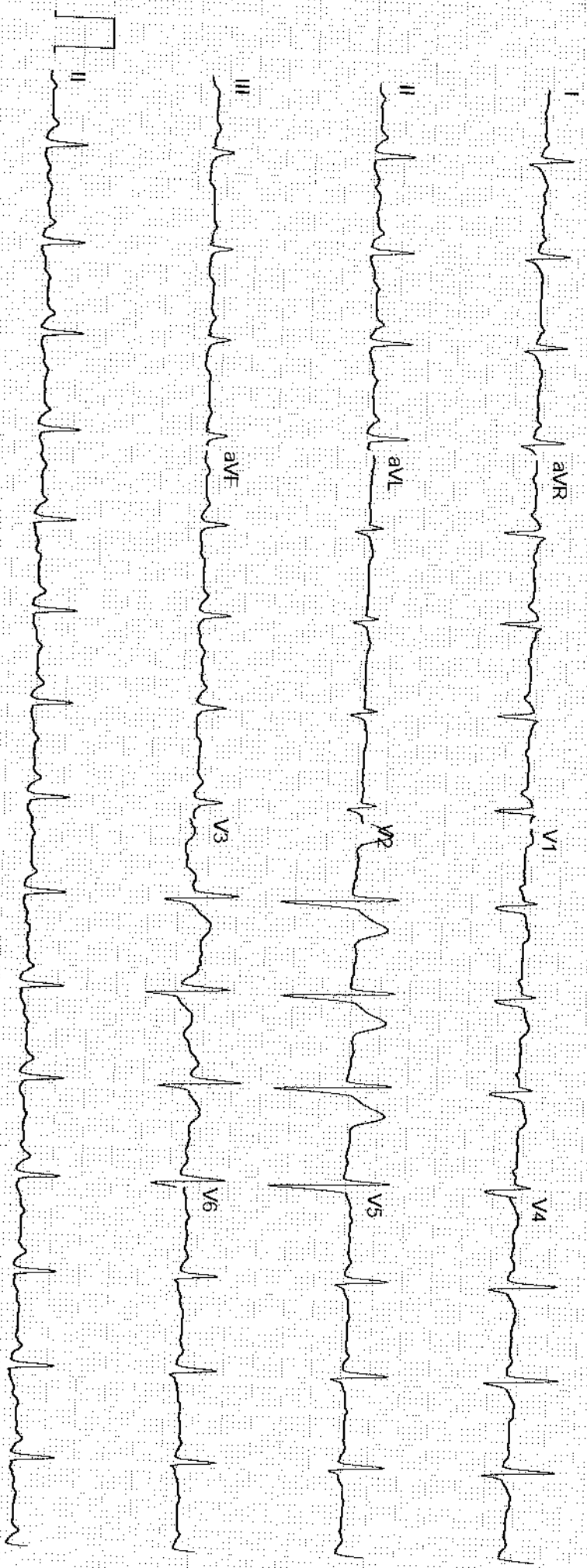

Apollo clinic Indiranagar

Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

QRS 88 ms
QT/QTcBaz 342/427 ms
PR 146 ms
P 110 ms
RR/PP 634/638 ms
P/QRS/T 58/58/33 degrees

R. Sridhar

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:



NAME: MR REVURI SURESH	AGE/SEX: 32Y/M	OP NUMBER: 154 66966
Ref By : SELF	DATE: 22-07-2023	

M mode and doppler measurements:

CM	CM	M/sec	
AO: 2.0	IVS(D): 1.0	MV: E Vel: 0.7	A Vel : 0.7
LA: 2.8	LVIDD(D): 4.4	AV Peak: 0.8	
	LVPW(D): 1.1	PV Peak: 0.9	
	IVS(S): 1.4		
	LVID(S):2.7		
	LVPW(S):1.6		
	LVEF: 65%		
	TAPSE: 1.9		

Descriptive findings:

Left Ventricle	Normal
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Normal
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal
Pericardium:	Normal

IVC:	Normal
Others	---

IMPRESSION :

