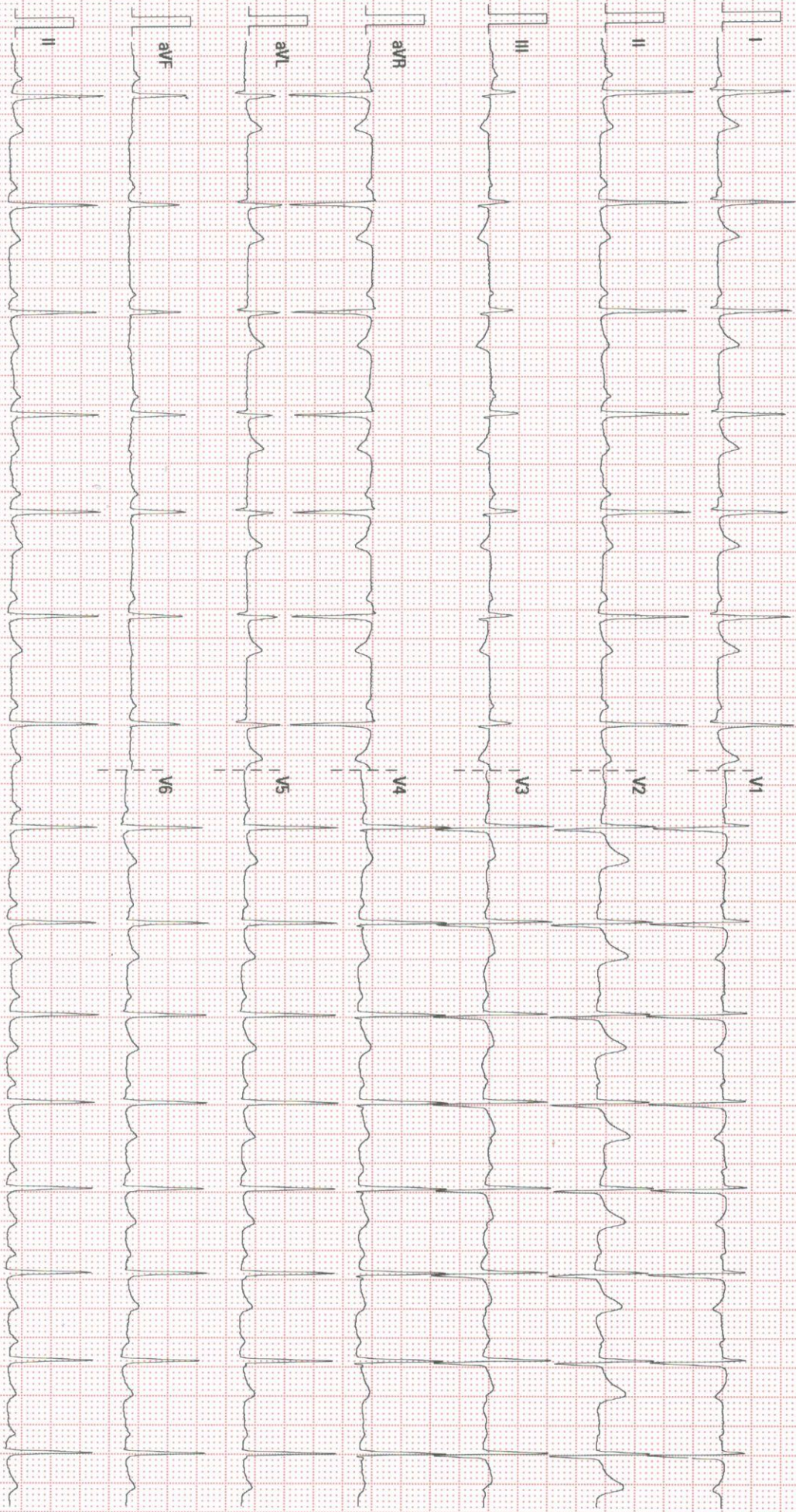


Name: MRS ARPITHA
Age: 29 Years
Gender: Female

91 bpm
146 ms
76 ms
336/390 ms
60/41/-1 deg
Dir: Hodges



25 mm/s

10 mm/mV

50 Hz

BDR 35 Hz

NARAYANA HEALTH, JAYANAGAR

02.06.00/V28.4.1

SN:FM-73007176

Patient Name : Mrs.Arptha B

Patient ID : 20110000014314

Age : 29Years

Sex : Female

Referring Doctor : EHP

Date : 14.01.2023

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and shows normal echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesions.

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

Gallbladder 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, shape, contour and echopattern. No evidence of mass or focal lesions.

Right Kidney is normal in size (measures 9.5cm in length & 1.3cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size (measures 9.0cm in length & 1.3cm 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.

Uterus is anteverted and normal in size, measures 6.3x2.7x3.7cm. Myometrial and endometrial echoes are normal. **Endometrium** measures 8mm. Endometrial cavity is empty.

