

Name: Mrs Gowri Mani  
Date: 10/06/23 Age: 31 Sex: Female  
Address: Guntur



Routine Health checkup

ClO Generalised weakness

NO H/O HTN / DM / CAD / PTB

→  
TO CONSULT  
DENTIST FOR  
TOOTH CARE

1) TAB. BECOSULES

0 0 1 - 30

TEMP: .....  
B.P: 100/70 mm/Hg  
PULSE: 67 /min  
WEIGHT: 66 kg  
HEIGHT: 157 cm

**Dr. KEERTHI KISHORE NAGALLA**  
Regd.No: 64905 MBBS, M.D. General Medicine  
CONSULTANT GENERAL PHYSICIAN  
YODA DIAGNOSTICS-GUNTUR

**CONTACT US**



Mrs. GOWRI MANASA

HR 61/min

Axis:

SINUS RHYTHM

10526231

Intervals:

P 50 °

NORMAL ECG

Female

RR 980 ms

QRS 47 °

5.79

UNCONFIRMED REPORT

31 years

P 102 ms

T 45 °

PR 134 ms

P (II) 0.09 mV

QRS 84 ms

S (V1) -0.76 mV

QT 420 ms

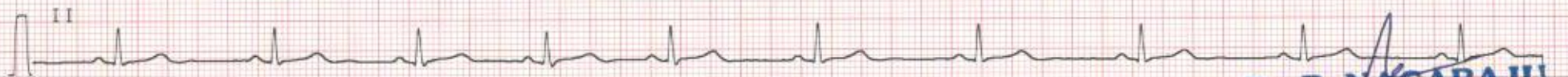
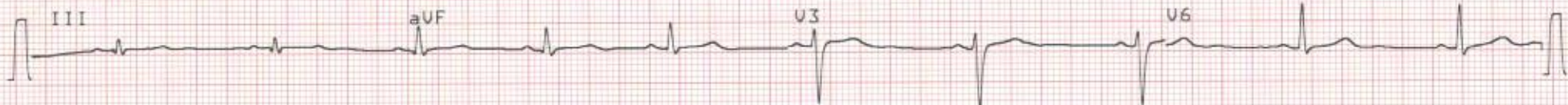
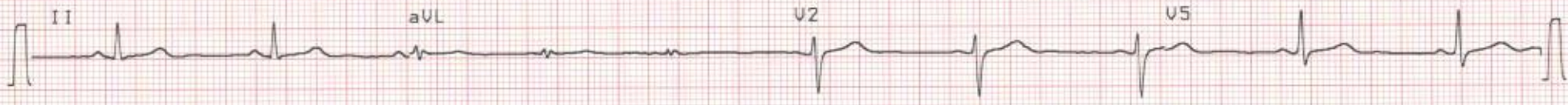
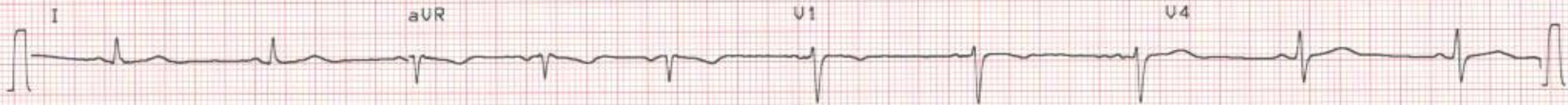
R (V5) 0.90 mV

QTc 429 ms

Sokol. 1.69 mV

10 mm/mV

10 mm/mV



10 mm/mV

25 mm/s

0.05-25Hz F50 55F 585 5a 10-JUN-23 12:29:16

**Dr. B. NAGARAJU**  
 Regd.No: 70760 MBBS, M.D, DM  
 CONSULTANT CARDIOLOGIST  
 YODA DIAGNOSTICS CENTER

AT-102 1.37 Cm



## EYE GLASS PRESCRIPTION

Name : Gowri Manasa  
 Age : 31Y Employee ID: YOLT15351  
 Gender : F Date: 10/6/23

Vn  
(unaided)  
PGP

6/6	6/6
-----	-----

Distance

	SPH	CYL	AXIS	BCVA
OD				6/6
OS		plano	NAE	6/6

Add

N	6
---	---

@Solms

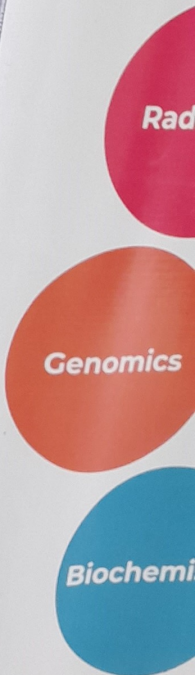
### LENS TYPE

- Single Vision Distance
- Single Vision Near
- Bifocal
- Progressive
- UV-Coating

Remarks: \_\_\_\_\_

  
Signature





Ameerpet  
Guntur

☎ 040 - 35

✉ lab.guntu

QR code #12-12, 36  
Opp. Man  
haneta



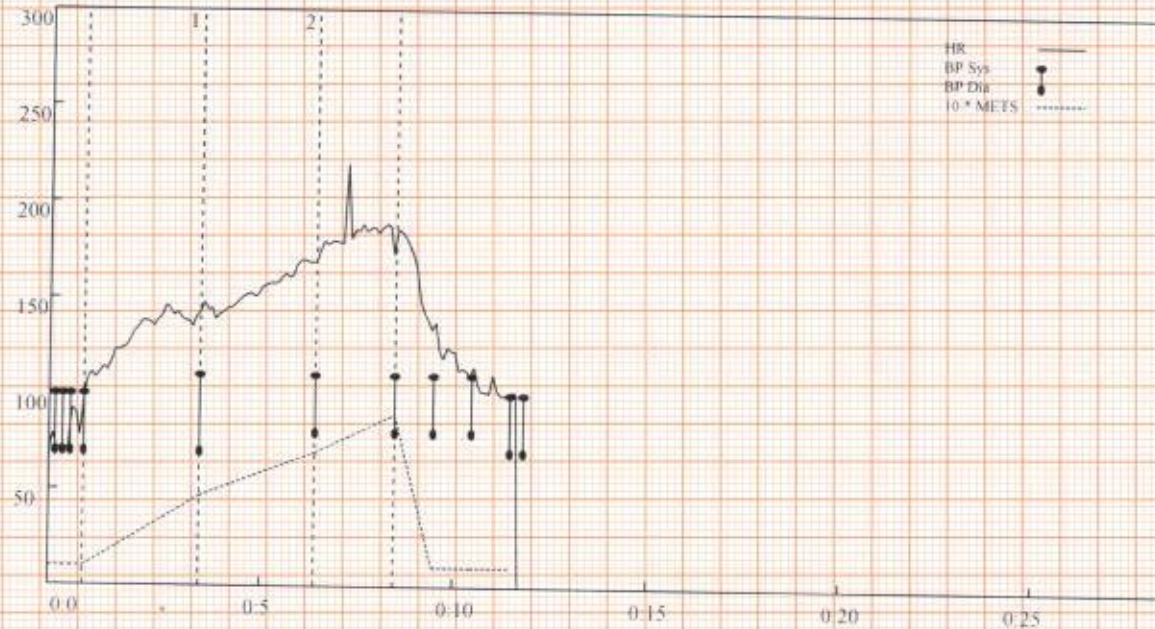
# Yoda Diagnostic Guntur

Name: MRS.GOWRI MANASA P

Date: 10-06-2023

Time: 13:23

## Exercise Trend



## Interpretation

The Patient Exercised according to Bruce Protocol for 0:08:03 achieving a work level of 9 METS.  
Resting Heart Rate, initially 70 bpm rose to a max. heart rate of 188bpm (99% of Predicted Maximum Heart Rate).  
Resting Blood Pressure of 100/70 mmHg, rose to a maximum Blood Pressure of 110/80 mmHg  
\* NO SIGNIFICANT ST T CHANGES DURING EXERCISE & RECOVERY  
\* FAIR EFFORT TOLERANCE  
\* TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHEMIA

