

Name	: Mrs. YAMUNA M V	REG/LAB NO.	: 23010194 / 1141
AGE/SEX	: 30 Yrs / Female	DATE OF COLLECTION	: 28-01-2023 at 09:35 AM
REFERRED BY	:	DATE OF REPORT	: 30-01-2023 at 10:58 AM
REF CENTER	: MEDIWHEEL		

TEST PARAMETER	RESULT	REFERENCE RANGE
BLOOD GROUP	"B"	
RH TYPE	POSITIVE	
<b>COMPLETE BLOOD COUNT(CBC)</b>		
HAEMOGLOBIN	13.3 gm/dl	12 - 16 gm/dl
TOTAL COUNT	4400 cells/cumm	4000 - 11000 cells/cumm
<b>DIFFERENTIAL COUNT</b>		
NEUTROPHILS	67 %	40 - 70 %
LYMPHOCYTES	26 %	20 - 45 %
EOSINOPHILS	03 %	2 - 8 %
MONOCYTES	04 %	1 - 6 %
BASOPHILS	00 %	0 - 1 %
PLATELET COUNT	2.2 Lakhs/cumm	1.5 - 4.5 Lakhs/cumm
R.B.C COUNT	4.6 mill/cumm	4 - 5.5 mill/cumm
PACKED CELL VOLUME (PCV)	40 %	37 - 47 %
M.C.V	87 fl	80 - 98 fl
M.C.H	28 pg	26 - 34 pg
M.C.H.C	33 %	31 - 38 %
ESR	10 mm/hr	0 - 20 mm/hr

**Interpretation:**

ESR is non specific marker of inflammatory process. Its main clinical utility is in monitoring the course or response to treatment of various acute and chronic disorders like hematologic diseases, malignancy, collagen vascular disorders and renal diseases.

<b>FASTING BLOOD SUGAR</b>	78 mg/dl	60 - 110 mg/dl
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**COMMENTS :**

80 - 99 mg/dL : Normal, 100 - 125 mg/dL : Impaired Fasting Glucose (Pre-Diabetes), >126 mg/ dL : Diabetes.  
reference intervals for FBS from ADA RECOMMENDATION 2015.

A level of 126 mg/dL or above, confirmed by repeating the test on another day, means a person has diabetes.

Impaired fasting glucose (IFG) : Fasting glucose repeatedly is at upper limit, family history or abnormal lipid profile.


Advised : HbA1c and clinical correlation.

**NOTE :**

In absence of pregnancy, IGT and IFG are risk factors for future DM and cardiovascular disease ; they are not clinical entities.

A person's blood glucose levels normally move up and down depending on meals , Exercise, sickness, and stress.



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TEST PARAMETER	RESULT	REFERENCE RANGE
HbA1c (GLYCOSYLATED Hb) <i>HPLC</i>	4.4 %	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5

MEAN BLOOD GLUCOSE 73.4  
*Calculated*

Degree of Control	HbA1c	MBG
Normal	< 6.0 %	61-124 mg/dl
Good Control	6.0-7.0 %	124-156 mg/dl
Fair Control	7.0-8.0 %	158-188 mg/dl
Poor Control	> 8.0 %	>188 mg/dl

**Note:**

- 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.
- 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.

**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. ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

**LIPID PROFILE TEST (LPT)**

TOTAL CHOLESTEROL	133 mg/dl	up to 200 mg/dl
TRIGLYCERIDES	43 mg/dl	up to 200 mg/dl <b>Special condition:</b> Borderline high risk : 200 - 400 mg/dL Elevated : > 400 mg/dL
HDL CHOLESTEROL - DIRECT	52 mg/dl	35 - 55 mg/dl
LDL CHOLESTEROL - DIRECT	72.4 mg/dl	up to 150 mg/dl
VLDL CHOLESTEROL	8.6 mg/dl	0 - 60 mg/dl
TC/HDL	2.6	
LDL/HDL	1.4	