Both ovaries are normal in size and echopattern.

Right ovary: measures 3.0x1.9cm. **Left ovary:** measures 2.8x1.9cm.

Both adnexa: No mass is seen.

There is no ascites or pleural effusion.

IMPRESSION:

- No significant abnormality detected.



Dr B S Ramkumar 35772
Consultant Radiologist

Disclaimer:

Note: Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. This Report is not for Medico - Legal Purposes.



Narayana Multispeciality Clinic

17/1, 30th Cross, 8th 'B' Main Road, 4th Block, Jayanagar, Bangalore - 560 011


Clinic No. : 8884000991, 9513919615, Pharmacy No. : 9513919615

Patient Name	MRS.ARPITHA B	Requested By	EHP
MRN	20110000014314	Procedure DateTime	14-01-2023 11:23
Age/Sex	29Y 6M/Female	Hospital	NH-JAYANAGAR

CHEST RADIOGRAPH

Findings:

Heart and mediastinal contours are within normal limits.
Lungs and pleural spaces are clear.
There is no pneumothorax.
Bony cage is within normal limits.
Prominent C7 transverse processes.
No free air under the diaphragm.


Dr Suraj Gowda MD, DNB
Junior Consultant Radiologist

* This is a digitally signed valid document. Reported Date/Time: 14-01-2023 14:17

ADULT TRANS-THORACIC ECHO REPORT

Unit of Narayana Health

PATIENT NAME : Ms Arpitha B
GENDER/AGE : Female, 29 Years
LOCATION : JAYANAGAR

PATIENT MRN : 20110000014314
PROCEDURE DATE : 14/01/2023 12:55 PM
REQUESTED BY : EXTERNAL



NORMAL LV
NORMAL SIZE

INDICATIONS : ASYMPTOMATIC
CLINICAL DIAGNOSIS : EHP
PREVIOUS ECHO REPORT : NO PREVIOUS REPORT
VITAL PARAMETERS : HR (BPM) :78, SINUS RHYTHM, BP (MMHG) : -
WINDOW : OPTIMAL

IMPRESSION

- NORMAL CHAMBER DIMENSION
- NO RWMA
- NORMAL VALVES
- NORMAL PA PRESSURE
- NORMAL RV/LV FUNCTION
- LVEF- 60 %

FINDINGS

CHAMBERS

LEFT ATRIUM : NORMAL SIZED
AP DIAMETER(MM): 32

RIGHT ATRIUM : NORMAL SIZED
MINOR AXIS A4CV(MM) : 30, RAP(MMHG): 3

LEFT VENTRICLE : NORMAL SIZED
LV SYSTOLIC FUNCTION : NORMAL,
LVIDD(MM) : 44 IVSD(MM) : 10 EDV(ML) :
LVIDS(MM) : 28 LVPWD(MM) : 10 ESV(ML) :
E/A RATIO : 0.7 E/E'(AVERAGE) : LVEF(%) : 60
/0.6

RIGHT VENTRICLE : NORMAL SIZED, NORMAL RV FUNCTION
MINOR AXIS A4CV(MM): 27, TAPSE(MM): 19

LVOT/RVOT : NORMAL

RWMA : NO REGIONAL WALL MOTION ABNORMALITIES

VALVES

MITRAL : TRIVIAL-MR

AORTIC : PG-5MMHG, TRIVIAL-AR

TRICUSPID : TRIVIAL-TR

PULMONARY : PG-2MMHG

SEPTAE

IAS : INTACT

IVS : INTACT



MS ARPITHA B (20110000014314)

ARTERIES AND VEINS

AORTA : NORMAL, LEFT AORTIC ARCH
PA : NORMAL SIZE
PA PRESSURE: NORMAL, PASP(MMHG): 25
IVC : NORMAL SIZE & COLLAPSIBILITY, >50%
IVC SIZE(MM): 14

PERICARDIUM : NORMAL PERICARDIAL THICKNESS. NO EFFUSION

INTRACARDIAC MASS : NO TUMOUR, THROMBUS OR VEGETATION SEEN



DR. SURESH P V
SENIOR CONSULTANT

14/01/2023 12:55 PM



PREPARED BY : GULSUM JAMEEL FATHIMA .M
(364456)

PREPARED ON : 14/01/2023 01:03 PM

GENERATED BY : GULSUM JAMEEL FATHIMA .M
(364456)

GENERATED ON : 14/01/2023 01:03 PM



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Collected On : 14/01/2023 09:39 AM Received On : 14/01/2023 01:28 PM Reported On : 14/01/2023 02:26 PM

Barcode : 012301140866 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9886520092

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
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SERUM CREATININE

Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.71	mg/dL	0.6-1.0
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eGFR (Calculated)	97.4	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.
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Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	13	mg/dL	7.0-17.0
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Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	4.45	mg/dL	2.5-6.2
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Test	Result	Unit	Biological Reference Interval
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LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)