Ref. Doctor: DR SELF

Schiller Spandan CS-10 Version 2.14

**Dr. B. NAGARAJU**  
Regd.No: 70700 MBBS, M.D, DM  
CONSULTANT CARDIOLOGIST  
YODA DIAGNOSTICS-GUNTUR

Doctor: DR NAGARAJU

( Summary Report edited by User )



## Yoda Diagnostic Guntur

**Name:** MRS.GOWRI MANASA P **Date:** 10-06-2023 **Time:** 13:23  
**Age:** 31 **Gender:** F **Height:** 157 cms **Weight:** 66 Kg **ID:** 10526231  
**Clinical History:** NO  
**Medications:** NO

### Test Details:

**Protocol:** Bruce **Predicted Max HR:** 189 **Target HR:** 160  
**Exercise Time:** 0:08:03 **Achieved Max HR:** 188 (99% of Predicted MHR)  
**Max BP:** 110/80 **Max BP x HR:** 20680 **Max Mets:** 9  
**Test Termination Criteria:**

### Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	ST Level mm	ST Slope mV/S
Supine	00:08	1	0	0	70	100/70	7000	0.6 III	0.8 V3
Standing	00:12	1	0	0	71	100/70	7100	0.4 V2	0.9 V3
HyperVentilation	00:12	1	0	0	71	100/70	7100	0.5 V3	0.9 V3
Pre-Test	00:20	1	1.6	0	90	100/70	9000	1.8 V2	1.5 V4
Stage-1	03:00	4.7	2.7	10	135	110/70	14850	-2.2 II	-1.7 aVR
Stage-2	03:00	7	4	12	169	110/80	18590	3.3 aVR	1.8 V4
Peak Exercise	02:03	9	5.5	14	188	110/80	20680	1.6 V5	1.6 V3
Recovery1	01:00	1	0	0	139	110/80	15290	1 V3	2.4 V3
Recovery2	01:00	1	0	0	113	110/80	12430	1.1 V2	1.5 V4
Recovery3	01:00	1	0	0	100	100/70	10000	0.9 V1	1.2 V3



# Yoda Diagnostic Guntur

MRS.GOWRI MANASA P

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 0:00:00

Stage Time: 00:08

HR: 70 bpm

STLevel(mm) STSlope(mV/s)

Stage: Supine

Speed: 0 km/h

Slope: 0%

THR: 160 bpm

BP: 100/70 mmHg

STLevel(mm) STSlope(mV/s)

-0.2 0.2

I

V1 0 0.1

0.5 0.4

II

V2 0.4 0.2

0.6 0.3

III

V3 0.5 0.8

-0.2 -0.4

aVR

V4 0.1 0.4

-0.5 -0.2

aVL

V5 0.3 0.5

0.5 0.4

aVF

V6 0.1 0.3

II

Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R + 60 ms, J = R + 60 ms, Post J + J = 80 ms

Schiller Spandau CS-10 Version 2.14

MICRO MED CHARTS



# Yoda Diagnostic Guntur

**MRS.GOWRI MANASA P**

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 0:00:00

Stage Time: 00:12

**HR: 71 bpm**

STLevel(mm) STSlope(mV/s)

Stage: Standing

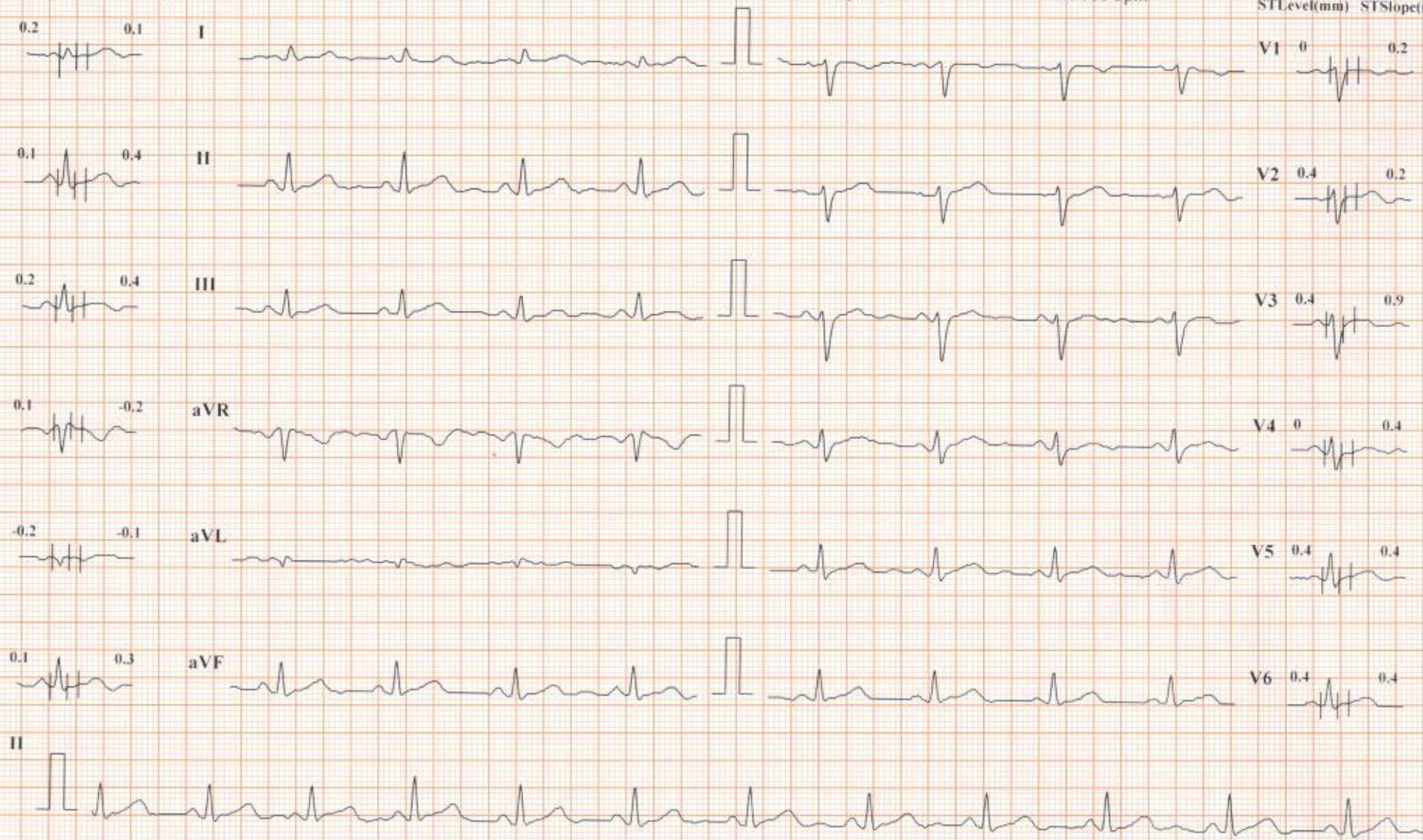
Speed: 0

Slope: 0%

THR: 160 bpm

BP: 100/70 mmHg

STLevel(mm) STSlope(mV/s)