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TEST PARAMETER	RESULT	REFERENCE RANGE
<b><u>LIVER FUNCTION TEST (LFT)</u></b>		
TOTAL BILIRUBIN	0.9 mg/dl	0 - 1 mg/dl
DIRECT BILIRUBIN	<b>0.3</b> mg/dl	0 - 0.25 mg/dl
INDIRECT BILIRUBIN	0.6 mg/dl	0 - 0.75 mg/dl
TOTAL PROTEIN	<b>5.0</b> g/dl	6 - 8.5 g/dl
SERUM ALBUMIN	4.9 g/dl	3.5 - 5.2 g/dl
SERUM GLOBULIN	<b>0.1</b> g/dL	2.3 - 3.5 g/dL
A/G RATIO	<b>49</b>	1 - 1.5
ASPARATE AMINOTRANSFERASE (SGOT/AST)	16 U/L	up to 40 U/L
ALANINE AMINOTRANSFERASE (SGPT/ALT)	21 U/L	up to 40 U/L
ALKALINE PHOSPHATASE	49 IU/L	25 - 147 IU/L
<b>POST PRANDIAL BLOOD SUGAR</b>	<b>89</b> mg/dl	70 - 140 mg/dl
<b><u>RENAL FUNCTION TEST (RFT)</u></b>		
BLOOD UREA	29 mg/dL	11 - 45 mg/dL
SERUM URIC ACID	4.3 mg/dL	3.2 - 6.4 mg/dL
SERUM CREATININE	0.7 mg/dL	0.6 - 1.4 mg/dL



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TEST PARAMETER	RESULT	REFERENCE RANGE
<b><u>THYROID PROFILE (T3, T4, TSH)</u></b>		
TOTAL TRIIODOTHYRONINE (T3) <i>CLIA</i>	0.96 ng/mL	0.60-1.81 1st Trimester :0.71 - 1.75 2nd Trimester :0.91 - 1.95 3rd Trimester :1.04 - 1.82
TOTAL THYROXINE (T4) <i>CLIA</i>	7.10 µg/dL	4.5-10.9 1st Trimester :6.5 - 10.1 2nd Trimester :7.5 - 10.03 3rd Trimester :6.3 - 9.7
THYROID STIMULATING HORMONE (TSH) <i>CLIA</i>	2.474 µIU/ml	0.35-5.5 1st Trimester :0.1 - 2.5 2nd Trimester :0.2 - 3.0 3rd Trimester :0.3 - 3.0

**Note:**

- 1.TSH levels are subject to circadian variation, reaching peak levels between 2 – 4 a.m. and at a minimum between 6-10 p.m. The variation is of the order of 50% hence time of the day has influence on the measured serum TSH concentrations.
- 2.Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- 3.Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

**Clinical Use:**

Primary Hypothyroidism, Hyperthyroidism, Hypothalamic – Pituitary hypothyroidism, Inappropriate TSH secretion, Non thyroidal illness, Autoimmune thyroid disease, Pregnancy ,associated thyroid disorders, Thyroid dysfunction in infancy and early childhood

**STOOL ANALYSIS**

**PHYSICAL EXAMINATION**

CONSISTANCY	SEMI SOLID
COLOUR	BROWNISH
MUCUS	ABSENT
REDUCING SUGAR	ABSENT

**MICROSCOPIC EXAMINATION**

OVA	NIL
CYST	NIL
PUS CELLS	1-2 /hpf
RBC	NIL



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TEST PARAMETER	RESULT	REFERENCE RANGE
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**COMPLETE URINE ANALYSIS**

**PHYSICAL CHARACTERS**

COLOUR	PALE YELLOW	PALE YELLOW
APPEARANCE	CLEAR	CLEAR
SPECIFIC GRAVITY	1.015	1.005-1.030
pH	5.0	4.5-7.0

**CHEMICAL CONSTITUENTS**

ALBUMIN	PRESENT (+)	ABSENT
SUGAR	NIL	ABSENT
BILE SALTS	ABSENT	ABSENT
BILE PIGMENTS	ABSENT	ABSENT
KETONE BODIES	ABSENT	ABSENT