Cholesterol Total (Colorimetric - Cholesterol Oxidase)	184	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
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Triglycerides (Colorimetric - Lip/Glycerol Kinase)	70	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
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HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	56	mg/dL	40.0-60.0
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Non-HDL Cholesterol (Calculated)	128.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
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LDL Cholesterol (Colorimetric)	111 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
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Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Test	Result	Unit	Biological Reference Interval
VLDL Cholesterol (Calculated)	14.0	mg/dL	0.0-40.0

Cholesterol /HDL Ratio (Calculated)	3.3	-	0.0-5.0
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Test	Result	Unit	Biological Reference Interval
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THYROID PROFILE (T3, T4, TSH)

Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)	1.42	ng/mL	0.97-1.69
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Thyroxine (T4) (Enhanced Chemiluminescence)	10.5	µg/dl	5.53-11.0
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TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence)	2.572	µIU/mL	> 18 Year(s) : 0.4 -4.5 Pregnancy: 1st Trimester: 0.129-3.120 2nd Trimester: 0.274-2.652 3rd Trimester: 0.312-2.947
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Test	Result	Unit	Biological Reference Interval
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LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.50	mg/dL	0.2-1.3
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Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.10	mg/dL	0.0-0.4
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Unconjugated Bilirubin (Indirect) (Calculated)	0.4	mg/dL	0.0-1.1
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Total Protein (Colorimetric - Biuret Method)	7.50	gm/dL	6.3-8.2
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Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.50	gm/dL	3.5-5.0
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Serum Globulin (Calculated)	3.0	gm/dL	2.0-3.5
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Albumin To Globulin (A/G)Ratio (Calculated)	1.5	-	1.0-2.1
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SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	28	U/L	14.0-36.0
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SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	23	U/L	<35.0
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Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	65	U/L	38.0-126.0
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Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Test	Result	Unit	Biological Reference Interval
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	21	U/L	12.0-43.0

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.

--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, -> autoAuthorised)
(, -> autoAuthorised)
(CR, -> autoAuthorised)
(LFT, -> autoAuthorised)
(Uric Acid, -> autoAuthorised)
(Blood Urea Nitrogen (Bun) -> autoAuthorised)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Collected On : 14/01/2023 09:39 AM Received On : 14/01/2023 01:27 PM Reported On : 14/01/2023 02:56 PM

Barcode : 012301140865 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9886520092

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

HbA1c (HPLC NGSP Certified)	5.4	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
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Estimated Average Glucose (Calculated)	108.29	-	-
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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

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



MC-2688



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Collected On : 14/01/2023 09:39 AM Received On : 14/01/2023 01:38 PM Reported On : 14/01/2023 02:38 PM

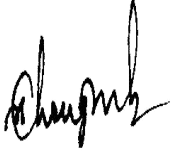
Barcode : 032301140128 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9886520092

CLINICAL PATHOLOGY

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

--End of Report--



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

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Collected On : 14/01/2023 09:39 AM Received On : 14/01/2023 01:38 PM Reported On : 14/01/2023 02:38 PM

Barcode : 032301140128 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9886520092

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)	1.022	-	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	0.7	/hpf	0-5
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Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Test	Result	Unit	Biological Reference Interval
RBC	1.4	/hpf	0-4
Epithelial Cells	7.0	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.07	/hpf	0-1
Bacteria	315.1	/hpf	0-200
Yeast Cells	0.3	/hpf	0-1
Mucus	0.07	-	-

--End of Report--

Hema S

Dr. Hema S
MD, DNB, Pathology
Associate Consultant

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Collected On : 14/01/2023 10:01 AM Received On : 14/01/2023 01:28 PM Reported On : 14/01/2023 02:10 PM

Barcode : 012301140956 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9886520092

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Colorimetric - Glucose Oxidase Peroxidase)	72	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

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
(Post Prandial Blood Sugar (PPBS) -> autoAuthorised)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Collected On : 14/01/2023 09:39 AM Received On : 14/01/2023 01:28 PM Reported On : 14/01/2023 01:52 PM

Barcode : 022301140494 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9886520092

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	13.4	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.56	million/ μ l	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	40.3	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	88.5	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	29.4	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.2	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	12.7	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	270	$10^3/\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	5.1	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	56.1	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	32.1	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	8.0	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	3.3	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.5	%	0.0-2.0

Patient Name : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Test	Result	Unit	Biological Reference Interval
Absolute Neutrophil Count (Calculated)	2.87	$\times 10^3$ cells/ μ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	1.64	$\times 10^3$ cells/ μ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.41	$\times 10^3$ cells/ μ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.17	$\times 10^3$ cells/ μ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.03	-	-

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 : Ms Arpitha B MRN : 20110000014314 Gender/Age : FEMALE , 29y (20/06/1993)

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.

