

MYSORE-BALLAL CIRCLE



--- A MEDALL COMPANY ---

Date 10-Sep-2022 9:55 AM

Customer Name : MR.BHARGAV SAI JONNLGADDA

DOB : 02 Apr 1995

Ref Dr Name : MediWheel

Age : 27Y/MALE

Customer Id : MYS297521

Visit ID : 712227727

Email Id :

Phone No : 9948371321

Corp Name : MediWheel

Address : RAMAIAH M P 51 KRSHNADHAMA NAGAR SRIRAMPURA MYSORE

Package Name : Mediwheel Full Body Health Checkup Male Below 40

S.No	Modality	Study	Accession No	Time	Seq	Signature
1	LAB	BLOOD UREA NITROGEN (BUN)				
2	LAB	GLUCOSE - FASTING				
3	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)	✓			
4	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c)	10 ⁵ 28			PJ
5	LAB	LIPID PROFILE				
6	LAB	LIVER FUNCTION TEST (LFT)				
7	LAB	URIC ACID				
8	LAB	URINE GLUCOSE - FASTING				
9	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)	✓			
10	LAB	COMPLETE BLOOD COUNT WITH ESR				
11	LAB	THYROID PROFILE/ TFT(T3, T4, TSH)				
12	LAB	STOOL ANALYSIS - ROUTINE - P				
13	LAB	URINE ROUTINE				
14	LAB	CREATININE				
15	LAB	BLOOD GROUP & RH TYPE (Forward Reverse)				

		BUN/CREATININE RATIO			
	OTHERS	physical examination	MYS2722106102651		
18	US	ULTRASOUND ABDOMEN	MYS2722106103462		
19	OTHERS	Treadmill / 2D Echo ✓	MYS2722106127528		
20	OTHERS	EYE CHECKUP	MYS2722106135592		
21	X-RAY	X RAY CHEST ✓	MYS2722106145199		
22	OTHERS	Consultation Physician	MYS2722106148004		
23	ECHO	ELECTROCARDIOGRAM ECG ✓	MYS2722106149333		

Registered By

(SOWMYA.RAJU)

H - 171 CM

W - 62KG

Bp - 120/80 mmHg

Puls - 83 bpm

Hip - 34

Waist - 30

FITNESS CERTIFICATE

NAME: <i>Sharwan Sai Tomlapalle</i>		AGE: <i>27</i>	
Ht: <i>171</i> CMS		Wt: <i>62</i> KGS	SEX: <i>M</i>

PARAMETERS	MEASUREMENTS
PULSE / BP (supine)	<i>68</i> / <i>mt</i> / <i>mmHg</i> <i>120/80</i>
INSPIRATION	<i>32</i>
EXPIRATION	<i>33</i>
CHEST CIRCUMFERENCE	
PREVIOUS ILLNESS	
VISION	
FAMILY HISTORY	FATHER: <i>Sunil</i> MOTHER: <i>Sunil</i>

REPORTS:

within normal limits

DATE:

10/09/22

PLACE:

Mysuru



CONSULTANT PHYSICIAN

Dr. NIKHIL. B.

M.D., D.M.(Cardiologist)

Interventional Cardiologist

KMC Reg. No.: 90111



Customer Name	MR.BHARGAV SAI JONNLAGADDA	Customer ID	MYS297521
Age & Gender	27Y/MALE	Visit Date	10/09/2022
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2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

AORTA	:	2.8cms
LEFT ATRIUM	:	3.0cms
LEFT VENTRICLE (DIASTOLE)	:	4.5cms
(SYSTOLE)	:	2.9cms
VENTRICULAR SEPTUM (DIASTOLE)	:	1.0cms
(SYSTOLE)	:	1.3cms
POSTERIOR WALL (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.3cms
EDV	:	75ml
ESV	:	30ml
FRACTIONAL SHORTENING	:	37%
EJECTION FRACTION	:	60%
RVID	:	1.6cms

DOPPLER MEASUREMENTS:

MITRAL VALVE	:	'E' - 0.85m/s	'A' - 0.38m/s	NO MR
AORTIC VALVE	:	1.01m/s		NO AR
TRICUSPID VALVE	:	'E' - 0.77m/s	'A' - 0.45m/s	NO TR
PULMONARY VALVE	:	0.79m/s		NO PR



conditions indicated
 conclusive and should be
 condition at the time of sampl
 representative and shall not be

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2D ECHOCARDIOGRAPHY FINDINGS:

Left ventricle : Normal size, Normal systolic function.
 No regional wall motion abnormalities.

 Left Atrium : Normal.

 Right Ventricle : Normal.

 Right Atrium : Normal.

 Mitral valve : Normal, No mitral valve prolapsed.

 Aortic valve : Normal, Trileaflet.

 Tricuspid valve : Normal.

 Pulmonary valve : Normal.