Normal cardiac chambers

No Regional wall motion abnormality

No MR/AR/TR

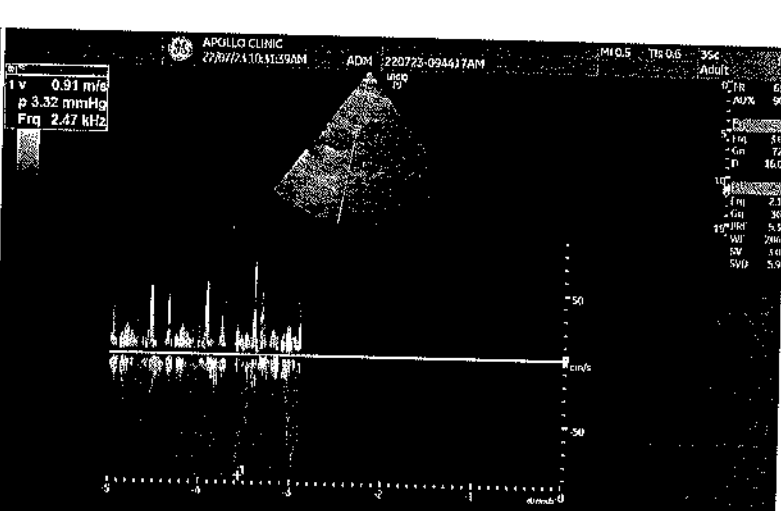
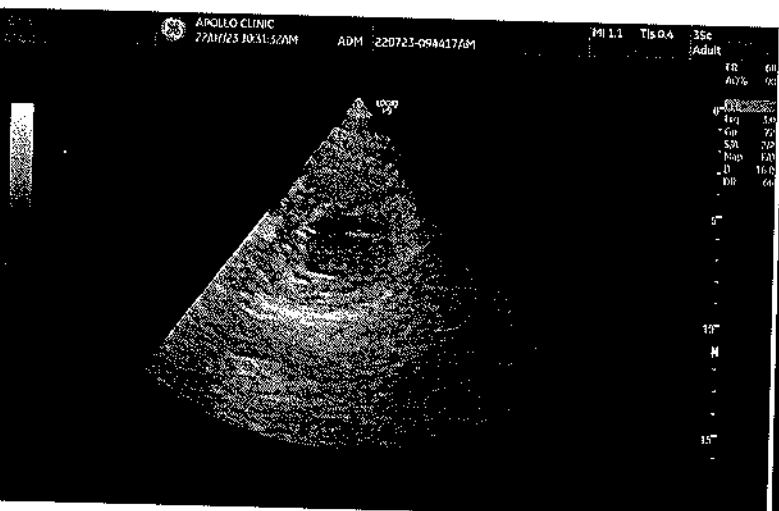
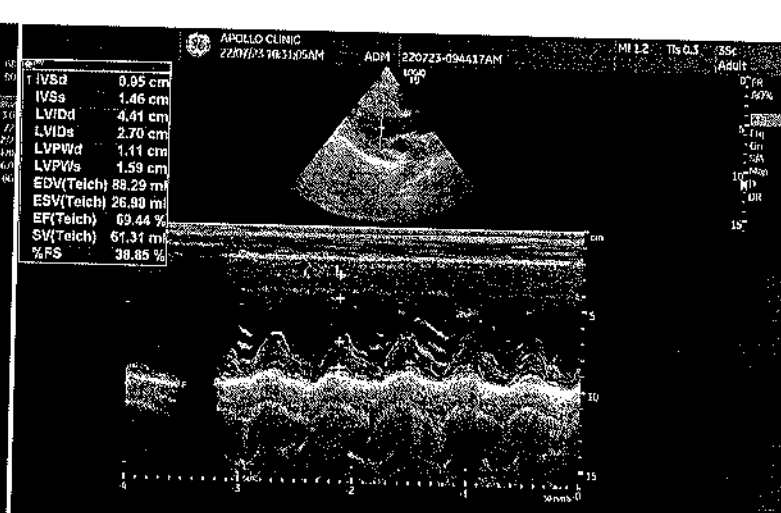
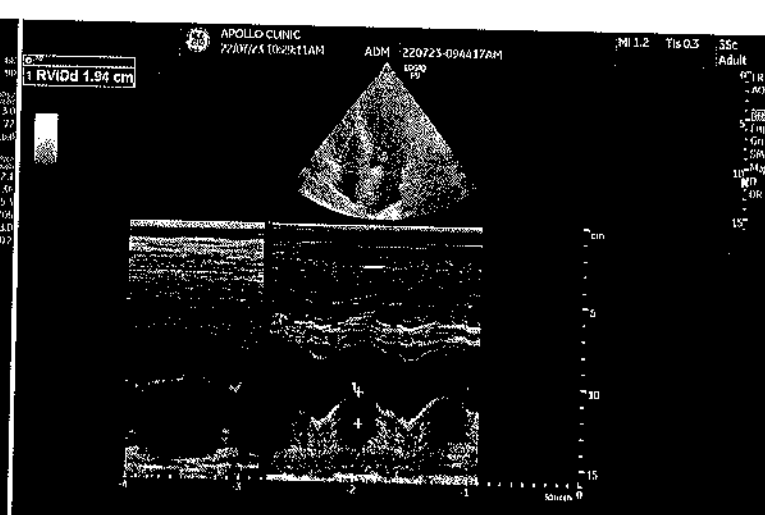
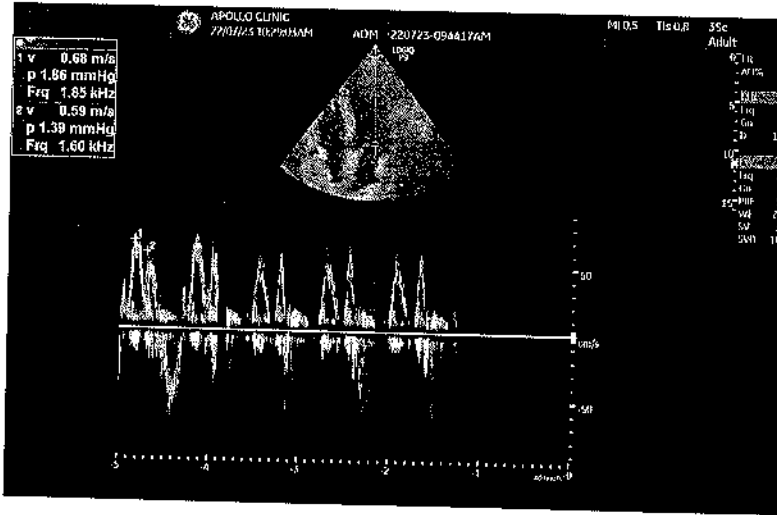
No clot/vegetation/pericardial effusion