# Yoda Diagnostic Guntur

**MRS.GOWRI MANASA P**

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 0:00:00

Stage Time: 00:12

**HR: 71 bpm**

STLevel(mm) STSlope(mV/s)

Stage: HyperVentilation

Speed: 0

Slope: 0 %

THR: 160 bpm

BP: 100/70 mmHg

STLevel(mm) STSlope(mV/s)





# Yoda Diagnostic Guntur

**MRS.GOWRI MANASA P**

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 0:03:00

Stage Time: 03:00

**HR: 135 bpm**

BP: 110/70 mmHg

STLevel(mm) STSlope(mV/s)

Stage: 1

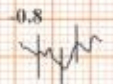
Speed: 2.7 kmph

Slope: 10 %

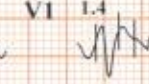
THR: 160 bpm

STLevel(mm) STSlope(mV/s)

-0.8 1.3 I



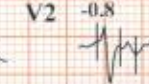
V1 1.4 -0.4



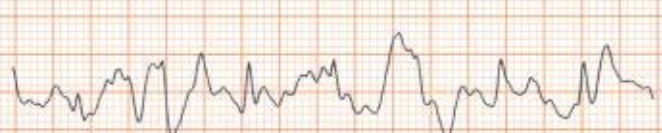
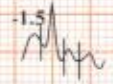
-2.2 0.9 II



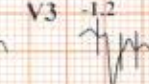
V2 -0.8 -0.5



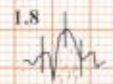
-1.5 -0.3 III



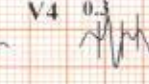
V3 -1.2 0.2



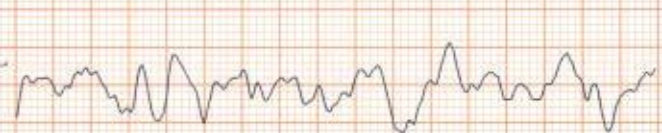
1.8 -1.7 aVR



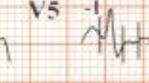
V4 0.3 0.6



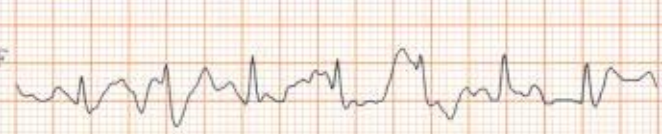
0.4 0.8 aVL



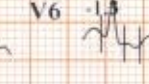
V5 -1 0.2



-1.8 0.3 aVF



V6 -1.5 -0.2



II





# Yoda Diagnostic Guntur

**MRS.GOWRI MANASA P**

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 0:06:00

Stage Time: 03:00

**HR: 169 bpm**

STLevel(mm) STSlope(mV/s)

Stage: 2

Speed: 4 kmph

Slope: 12 %

THR: 160 bpm

BP: 110/80 mmHg

STLevel(mm) STSlope(mV/s)





# Yoda Diagnostic Guntur

**MRS.GOWRI MANASA P**

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 0:08:03

Stage Time: 02:03

**HR: 188 bpm**

Stage: 3 Peak Exercise

Speed: 5.5 kmph

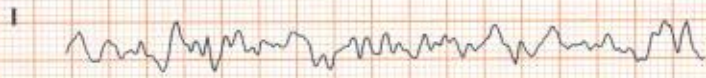
Slope: 14 %

THR: 160 bpm

BP: 110/80 mmHg

STLevel(mm) STSlope(mV/s)

-0.3 -0.4 I



V1 0.3 -0.1

-1.4 0.5 II



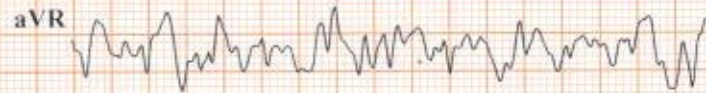
V2 0.8 0.1

-1.2 0.8 III



V3 -0.5 1.6

0.9 0.1 aVR



V4 -0.8 0.8

0.5 -0.6 aVL



V5 1.6 0.8

-1.4 0.6 aVF



V6 0.3 0.6



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz

Mains Filter: ON

ISO = R - 60 ms, J - R + 60 ms, Post J = J + 80 ms

Schuller Spandan CS-10 Version 2.14



# Yoda Diagnostic Guntur

**MRS.GOWRI MANASA P**

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 00:00

Stage Time: 01:00

**HR: 139 bpm**

BP: 110/80 mmHg

Stage: Recovery I

Speed: 0 kmph

Slope: 0 %

THR: 160 bpm

STLevel(mm) STSlope(mV/s)