 IAS : Intact.

 IVS : Intact.

 Pericardium : No pericardial effusion.

IMPRESSION:

- NORMAL SIZED CARDIAC CHAMBERS.
- NORMAL LV SYSTOLIC FUNCTION. EF: 60%.
- NO REGIONAL WALL MOTION ABNORMALITIES.
- NORMAL VALVES.
- NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.



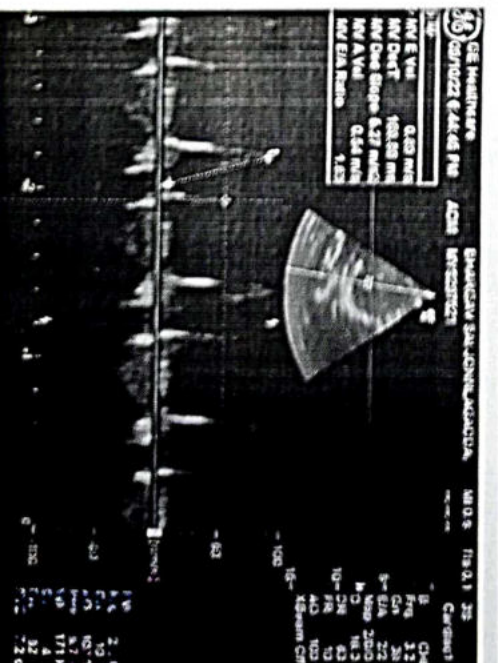
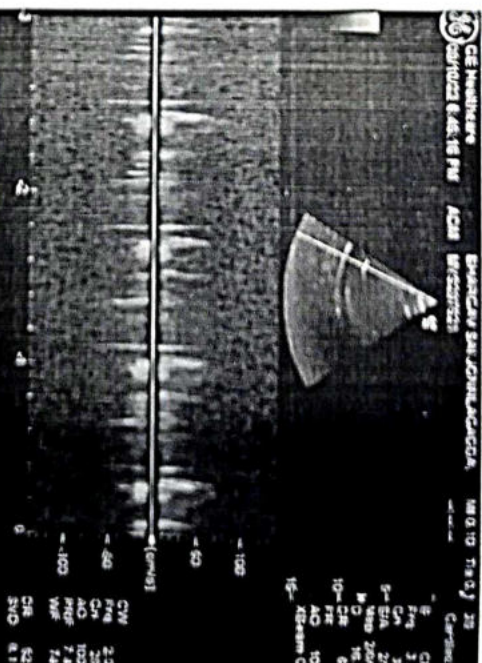