**MICROSCOPY**

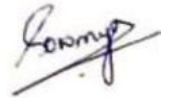
PUS CELLS	3 - 4 /hpf	4-6
R.B.C	NIL	0-4
EPITHELIAL CELLS	1 - 2 /hpf	0-2
CASTS	ABSENT	ABSENT
CRYSTALS	ABSENT	ABSENT
FASTING URINE SUGAR	NIL	NIL
POST PRANDIAL URINE SUGAR (PPUS)	NIL	NIL

Dispatched by: Somashekara h c

\*\*\*\* End of Report \*\*\*\*

Printed by: Somashekara h c on 30-01-2023 at 10:58 AM

Lab Technician



**Dr. Sowmya T.M**  
DNB ,PDF  
Consultant Pathologist



## Mediclu Diagnostics & Speciality Centre

### Patient Details

Date: 28-Jan-23

Time: 13:29:46

Name: MRS YAMUNA ID: 258741537

Age: 30 y

Sex: F

Height: 158 cms

Weight: 600 Kgs

### Interpretation

- Target heart rate achieved 81%.
- Average effort tolerance, Normal HR & BP response.
- No significant ST-T changes during exercise and recovery.
- No angina / Arrhythmias.

### IMPRESSION:

- TMT NEGATIVE FOR INDUCIBLE ISCHEMIA.

To correlate clinically.

Ref. Doctor: MEDIWHEEL

Doctor: DR LOKESH KM

( Summary Report edited by user )

## Mediclu Diagnostics & Speciality Centre

**Patient Details**                      **Date:** 28-Jan-23                      **Time:** 13:29:46  
**Name:** MRS YAMUNA ID: 258741537  
**Age:** 30 y                      **Sex:** F                      **Height:** 158 cms                      **Weight:** 600 Kgs  
**Clinical History:**

**Medications:**

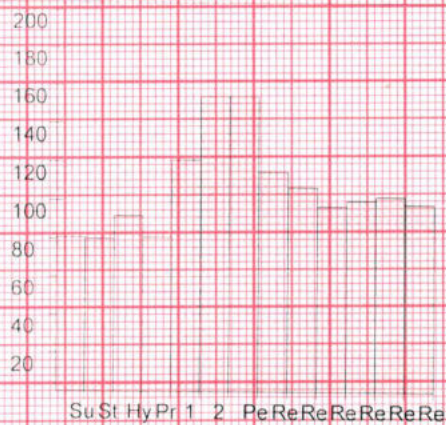
### Test Details

**Protocol:** Bruce                      **Pr.MHR:** 190 bpm                      **THR:** 171 (90 % of Pr.MHR) bpm  
**Total Exec. Time:** 6 m 1 s                      **Max. HR:** 154 ( 81% of Pr.MHR )bpm                      **Max. Mets:** 10.20  
**Max. BP:** 144 / 99 mmHg                      **Max. BP x HR:** 22176 mmHg/min                      **Min. BP x HR:** 7920 mmHg/min  
**Test Termination Criteria:**

### Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 14	1.0	0	0	81	144 / 99	-0.21 II	0.35 I
Standing	0 : 14	1.0	0	0	80	144 / 99	-0.42 V6	0.35 I
Hyperventilation	0 : 6	1.0	0	0	92	144 / 99	-0.42 II	0.35 I
1	3 : 0	4.6	1.7	10	121	144 / 99	-3.82 III	3.18 II
2	3 : 0	7.0	2.5	12	154	144 / 99	-5.73 II	-5.66 III
Peak Ex	0 : 1	10.2	3.4	14	154	144 / 99	-5.31 II	-3.54 III
Recovery(1)	1 : 0	1.8	1	0	115	144 / 99	-5.31 II	-4.60 aVR
Recovery(2)	1 : 0	1.0	0	0	107	144 / 99	-2.97 II	3.18 V3
Recovery(3)	1 : 0	1.0	0	0	97	144 / 99	-1.27 aVF	1.77 V3
Recovery(4)	1 : 0	1.0	0	0	100	144 / 99	-1.27 II	1.77 V3
Recovery(5)	1 : 0	1.0	0	0	102	144 / 99	-2.12 II	-1.06 III
Recovery(6)	0 : 15	1.0	0	0	98	144 / 99	-1.06 II	1.06 II

HR x Stage



BP x Stage



Mets x Stage



NAME:	Mrs. YAMUNA	DATE:	28-01-2023
AGE:	30 YEARS	ID. NO:	200879
GENDER:	FEMALE	REFERRED BY:	OLYMPUS DIAGNOSTICS

### X-RAY REPORT- CHEST (PA VIEW)

#### OBSERVATIONS:

The lung fields are clear bilaterally.