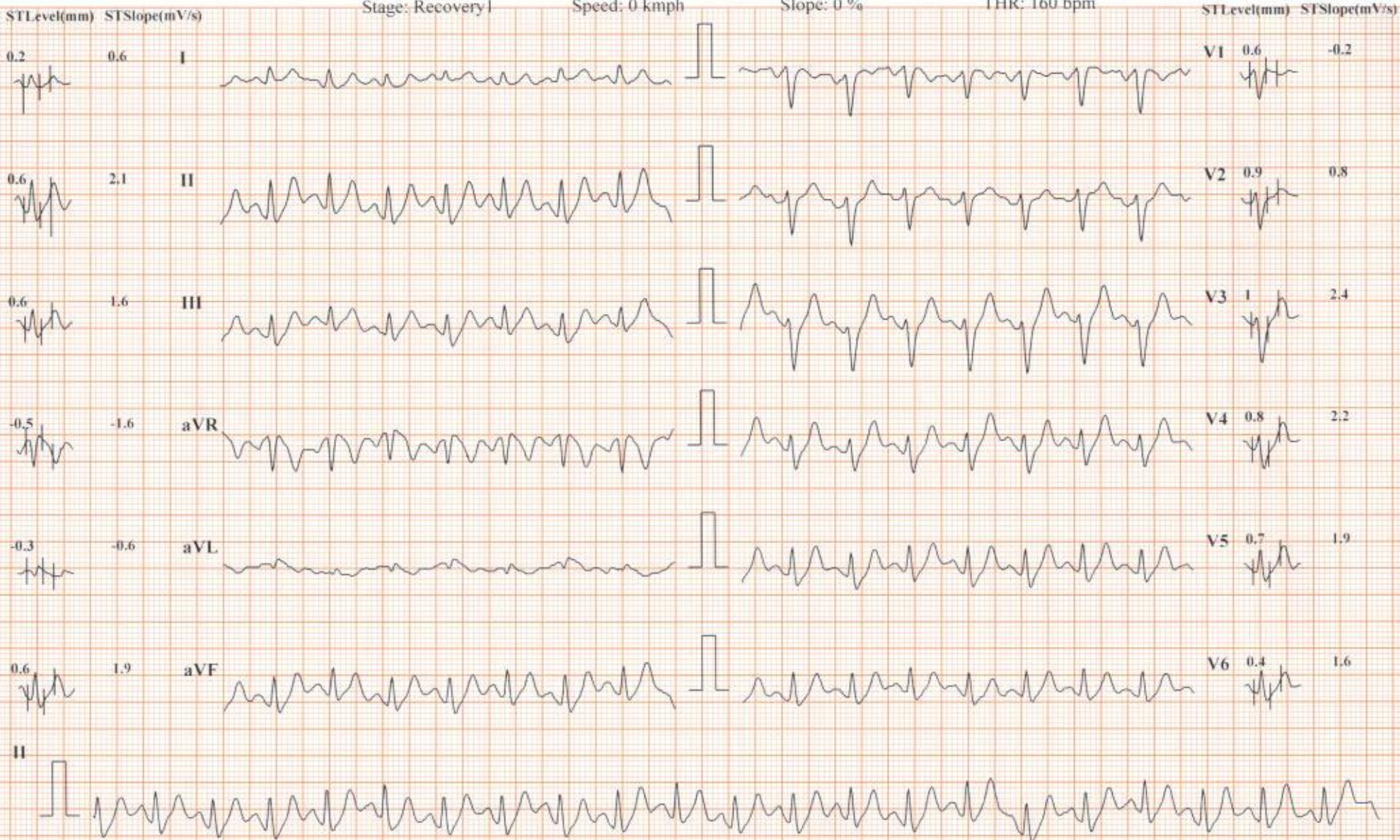


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO - R - 60 ms, J + R + 60 ms, Post J = J + 80 ms

Schiller Spandau CS-10 Version 2.14



# Yoda Diagnostic Guntur

**MRS.GOWRI MANASA P**

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 00:00

Stage Time: 01:00

**HR: 113 bpm**

STLevel(mm) STSlope(mV/s)

Stage: Recovery2

Speed: 0 kmph

Slope: 0 %

THR: 160 bpm

BP: 110/80 mmHg

STLevel(mm) STSlope(mV/s)

-0.4 0.3

I

V1

0.7

0.2

0.1 1.2

II

V2

1.1

0.5

0.6 0.9

III

V3

1.1

1.4

0.4 -0.9

aVR

V4

0.8

1.5

-0.4 -0.4

aVL

V5

0.7

1.2

0.4 1.2

aVF

V6

0.3

1.1

II

Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R + 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandan CS-10 Version 2.14

MICRO MED CHARTS



# Yoda Diagnostic Guntur

MRS.GOWRI MANASA P

Bruce Protocol

ID: 10526231

Date: 10-06-2023

Exec Time : 00:00

Stage Time: 01:00

HR: 100 bpm

STLevel(mm) STSlope(mV/s)

Stage: Recovery3

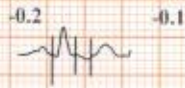
Speed: 0 kmph

Slope: 0 %

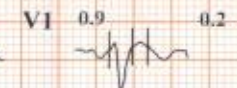
THR: 160 bpm

BP: 100/70 mmHg

STLevel(mm) STSlope(mV/s)



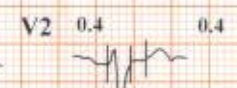
I



V1



II



V2



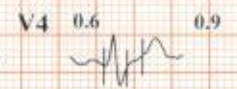
III



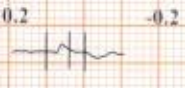
V3



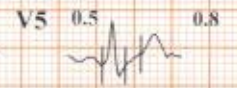
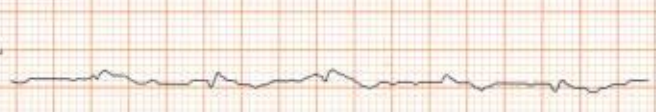
aVR