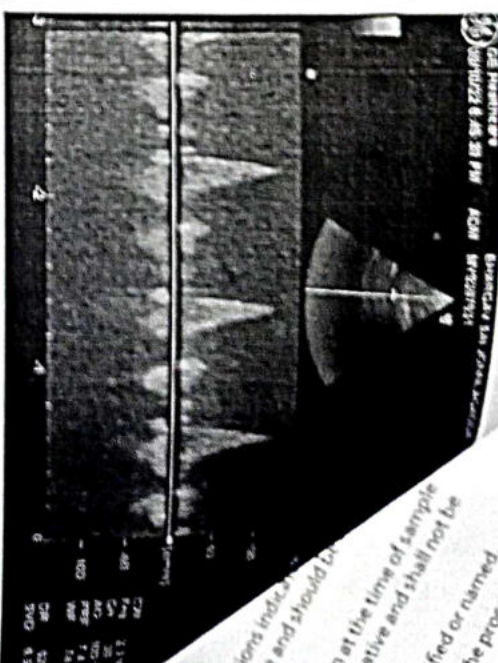
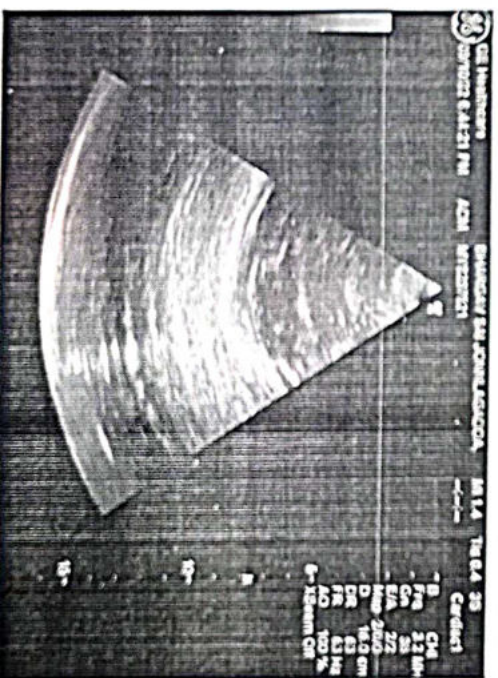
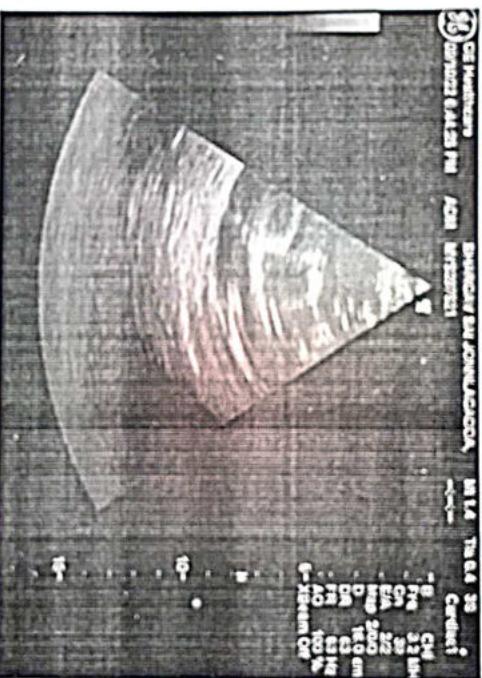
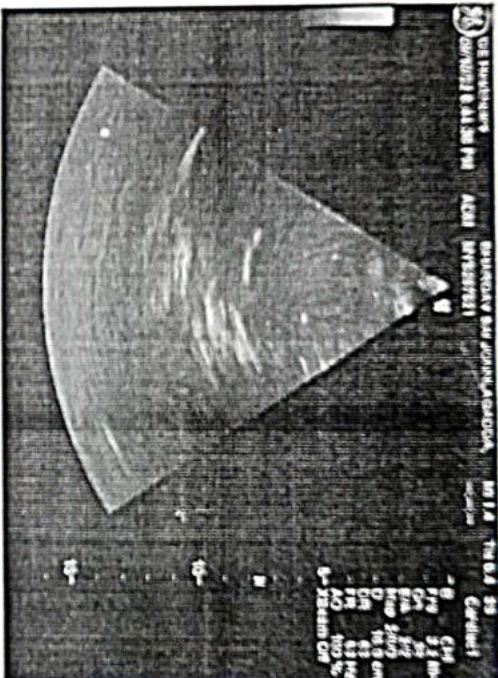
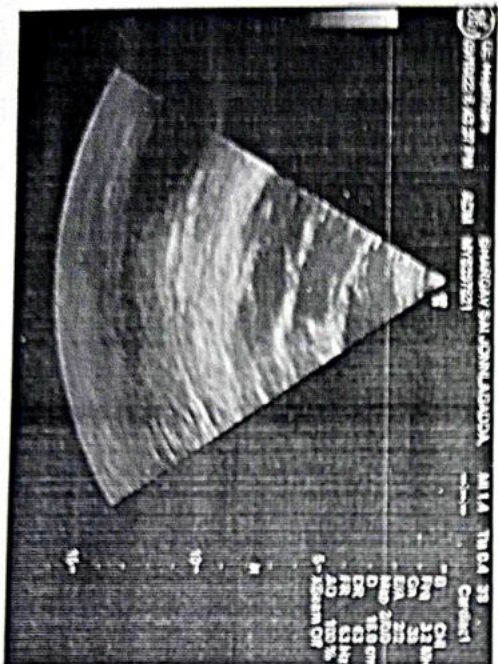
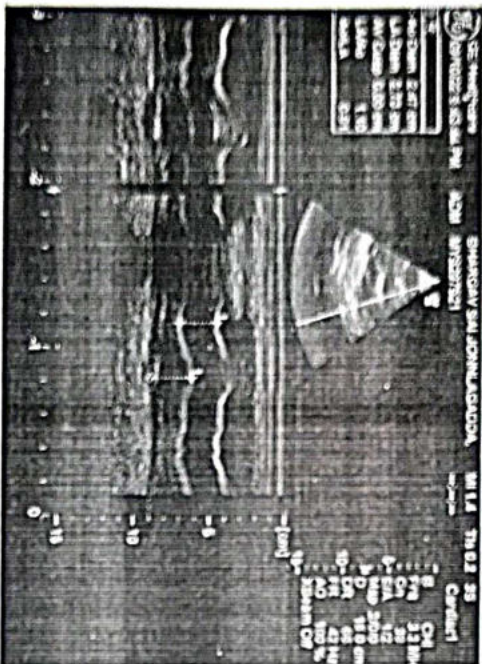
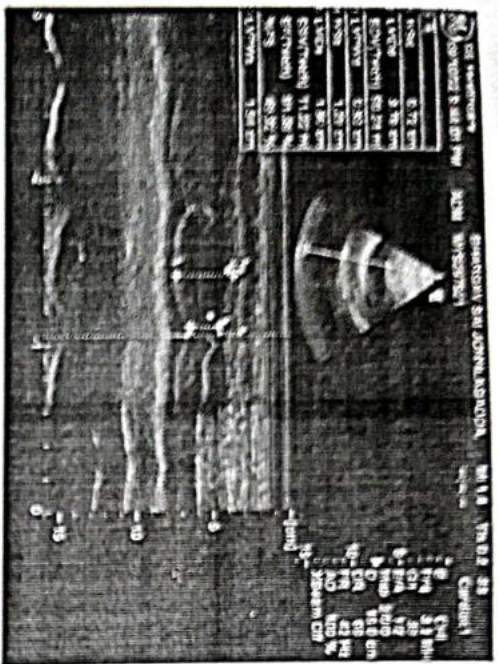
DR. NIKHIL B
INTERVENTIONAL CARDIOLOGIST
 NB/TG