CP angles are clear.

Both the hila appear normal.

Cardiac diameter is within normal limits.

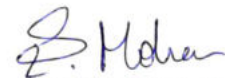
Trachea is midline.

Visible bony thoracic cage is normal.

Adjacent soft tissues appear normal.

#### IMPRESSION:

- **No significant abnormality in the visualized lung fields.**



**Dr. MOHAN S. MDRD**  
**Consultant radiologist**



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### **USG REPORT - ABDOMEN AND PELVIS**

#### **OBSERVATION:**

#### **LIVER:**

Liver is normal in size (14.9 cm) and shows homogenous echotexture. No obvious focal lesion is seen. Intrahepatic biliary radicles not dilated. Hepatic & portal veins are normal. CBD is normal.

#### **GALL BLADDER:**

Normal in distension. Lumen echo free. Wall thickness is normal.

#### **PANCREAS:**

Head and body visualized and appears normal. No obvious focal lesion is seen. Pancreatic duct not dilated. Tail not visualized.

#### **SPLEEN:**

Normal in size (10.1cm) with normal echotexture. No focal lesion is seen.

#### **RIGHT KIDNEY:**

Right kidney measures 9.9 x 1.2 cm (length x parenchymal thickness) with normal echo pattern and cortical thickness.

The shape, size and contour of the right kidney appear normal. Cortical medullary differentiation is maintained. No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

#### **LEFT KIDNEY:**

Left kidney measures 10.5 x 1.3 cm (length x parenchymal thickness) with normal echo pattern and cortical thickness.

The shape, size and contour of the left kidney appear normal. Cortical medullary differentiation is maintained. No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

#### **URINARY BLADDER:**

Is normal in contour. No intraluminal echoes are seen. No calculus or diverticulum is seen.

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### USG REPORT - ABDOMEN AND PELVIS

#### UTERUS:

Anteverted, normal in size measures 9.7 x 4.4 x 5.3 cm with multiple hypoechoic foci noted in the myometrium- Likely calcifications.

Hypoechoic lesion noted in the endometrial cavity arising from anterior wall measuring ~ 1.3 x 0.8 x 1.6 cm. No obvious internal vascularity noted.

Few nabothian cysts noted, largest measuring 2.1 x 1.7 cm in the posterior lip of cervix.

Endometrial thickness measures 11mm.

#### OVARIES:

Both ovaries are normal in size with normal echo pattern.

Right ovary measures 2.6 x 1.7 x 2.4 cm (Vol- 5.7 cc).

Left ovary measures 2.7 x 2.0 x 3.1 cm (Vol-9.5 cc).

No adnexal mass lesion seen.

No evidence of free fluid in the abdomen or pelvis.

#### IMPRESSION:

- **Hypoechoic lesion in the endometrial cavity arising from anterior wall as described-? Submucosal fibroid/ endometrial polyp (suggested transvaginal ultrasound/ MRI pelvis for further evaluation).**

*Note: All abnormalities cannot be detected by Ultrasound scan due to technical limitation, obesity and other factors. Scan findings to be correlated with old reports or other investigations.*