V4



aVL



V5



aVF

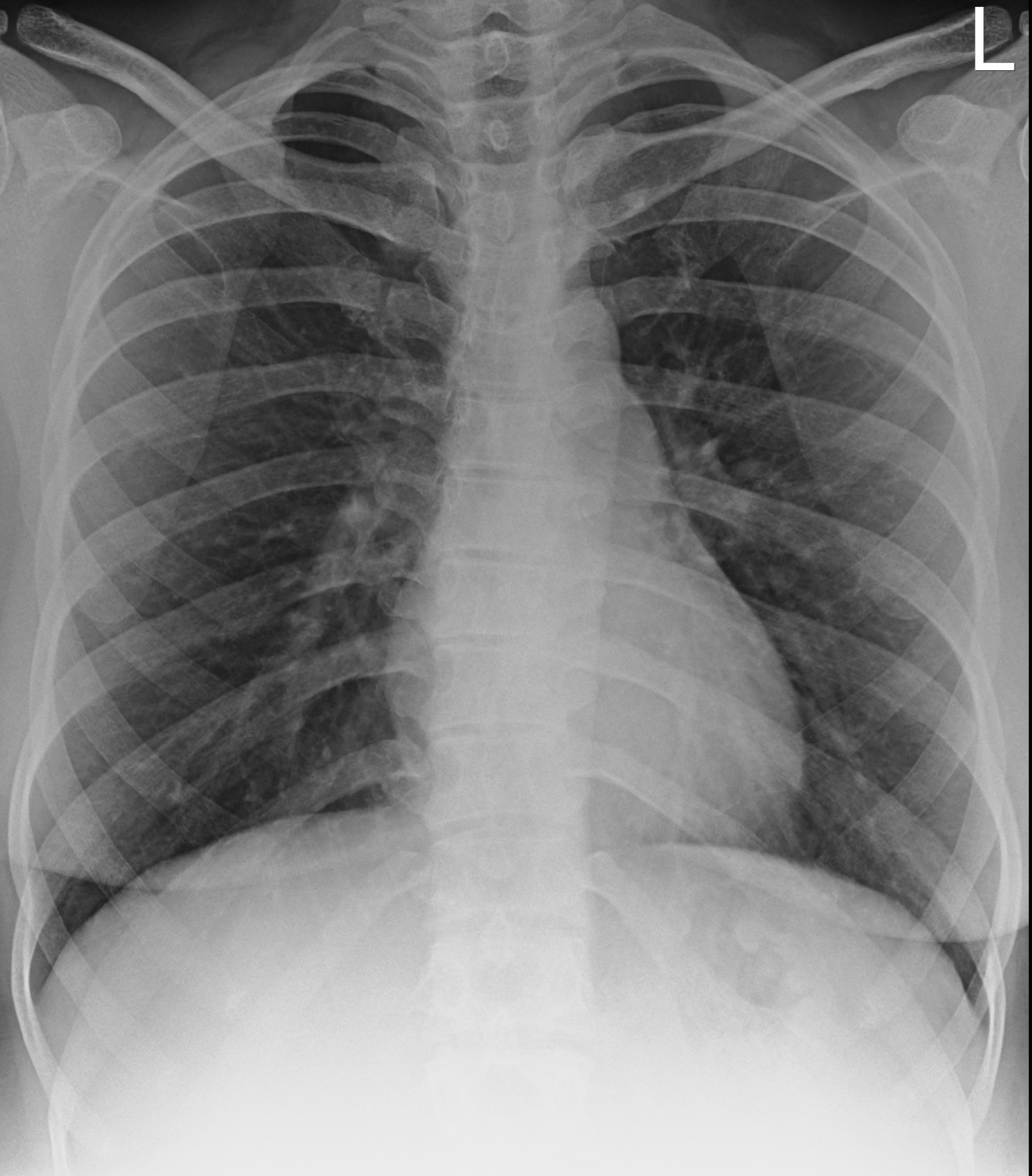


V6



II





GOWRI MANASHA PANTULA 31Y/F 10526231 CHEST PA 10-Jun-23

YODA DIAGNOSTICS



Visit ID	: YGT15351	UHID/MR No	: YGT.0000015226
Patient Name	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:53AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehrauli, N	Reported	: 10/Jun/2023 02:27PM
Hospital Name	:		

**DEPARTMENT OF RADIOLOGY****ULTRASOUND WHOLE ABDOMEN, PELVIS & MAMMOGRAM**

Clinical Details : General check-up.

LIVER : Normal in size 14.7cm and echo-texture. No focal lesion is seen. Intra hepatic biliary channels are not dilated.

GALL BLADDER : Minimally distended. No evidence of calculi / wall thickening. Visualised common bile duct & portal vein appears normal.

PANCREAS : Normal in size and outlines. Parenchymal texture normal. No ductal dilatation. No calcifications / calculi.

SPLEEN : Normal in size 10.13 cm and echotexture. No focal lesion is seen.

RIGHT KIDNEY : Measures 11.1 x 4.4 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

LEFT KIDNEY : Measures 11.7 x 4.9 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

URINARY BLADDER : Empty distended. No evidence of calculi or wall thickening.

UTERUS : Anteverted, measures 8 x 4.2 x 5.2 cm, normal in size. Myometrium shows normal echo-texture. No focal lesion is seen. Endometrial thickness is 3.6 mm normal.

Right ovary measures 2.8 x 1.5 cm. A 10 x 7 mm simple cyst noted in right paraovarian region.

Left ovary measures 2.6 x 1.7 cm.

Both ovaries are normal in size & echotexture.

No enlarged nodes are visualised. No retro-peritoneal lesion is identified. Great vessels appear normal.

No free fluid is seen in pelvis.

Verified By :  
SHARMILA



Approved By :

*Sushma Vuyyuru*  
Dr. SUSHMA VUYYURU  
MBBS; MD (Radio-Diagnosis)  
CONSULTANT RADIOLOGIST



Visit ID	: YGT15351	UHID/MR No	: YGT.0000015226
Patient Name	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:53AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 02:27PM
Hospital Name	:		

**DEPARTMENT OF RADIOLOGY****MAMMOGRAM:**

Glandular parenchyma appears normal.  
No evidence of focal mass lesions.  
No evidence of ductal dilatation.  
Nipple and areolar region appears normal.  
Skin thickness is normal.

**IMPRESSION:**

- SIMPLE RIGHT PARAOVARIAN CYST.
- NO SIGNIFICANT ABNORMALITY DETECTED IN MAMMOGRAM.

Suggested:- Clinical correlation & follow up.

Verified By :  
SHARMILA



Approved By :

*Sushma*  
Dr.SUSHMA VUYURU  
MBBS;MD(Radio-Diagnosis)  
CONSULTANT RADIOLOGIST



Visit ID	: YGT15351	UHID/MR No	: YGT.0000015226
Patient Name	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:53AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 02:16PM
Hospital Name	:		

**DEPARTMENT OF RADIOLOGY****CHEST X-RAY ( PA VIEW )****FINDINGS:**

Trachea is midline.  
Mediastinal outline, and cardiac silhouette are normal.  
Bilateral lung fields show normal vascular pattern with no focal lesion.  
Bilateral hila are normal in density.  
Bilateral costo-phrenic angles and domes of diaphragms are normal.  
The rib cage and visualized bones appear normal.

**IMPRESSION:**

- No significant abnormality detected.

Suggested clinical correlation and follow up

Verified By :  
SHARMILA



Approved By :

*Sushma Vuyyuru*  
Dr.SUSHMA VUYURU  
MBBS;MD(Radio-Diagnosis)  
CONSULTANT RADIOLOGIST



<b>Visit ID</b>	: YGT15351	UHID/MR No	: YGT.0000015226
<b>Patient Name</b>	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:54AM
Client Name	: MEDI WHEELS	Received	: 10/Jun/2023 08:23AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 09:30AM
Hospital Name	:		

**DEPARTMENT OF HAEMATOLOGY**

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

**ESR (ERYTHROCYTE SEDIMENTATION RATE)**

**Sample Type : WHOLE BLOOD EDTA**

ERYTHROCYTE SEDIMENTATION RATE	<b>20</b>	mm/1st hr	0 - 15	Capillary Photometry
--------------------------------	-----------	-----------	--------	-------------------------

**COMMENTS:**

ESR is an acute phase reactant which indicates presence and intensity of an inflammatory process. It is never diagnostic of a specific disease. It is used to monitor the course or response to treatment of certain diseases. Extremely high levels are found in cases of malignancy, hematologic diseases, collagen disorders and renal diseases.


Increased levels may indicate: Chronic renal failure (e.g., nephritis, nephrosis), malignant diseases (e.g., multiple myeloma, Hodgkin disease, advanced Carcinomas), bacterial infections (e.g., abdominal infections, acute pelvic inflammatory disease, syphilis, pneumonia), inflammatory diseases (e.g. temporal arteritis, polymyalgia rheumatic, rheumatoid arthritis, rheumatic fever, systemic lupus erythematosus [SLE]), necrotic diseases (e.g., acute myocardial infarction, necrotic tumor, gangrene of an extremity), diseases associated with increased proteins (e.g., hyperfibrinogenemia, macroglobulinemia), and severe anemias (e.g., iron deficiency or B12 deficiency).

Falsely decreased levels may indicate: Sick cell anemia, spherocytosis, hypofibrinogenemia, or polycythemia vera.

Verified By :  
SHARMILA



Approved By :

  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist



<b>Visit ID</b>	: YGT15351	UHID/MR No	: YGT.0000015226
<b>Patient Name</b>	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:54AM
Client Name	: MEDI WHEELS	Received	: 10/Jun/2023 08:23AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 11:03AM
Hospital Name	:		

**DEPARTMENT OF HAEMATOLOGY**

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

**BLOOD GROUP ABO & RH Typing**

**Sample Type : WHOLE BLOOD EDTA**

ABO	O			
Rh Typing	POSITIVE			

Method : Hemagglutination Tube method by forward and reverse grouping

**COMMENTS:**


The test will detect common blood grouping system A, B, O, AB and Rhesus (RhD). Unusual blood groups or rare subtypes will not be detected by this method. Further investigation by a blood transfusion laboratory, will be necessary to identify such groups.