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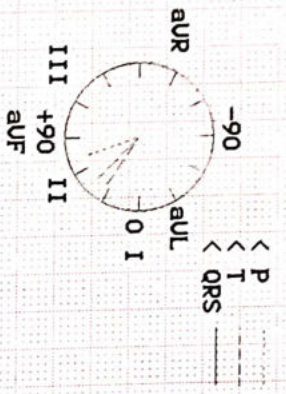
GE MAC1200 ST Male
BHARGAV SAI, JONNLAGADA MYS297521, CLUMAX DIAGNOSTICS, MYSORE

HR 83 bpm

AGE: 27

Measurement Results:

QRS	:	114 ms
QT/QTcB	:	380 / 448 ms
PR	:	150 ms
P	:	118 ms
RR/PP	:	720 / 740 ms
P/QRS/T	:	70 / 45 / 35 degrees
QTd/QTcBD	:	36 / 42 ms
Sokolow	:	2.2 mV
NK	:	11

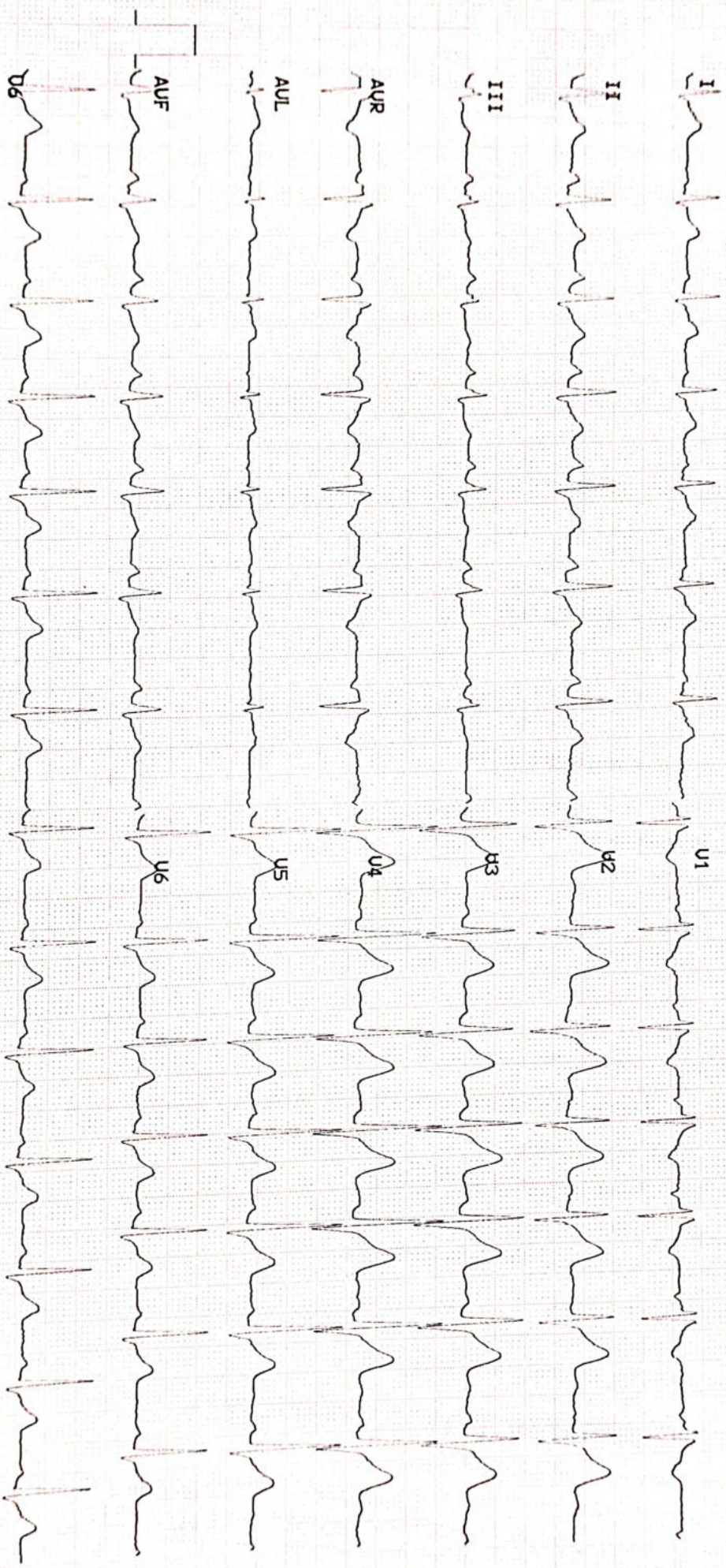


Interpretation:

RSR' pattern
R/S inversion area between U1 and U2
borderline ECG

Incomplete RBBB

Unconfirmed report.



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ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has uniform echopattern.
No evidence of focal lesion or intrahepatic biliary ductal dilatation.
Hepatic and portal vein radicals are normal.

GALL BLADDER show normal shape and has clear contents.
Gall bladder wall is of normal thickness. CBD is of normal calibre.

PANCREAS has normal shape, size and uniform echopattern.
No evidence of ductal dilatation or calcification.

SPLEEN show normal shape, size and echopattern.

KIDNEYS move well with respiration and have normal shape, size and echopattern.
Cortico- medullary differentiations are well madeout.
No evidence of calculus or hydronephrosis.

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	9.0	1.6
Left Kidney	9.9	1.8

URINARY BLADDER show normal shape and wall thickness.
It has clear contents.


PROSTATE shows normal shape, size and echopattern.
No evidence of ascites.

IMPRESSION:

➤ **NO SIGNIFICANT ABNORMALITY DETECTED.**

CONSULTANT RADIOLOGISTS

DR. ANITHA ADARSH
MB/TG



DR. MOHAN B

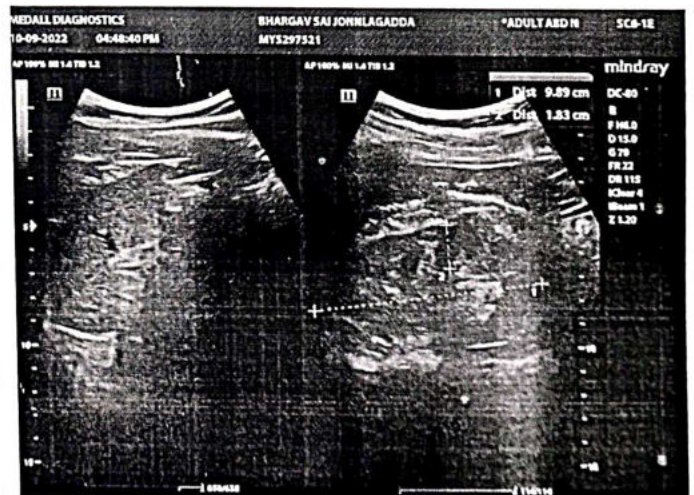
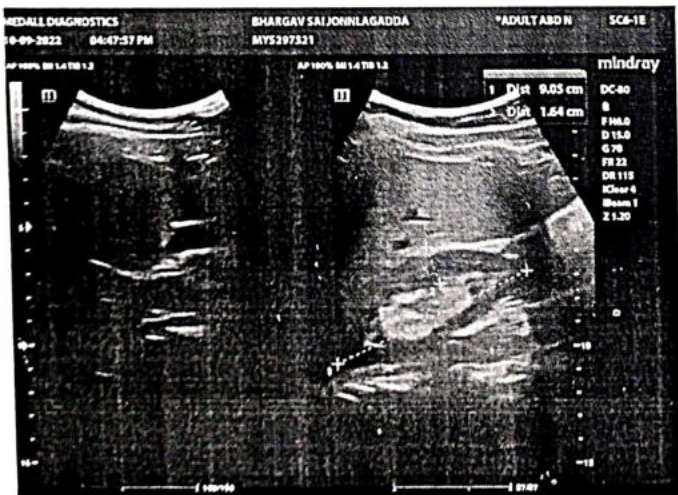
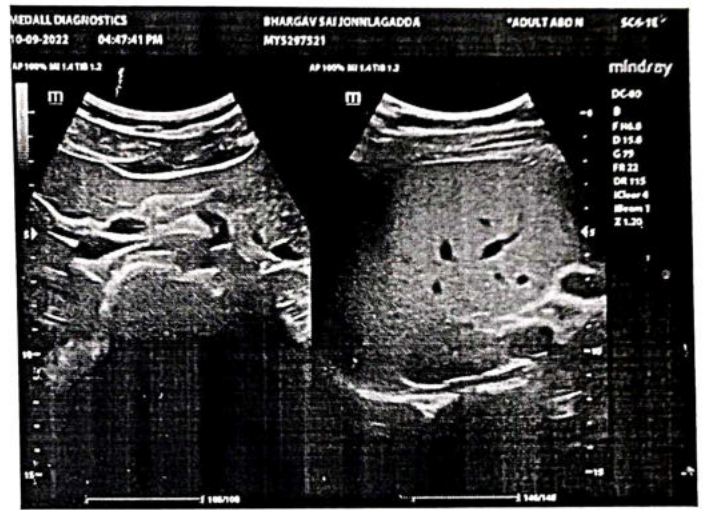
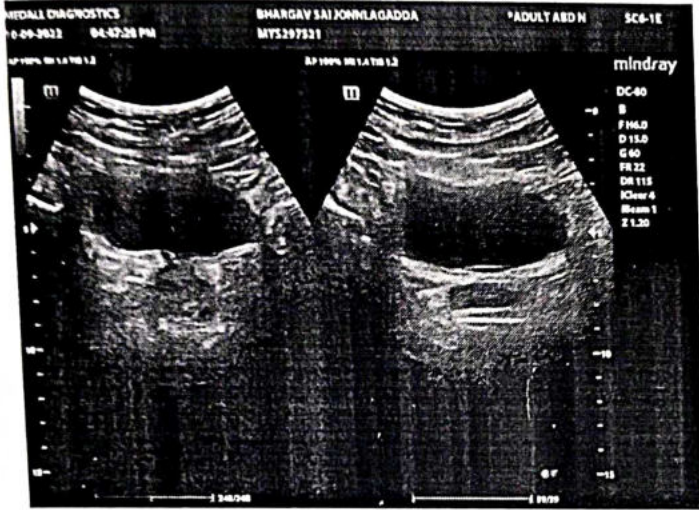