Normal LV systolic function - LVEF= 65%

DR JAGADEESH H V MD,DM

CONSULTANT CARDIOLOGIST





Dear **MR. REVURI SURESH**,

Please find the confirmation for following request.

Booking Date : 17-07-2023

Package Name : Arcofemi MediWheel Full Body Annual Plus Male 2D ECHO (Metro)

Name of

Diagnostic/Hospit : Apollo Clinic - Indiranagar
al

Address of Plot 2012,1st floor, Above vision express, Next to Starbucks, 100 feet road,
Diagnostic/Hospit : HAL 2nd stage, Indiranagar - 560038
al

Contact Details : (080) 2521 4614 - 15

City : Bangalore

State : Karnataka

Pincode : 560038

Appointment Date: 22-07-2023

Confirmation : Confirmed

Status

Preferred Time : 8:00am-10:00am

Comment : APPOINTMENT TIME 8:30AM

Patient Name : Mr. Revuri Suresh

Age/Gender : 32 Y/M

UHID/MR No. : CINR.0000066966

OP Visit No : CINROPV199933

Sample Collected on :

Reported on : 22-07-2023 17:59

LRN# : RAD2054221

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 104523

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .


Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen



Dr. DHANALAKSHMI B
MBBS, DMRD
Radiology

Patient Name	: Mr. Revuri Suresh	Age/Gender	: 32 Y/M
UHID/MR No.	: CINR.0000066966	OP Visit No	: CINROPV199933
Sample Collected on	:	Reported on	: 22-07-2023 16:26
LRN#	: RAD2054221	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 104523		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, shape and echopattern **minimally increased**. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Moderately distended. No definite calculi identified. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified.

PANCREAS: Obscured by bowel gas. However, the visualized portion appear normal.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measures 10.1X5.0 cm.

Left kidney measures 10.4X6.2 cm.


URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

PROSTATE: Prostate is normal in size and echo-pattern.

No free fluid is seen.

IMPRESSION:

MINIMAL FATTY LIVER.



Dr. DHANALAKSHMI B
MBBS, DMRD
Radiology