Disclaimer: There is no trackable record of previous ABO & RH test for this patient in this lab. Please correlate with previous blood group findings. Advsieed cross matching before transfusion

Verified By :  
SHARMILA



Approved By :

  
**Dr. Sumalatha**  
 MBBS,DCP  
 Consultant Pathologist



<b>Visit ID</b>	: YGT15351	UHID/MR No	: YGT.0000015226
<b>Patient Name</b>	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:54AM
Client Name	: MEDI WHEELS	Received	: 10/Jun/2023 08:23AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 09:30AM
Hospital Name	:		

**DEPARTMENT OF HAEMATOLOGY**


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

**CBC (COMPLETE BLOOD COUNT)**
**Sample Type : WHOLE BLOOD EDTA**

HAEMOGLOBIN (HB)	<b>11.9</b>	g/dl	12.0 - 15.0	Cyanide-free SLS method
RBC COUNT (RED BLOOD CELL COUNT)	4.31	million/cmm	3.80 - 4.80	Impedance
PCV/HAEMATOCRIT	<b>33.6</b>	%	36.0 - 46.0	RBC pulse height detection
MCV	<b>77.9</b>	fL	83 - 101	Automated/Calculated
MCH	27.5	pg	27 - 32	Automated/Calculated
MCHC	<b>35.3</b>	g/dl	32 - 35	Automated/Calculated
RDW - CV	12.9	%	11.0-16.0	Automated Calculated
RDW - SD	40	fl	35.0-56.0	Calculated
MPV	8.3	fL	6.5 - 10.0	Calculated
PDW	15.7	fL	8.30-25.00	Calculated
PCT	0.25	%	0.15-0.62	Calculated
TOTAL LEUCOCYTE COUNT	6,440	cells/ml	4000 - 11000	Flow Cytometry
<b>DLC (by Flow cytometry/Microscopy)</b>				
NEUTROPHIL	53	%	40 - 80	Impedance
LYMPHOCYTE	38	%	20 - 40	Impedance
EOSINOPHIL	05	%	01 - 06	Impedance
MONOCYTE	04	%	02 - 10	Impedance
BASOPHIL	0	%	0 - 1	Impedance
PLATELET COUNT	3.00	Lakhs/cumm	1.50 - 4.10	Impedance

 Verified By :  
 SHARMILA


Approved By :

  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist



<b>Visit ID</b>	: YGT15351	UHID/MR No	: YGT.0000015226
<b>Patient Name</b>	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:54AM
Client Name	: MEDI WHEELS	Received	: 10/Jun/2023 08:23AM
Client Add	: F-701, Lado Sarai, Mehrauli, N	Reported	: 10/Jun/2023 09:56AM
Hospital Name	:		

**DEPARTMENT OF BIOCHEMISTRY**

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

**THYROID PROFILE (T3,T4,TSH)**
**Sample Type : SERUM**

T3	0.83	ng/ml	0.60 - 1.78	CLIA
T4	6.78	ug/dl	4.82-15.65	CLIA
TSH	4.24	uIU/mL	0.30 - 5.60	CLIA

**INTERPRETATION:**

- Serum T3, T4 and TSH are the measurements form three components of thyroid screening panel and are useful in diagnosing various disorders of thyroid gland function.
- Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values along with depressed TSH levels.
- Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
- Normal T4 levels accompanied by high T3 levels are seen in patients with T3 thyrotoxicosis. Slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.
- Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors (secondary hyperthyroidism).
- Low levels of Thyroid hormones (T3, T4 & FT3, FT4) are seen in cases of primary, secondary and tertiary hypothyroidism and sometimes in non-thyroidal illness also.
- Increased levels are found in Grave's disease, hyperthyroidism and thyroid hormone resistance.
- TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.

**9. REFERENCE RANGE :**

PREGNANCY	TSH in uIU/ mL
1st Trimester	0.60 - 3.40
2nd Trimester	0.37 - 3.60
3rd Trimester	0.38 - 4.04


(References range recommended by the American Thyroid Association)

**Comments:**

- During pregnancy, Free thyroid profile (FT3, FT4 & TSH) is recommended.
- TSH levels are subject to circadian variation, reaches peak levels between 2-4 AM and at a minimum between 6-10 PM. The variation of the day has influence on the measured serum TSH concentrations.

 Verified By :  
 SHARMILA


Approved By :

  
**Dr. Sumalatha**  
 MBBS,DCP  
 Consultant Pathologist



<b>Visit ID</b> : YGT15351	<b>UHID/MR No</b> : YGT.0000015226
<b>Patient Name</b> : Mrs. GOWRI MANASA PANTULA	<b>Client Code</b> : 1409
<b>Age/Gender</b> : 31 Y 0 M 0 D /F	<b>Barcode No</b> : 10526231
<b>DOB</b> :	<b>Registration</b> : 10/Jun/2023 07:53AM
<b>Ref Doctor</b> : SELF	<b>Collected</b> : 10/Jun/2023 07:54AM
<b>Client Name</b> : MEDI WHEELS	<b>Received</b> : 10/Jun/2023 08:23AM
<b>Client Add</b> : F-701, Lado Sarai, Mehravli, N	<b>Reported</b> : 10/Jun/2023 09:56AM
<b>Hospital Name</b> :	

**DEPARTMENT OF BIOCHEMISTRY**


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

**LIVER FUNCTION TEST(LFT)**

Sample Type : SERUM				
TOTAL BILIRUBIN	0.41	mg/dl	0.3 - 1.2	JENDRASSIK & GROFF
CONJUGATED BILIRUBIN	0.09	mg/dl	0 - 0.2	DPD
UNCONJUGATED BILIRUBIN	0.32	mg/dl		Calculated
S.G.O.T	18	U/L	< 35	KINETIC WITHOUT P5P-IFCC
S.G.P.T	15	U/L	< 35	KINETIC WITHOUT P5P-IFCC
ALKALINE PHOSPHATASE	53	U/L	30 - 120	IFCC-AMP BUFFER
TOTAL PROTEINS	6.9	gm/dl	6.0 - 8.0	Biuret
ALBUMIN	4.3	gm/dl	3.5 - 5.2	BCG
GLOBULIN	2.6	gm/dl		Calculated
A/G RATIO	1.65			Calculated

 Verified By :  
 SHARMILA


Approved By :

  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist



<b>Visit ID</b> : YGT15351	UHID/MR No : YGT.0000015226
<b>Patient Name</b> : Mrs. GOWRI MANASA PANTULA	Client Code : 1409
Age/Gender : 31 Y 0 M 0 D /F	Barcode No : 10526231
DOB :	Registration : 10/Jun/2023 07:53AM
Ref Doctor : SELF	Collected : 10/Jun/2023 07:54AM
Client Name : MEDI WHEELS	Received : 10/Jun/2023 08:23AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 10/Jun/2023 09:56AM
Hospital Name :	