**Dr. MOHAN S. MDRD**  
Consultant radiologist

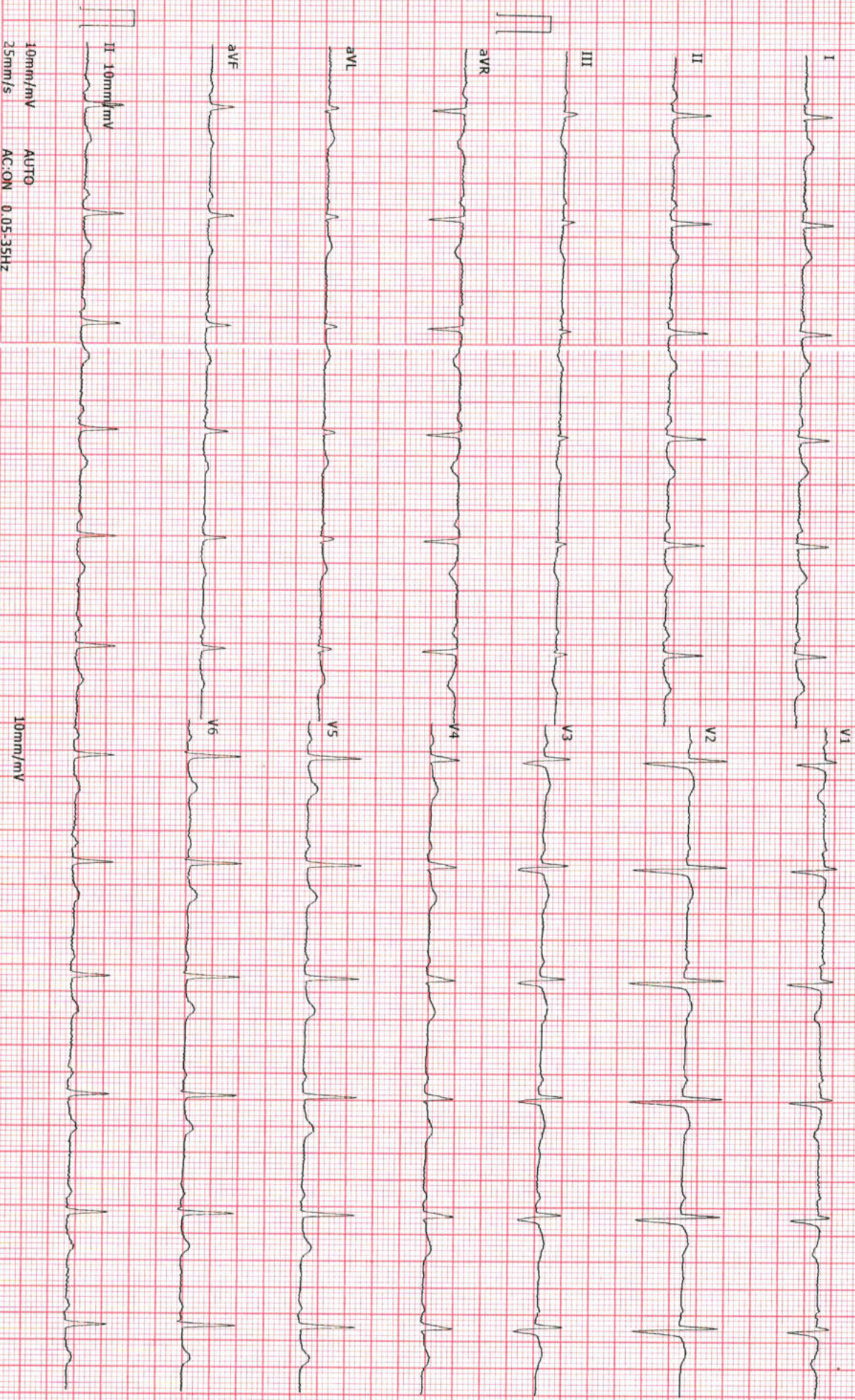
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 Weight(Kg): \_\_\_\_\_

Gender: Female  
 Height(cm): \_\_\_\_\_  
 BP(mmHg): 101/63

P-R.....ms 123  
 Q-R-S.....ms 103  
 QT/QTc.....ms 370/410  
 P/QRS/T AXES.....deg 46/40/46  
 RV5/SV1.....mV 0.94/0.55  
 RV5+SV1.....mV 1.49

Report Confirmed by: \_\_\_\_\_  
 \*\* CONCLUSION \*\*  
 801 Sinus Rhythm  
 \*\* NORMAL ECG \*\*

\*The result must be confirmed by doctor!



10mm/mV  
 25mm/s  
 AUTO  
 AC:ON 0.05-35Hz

10mm/mV