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Medall Diagnostics
Ballal Circle(Ashoka circle) - Mysore



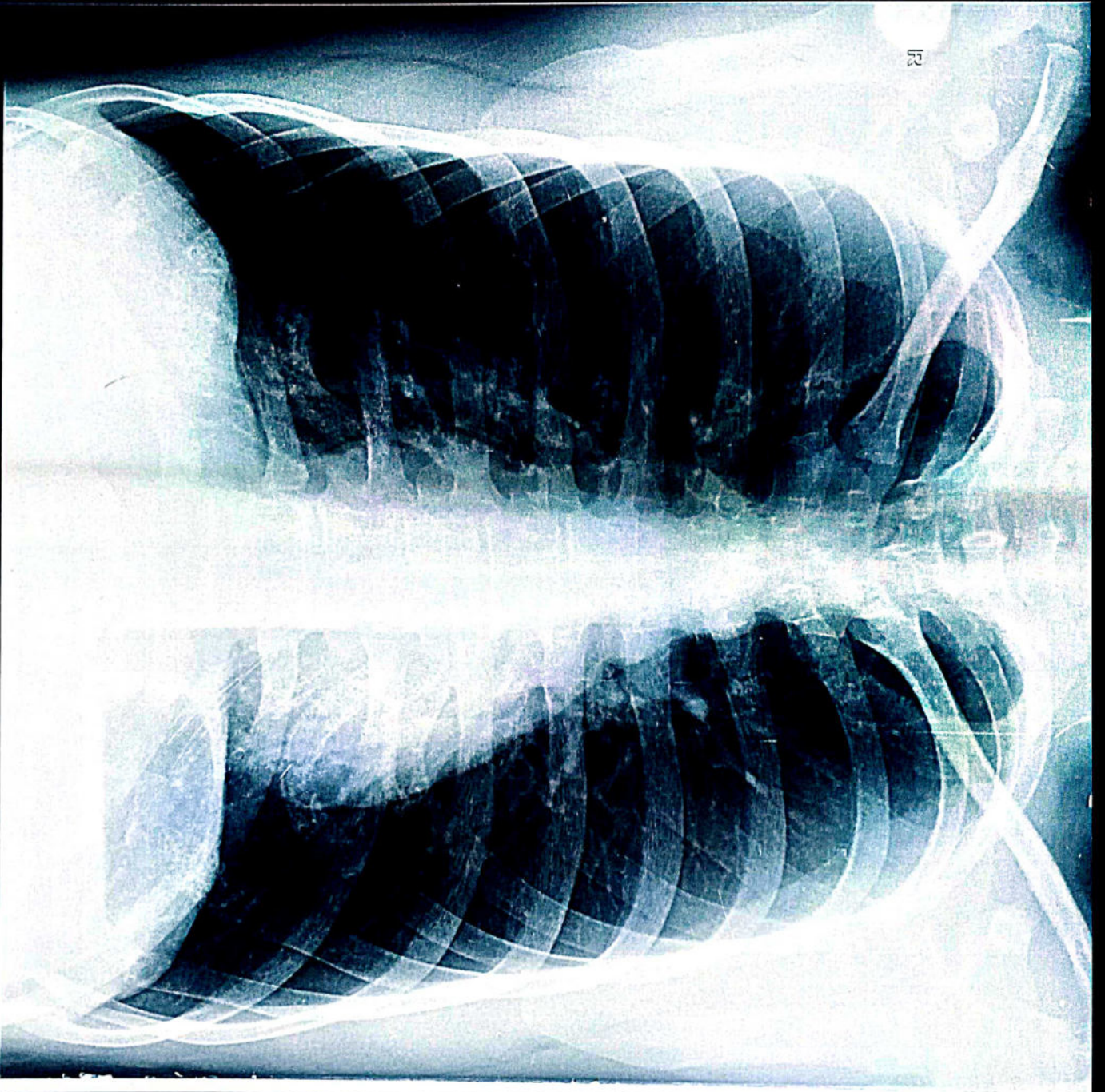
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BHARGAV SAI JONNLAGADDA 27 MYS297521 M CHEST PA
MEDALL CLUMAX DIAGNOSTIC