**DEPARTMENT OF BIOCHEMISTRY**

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

**LIPID PROFILE**
**Sample Type : SERUM**

TOTAL CHOLESTEROL	196	mg/dl	See Table	Cholesterol oxidase/peroxidase
H D L CHOLESTEROL	43	mg/dl	> 40	Enzymatic/ Immunoinhibitor
L D L CHOLESTEROL	125.2	mg/dl	See Table	Enzymatic Selective Protein
TRIGLYCERIDES	139	mg/dl	See Table	GPO
VLDL	27.8	mg/dl	15 - 30	Calculated
T. CHOLESTEROL/ HDL RATIO	4.56		See Table	Calculated
TRIGLYCEIDES/ HDL RATIO	<b>3.23</b>	Ratio	< 2.0	Calculated
NON HDL CHOLESTEROL	<b>153</b>	mg/dl	< 130	Calculated

**Interpretation**

NATIONAL LIPID ASSOCIATION RECOMMENDATIONS (NLA-2014)	TOTAL CHOLESTEROL	TRI GLYCERIDE	LDL CHOLESTEROL	NON HDL CHOLESTEROL
Optimal	<200	<150	<100	<130
Above Optimal	-	-	100-129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220


REMARKS	Cholesterol : HDL Ratio
Low risk	3.3-4.4
Average risk	4.5-7.1
Moderate risk	7.2-11.0
High risk	>11.0

Note:

- Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol
- NLA-2014 identifies Non HDL Cholesterol (an indicator of all atherogenic lipoproteins such as LDL, VLDL, IDL, Lp(a), Chylomicron remnants) along with LDL-cholesterol as co-primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL & Non HDL.
- Apolipoprotein B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved
- Additional testing for Apolipoprotein B, hsCRP, Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

 Verified By :  
 SHARMILA


Approved By :

  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist



<b>Visit ID</b>	: YGT15351	UHID/MR No	: YGT.0000015226
<b>Patient Name</b>	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:54AM
Client Name	: MEDI WHEELS	Received	: 10/Jun/2023 08:23AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 09:56AM
Hospital Name	:		

**DEPARTMENT OF BIOCHEMISTRY**

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

**HBA1C**

**Sample Type : WHOLE BLOOD EDTA**

HBA1c RESULT	5.8	%	Normal Glucose tolerance (non-diabetic): <5.6% Pre-diabetic: 5.7-6.4% Diabetic Mellitus: >6.5%	HPLC
ESTIMATED AVG. GLUCOSE	120	mg/dl		

**Note:**


1. 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. Converse is true for a diabetic previously under good control but now poorly controlled .
2. 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.

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 .

Verified By :  
SHARMILA



Approved By :

  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist



<b>Visit ID</b> : YGT15351	UHID/MR No : YGT.0000015226
<b>Patient Name</b> : Mrs. GOWRI MANASA PANTULA	Client Code : 1409
Age/Gender : 31 Y 0 M 0 D /F	Barcode No : 10526231
DOB :	Registration : 10/Jun/2023 07:53AM
Ref Doctor : SELF	Collected : 10/Jun/2023 07:54AM
Client Name : MEDI WHEELS	Received : 10/Jun/2023 08:23AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 10/Jun/2023 09:56AM
Hospital Name :	

**DEPARTMENT OF BIOCHEMISTRY**

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

**BLOOD UREA NITROGEN (BUN)**

**Sample Type : Serum**

SERUM UREA	<b>12</b>	mg/dL	17 - 43	Urease GLDH
Blood Urea Nitrogen (BUN)	5.6	mg/dl	5 - 25	GLDH-UV

**Increased In:**

Impaired kidney function, Reduced renal blood flow {CHF, Salt and water depletion, (vomiting, diarrhea, diuresis, sweating), Shock}, Any obstruction of urinary tract, Increased protein catabolism, AMI, Stress

**Decreased In:**

Diuresis (e.g. with over hydration), Severe liver damage, Late pregnancy, Infancy, Malnutrition, Diet (e.g., low-protein and high-carbohydrate, IV feedings only), Inherited hyperammonemias (urea is virtually absent in blood)

**Limitations:**

Urea levels increase with age and protein content of the diet.

Verified By :  
SHARMILA



Approved By :

**Dr. Sumalatha**  
MBBS, DCP  
Consultant Pathologist



<b>Visit ID</b> : YGT15351	UHID/MR No : YGT.0000015226
<b>Patient Name</b> : Mrs. GOWRI MANASA PANTULA	Client Code : 1409
Age/Gender : 31 Y 0 M 0 D /F	Barcode No : 10526231
DOB :	Registration : 10/Jun/2023 07:53AM
Ref Doctor : SELF	Collected : 10/Jun/2023 07:54AM
Client Name : MEDI WHEELS	Received : 10/Jun/2023 08:23AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 10/Jun/2023 09:56AM
Hospital Name :	

**DEPARTMENT OF BIOCHEMISTRY**

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

**FBS (GLUCOSE FASTING)**

**Sample Type : FLOURIDE PLASMA**

FASTING PLASMA GLUCOSE	<b>102</b>	mg/dl	70 - 100	HEXOKINASE
------------------------	------------	-------	----------	------------

**INTERPRETATION:**

**Increased In**

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)

**Decreased In**

- Pancreatic disorders
- Extraprostatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

Verified By :  
SHARMILA



Approved By :

*Dr. Sumalatha*  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist



<b>Visit ID</b> : YGT15351	<b>UHID/MR No</b> : YGT.0000015226
<b>Patient Name</b> : Mrs. GOWRI MANASA PANTULA	<b>Client Code</b> : 1409
<b>Age/Gender</b> : 31 Y 0 M 0 D /F	<b>Barcode No</b> : 10526231
<b>DOB</b> :	<b>Registration</b> : 10/Jun/2023 07:53AM
<b>Ref Doctor</b> : SELF	<b>Collected</b> : 10/Jun/2023 11:48AM
<b>Client Name</b> : MEDI WHEELS	<b>Received</b> : 10/Jun/2023 12:02PM
<b>Client Add</b> : F-701, Lado Sarai, Mehravli, N	<b>Reported</b> : 10/Jun/2023 12:33PM
<b>Hospital Name</b> :	

**DEPARTMENT OF BIOCHEMISTRY**

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

**PPBS (POST PRANDIAL GLUCOSE)**

**Sample Type : FLOURIDE PLASMA**

POST PRANDIAL PLASMA GLUCOSE	87	mg/dl	<140	HEXOKINASE
------------------------------	----	-------	------	------------

**INTERPRETATION:**

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)


Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

Verified By :  
SHARMILA



Approved By :

  
**Dr. Sumalatha**  
 MBBS,DCP  
 Consultant Pathologist



<b>Visit ID</b> : YGT15351	<b>UHID/MR No</b> : YGT.0000015226
<b>Patient Name</b> : Mrs. GOWRI MANASA PANTULA	<b>Client Code</b> : 1409
<b>Age/Gender</b> : 31 Y 0 M 0 D /F	<b>Barcode No</b> : 10526231
<b>DOB</b> :	<b>Registration</b> : 10/Jun/2023 07:53AM
<b>Ref Doctor</b> : SELF	<b>Collected</b> : 10/Jun/2023 07:54AM
<b>Client Name</b> : MEDI WHEELS	<b>Received</b> : 10/Jun/2023 08:23AM
<b>Client Add</b> : F-701, Lado Sarai, Mehravli, N	<b>Reported</b> : 10/Jun/2023 09:56AM
<b>Hospital Name</b> :	

**DEPARTMENT OF BIOCHEMISTRY**

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

**SERUM CREATININE**

**Sample Type : SERUM**

SERUM CREATININE	0.58	mg/dl	0.51 - 0.95	KINETIC-JAFFE
------------------	------	-------	-------------	---------------

Increased In:

- Diet: ingestion of creatinine (roast meat), Muscle disease: gigantism, acromegaly,
- Impaired kidney function.