Name : Mr. BHARGAV SAI
JONNLAGADDA

PID No. : MYS297521

SID No. : 712227727

Age / Sex : 27 Year(s) / Male

Type : OP

Ref. Dr : MediWheel

Register On : 10/09/2022 9:55 AM

Collection On : 10/09/2022 11:12 AM

Report On : 10/09/2022 6:43 PM

Printed On : 11/09/2022 2:06 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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HAEMATOLOGY

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	15.9	g/dL	13.5 - 18.0
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INTERPRETATION: Haemoglobin values vary in Men, Women & Children. Low haemoglobin values may be due to nutritional deficiency, blood loss, renal failure etc. Higher values are often due to dehydration, smoking, high altitudes, hypoxia etc.

PCV (Packed Cell Volume) / Haematocrit (EDTA Blood/Derived)	51.0	%	42 - 52
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RBC Count (EDTA Blood/Automated Blood cell Counter)	5.38	mill/cu.mm	4.7 - 6.0
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MCV (Mean Corpuscular Volume) (EDTA Blood/Derived from Impedance)	95.0	fL	78 - 100
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MCH (Mean Corpuscular Haemoglobin) (EDTA Blood/Derived)	29.6	pg	27 - 32
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MCHC (Mean Corpuscular Haemoglobin concentration) (EDTA Blood/Derived)	31.2	g/dL	32 - 36
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RDW-CV (Derived)	17.3	%	11.5 - 16.0
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RDW-SD (Derived)	57.52	fL	39 - 46
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Total WBC Count (TC) (EDTA Blood/Derived from Impedance)	6690	cells/cu.mm	4000 - 11000
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Neutrophils (Blood/Impedance Variation & Flow Cytometry)	47	%	40 - 75
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Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	45	%	20 - 45
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Dr Shouree K.R
MBBS MD DNB
Consultant Pathologist
Reg No : KMC 103138

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Eosinophils (Blood/Impedance Variation & Flow Cytometry)	02	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	06	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	3.14	10 ³ / μ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	3.01	10 ³ / μ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.13	10 ³ / μ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.40	10 ³ / μ l	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10 ³ / μ l	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	295	10 ³ / μ l	150 - 450
MPV (Blood/Derived)	11.6	fL	7.9 - 13.7
PCT	0.34	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	05	mm/hr	< 15


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Investigation Observed Value Unit Biological Reference Interval

BIOCHEMISTRY

Liver Function Test

Bilirubin(Total) 1.1 mg/dL 0.1 - 1.2
(Serum/Diazotized Sulfanilic Acid)

Bilirubin(Direct) 0.3 mg/dL 0.0 - 0.3
(Serum/Diazotized Sulfanilic Acid)

Bilirubin(Indirect) 0.80 mg/dL 0.1 - 1.0
(Serum/Derived)

Total Protein 7.2 gm/dl 6.0 - 8.0
(Serum/Biuret)

Albumin 4.8 gm/dl 3.5 - 5.2
(Serum/Bromocresol green)

Globulin 2.40 gm/dL 2.3 - 3.6
(Serum/Derived)

A : G Ratio 2.00 1.1 - 2.2
(Serum/Derived)

INTERPRETATION: Remark : Electrophoresis is the preferred method

SGOT/AST (Aspartate Aminotransferase) 23 U/L 5 - 40
(Serum/IFCC / Kinetic)

SGPT/ALT (Alanine Aminotransferase) 40 U/L 5 - 41
(Serum/IFCC / Kinetic)

Alkaline Phosphatase (SAP) 83 U/L 53 - 128
(Serum/PNPP / Kinetic)

GGT(Gamma Glutamyl Transpeptidase) 37 U/L < 55
(Serum/IFCC / Kinetic)


Mr. S. Mohan Kumar
Sr. Lab Technician

VERIFIED BY


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Lipid Profile

Cholesterol Total (Serum/Oxidase / Peroxidase method)	205	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
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Remark: kindly correlate clinically

Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	80	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500
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INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the `usual_ circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	59	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
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LDL Cholesterol (Serum/Calculated)	130	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
---------------------------------------	-----	-------	---

VLDL Cholesterol (Serum/Calculated)	16	mg/dL	< 30
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Mr.S.Mohan Kumar
Sr.LabTechnician

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Non HDL Cholesterol (Serum/Calculated)	146.0	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3.5		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
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Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	1.4		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
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LDL/HDL Cholesterol Ratio (Serum/Calculated)	2.2		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
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<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	5.8	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Remark: Kindly correlate clinically.

Estimated Average Glucose (Whole Blood)	119.76	mg/dL
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INTERPRETATION: Comments

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 as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

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IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.31	ng/ml	0.7 - 2.04
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INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Thyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	12.30	Microg/dl	4.2 - 12.0
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INTERPRETATION:

Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

Remark: kindly correlate clinically

TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.571	μIU/mL	0.35 - 5.50
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INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment :

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&lt;0.03 μIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

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Name : Mr. BHARGAV SAI
JONNLAGADDA

PID No. : MYS297521

SID No. : 712227727

Age / Sex : 27 Year(s) / Male

Type : OP

Ref. Dr : MediWheel

Register On : 10/09/2022 9:55 AM

Collection On : 10/09/2022 11:12 AM

Report On : 10/09/2022 6:43 PM

Printed On : 11/09/2022 2:06 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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CLINICAL PATHOLOGY

PHYSICAL EXAMINATION

Colour (Urine/Physical examination)	Pale yellow		Yellow to Amber
Volume (Urine/Physical examination)	25		ml
Appearance (Urine)	Clear		

CHEMICAL EXAMINATION

pH (Urine)	6.0		4.5 - 8.0
Specific Gravity (Urine/Dip Stick - Reagent strip method)	1.015		1.002 - 1.035
Protein (Urine/Dip Stick - Reagent strip method)	Negative		Negative
Glucose (Urine)	Nil		Nil
Ketone (Urine/Dip Stick - Reagent strip method)	Nil		Nil
Leukocytes (Urine)	Negative	leuco/uL	Negative
Nitrite (Urine/Dip Stick - Reagent strip method)	Nil		Nil
Bilirubin (Urine)	Negative	mg/dL	Negative


Dr Shouree K.R.
MBBS MD DNB
Consultant Pathologist
Reg No : KMC 103138

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Blood (Urine)	Nil		Nil
Urobilinogen (Urine/Dip Stick - Reagent strip method)	Normal		Within normal limits

Urine Microscopy Pictures

RBCs (Urine/Microscopy)	Nil	/hpf	NIL
Pus Cells (Urine/Microscopy)	2-3	/hpf	< 5
Epithelial Cells (Urine/Microscopy)	2-3	/hpf	No ranges
Others (Urine)	Nil		Nil


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IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING
(EDTA Blood/Agglutination)

'A' 'Positive'

Remark: Test to be confirmed by gel method.

A handwritten signature in black ink over a circular stamp.

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BIOCHEMISTRY

BUN / Creatinine Ratio	15.0		
Glucose Fasting (FBS) (Plasma - F/GOD- POD)	81	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Urine sugar, Fasting (Urine - F)	Nil		Nil
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Glucose Postprandial (PPBS) (Plasma - PP/GOD - POD)	102	mg/dL	70 - 140
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INTERPRETATION:

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Urine Sugar (PP-2 hours) (Urine - PP)	Negative		Negative
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Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	15.0	mg/dL	7.0 - 21
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Creatinine (Serum/Jaffe Kinetic)	1.0	mg/dL	0.9 - 1.3
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INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Uricase/Peroxidase)	5.6	mg/dL	3.5 - 7.2
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Mr. S. Mohan Kumar
Sr. Lab Technician

VERIFIED BY

Dr. Shouree K.R.
MBBS MD DNB
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-- End of Report --

Name	BHARGAV SAI JONNLAGADDA	ID	MYS297521
Age & Gender	27Y/M	Visit Date	Sep 10 2022 9:55AM
Ref Doctor	MediWheel		

X – RAY CHEST PA VIEW

LUNGS:

Both lung fields are clear.

Vascular markings are normal.

Tracheal air lucency is normal.

No evidence of abnormal hilar opacities.

Costophrenic angle recesses are normal.

CARDIA:

Cardia is normal shape and configuration.

Diaphragm, Thoracic cage, soft tissues are normal.

IMPRESSION:

- **NO SIGNIFICANT DIAGNOSTIC ABNORMALITY.**



DR. MOHAN. B
(DMRD, DNB, EDIR, FELLOW IN CARDIAC
MRI)
CONSULTANT RADIOLOGIST