Decreased In:

- Pregnancy: Normal value is 0.4-0.6 mg/dL. A value >0.8 mg/dL is abnormal and should alert the clinician to further diagnostic evaluation.
- Creatinine secretion is inhibited by certain drugs (e.g., cimetidine, trimethoprim).

Verified By :  
SHARMILA



Approved By :

*Dr. Sumalatha*  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist



<b>Visit ID</b>	: YGT15351	UHID/MR No	: YGT.0000015226
<b>Patient Name</b>	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:54AM
Client Name	: MEDI WHEELS	Received	: 10/Jun/2023 08:23AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 09:56AM
Hospital Name	:		

**DEPARTMENT OF BIOCHEMISTRY**

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

**URIC ACID -SERUM**

**Sample Type : SERUM**

SERUM URIC ACID	3.4	mg/dl	2.6 - 6.0	URICASE - PAP
-----------------	-----	-------	-----------	---------------

Uric acid is the final product of purine metabolism in the human organism. Uric acid measurements are used in the diagnosis and treatment of numerous renal and metabolic disorders, including renal failure, gout, leukemia, psoriasis, starvation or other wasting conditions, and of patients receiving cytotoxic drugs.

Verified By :  
SHARMILA



Approved By :

*Dr. Sumalatha*  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist

<b>Visit ID</b> : YGT15351	<b>UHID/MR No</b> : YGT.0000015226
<b>Patient Name</b> : Mrs. GOWRI MANASA PANTULA	<b>Client Code</b> : 1409
<b>Age/Gender</b> : 31 Y 0 M 0 D /F	<b>Barcode No</b> : 10526231
<b>DOB</b> :	<b>Registration</b> : 10/Jun/2023 07:53AM
<b>Ref Doctor</b> : SELF	<b>Collected</b> : 10/Jun/2023 07:54AM
<b>Client Name</b> : MEDI WHEELS	<b>Received</b> : 10/Jun/2023 08:23AM
<b>Client Add</b> : F-701, Lado Sarai, Mehravli, N	<b>Reported</b> : 10/Jun/2023 09:56AM
<b>Hospital Name</b> :	

**DEPARTMENT OF BIOCHEMISTRY**

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

**BUN/CREATININE RATIO**

<b>Sample Type : SERUM</b>				
Blood Urea Nitrogen (BUN)	5.6	mg/dl	5 - 25	GLDH-UV
SERUM CREATININE	0.58	mg/dl	0.51 - 0.95	KINETIC-JAFFE
BUN/CREATININE RATIO	9.62	Ratio	6 - 25	Calculated

Verified By :  
SHARMILA



Approved By :

*Dr. Sumalatha*  
**Dr. Sumalatha**  
 MBBS,DCP  
 Consultant Pathologist




Visit ID	: YGT15351	UHID/MR No	: YGT.0000015226
Patient Name	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:53AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 02:02PM
Hospital Name	:		

**DEPARTMENT OF RADIOLOGY****2D ECHO DOPPLER STUDY**

MITRAL VALVE : Normal  
AORTIC VALVE : Normal  
TRICUSPID VALVE : Normal  
PULMONARY VALVE : Normal  
RIGHT ATRIUM : Normal  
RIGHT VENTRICLE : Normal  
LEFT ATRIUM : 2.6 cms  
LEFT VENTRICLE : EDD : 7.0 cm IVS(d) : 0.6cm LVEF : 65%  
ESD : 3.1 cm PW (d) : 4.3cm FS : 37%  
No RWMA  
IAS : Intact  
IVS : Intact  
AORTA : 2.0cms  
PULMONARY ARTERY : Normal  
PERICARDIUM : Normal  
IVS/ SVC : 3.1  
PULMONARY VEINS : Normal  
INTRA CARDIAC MASSES : No

Verified By :  
SHARMILA

Approved By :

  
**Dr. B. Nagaraju**  
MD (Internal Medicine)  
DN (CARDIOLOGY)  
APNC Reg. No 70760

Visit ID	: YGT15351	UHID/MR No	: YGT.0000015226
Patient Name	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:53AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 02:02PM
Hospital Name	:		

**DEPARTMENT OF RADIOLOGY****DOPPLER STUDY :**


MITRAL FLOW : E - 0.5m/sec, A - 0.5m/sec.  
AORTIC FLOW : 9.7m/sec  
PULMONARY FLOW : 7.6m/sec  
TRICUSPID FLOW : TRJV : m/sec, RVSP - mmHg  
**COLOUR FLOW MAPPING: MILD MR/ TRIVIAL TR/ NO PAH**

**IMPRESSION :**

- \* NORMAL SIZED CARDIAC CHAMBERS
- \* NO RWMA
- \* GOOD LV FUNCTION
- \* NORMAL LV FILLING PATTERN
- \* MILD MR/ NO AR/ PR
- \* TRIVIAL TR/ NO PAH
- \* NO PE/ CLOTS/ VEGETATION

**CONSULTANT CARDIOLOGIST**Verified By :  
SHARMILA

Approved By :

  
**Dr. B. Nagaraju**  
MD (Internal Medicine)  
DN (CARDIOLOGY)  
APNC Reg. No 70760



<b>Visit ID</b> : YGT15351	<b>UHID/MR No</b> : YGT.0000015226
<b>Patient Name</b> : Mrs. GOWRI MANASA PANTULA	<b>Client Code</b> : 1409
<b>Age/Gender</b> : 31 Y 0 M 0 D /F	<b>Barcode No</b> : 10526231
<b>DOB</b> :	<b>Registration</b> : 10/Jun/2023 07:53AM
<b>Ref Doctor</b> : SELF	<b>Collected</b> : 10/Jun/2023 07:54AM
<b>Client Name</b> : MEDI WHEELS	<b>Received</b> : 10/Jun/2023 08:23AM
<b>Client Add</b> : F-701, Lado Sarai, Mehrauli, N	<b>Reported</b> : 10/Jun/2023 10:23AM
<b>Hospital Name</b> :	

**DEPARTMENT OF CLINICAL PATHOLOGY**

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

**CUE (COMPLETE URINE EXAMINATION)**
**Sample Type : SPOT URINE**
**PHYSICAL EXAMINATION**

TOTAL VOLUME	30 ML	ml		
COLOUR	PALE YELLOW			
APPEARANCE	CLEAR			
SPECIFIC GRAVITY	1.010		1.003 - 1.035	Bromothymol Blue

**CHEMICAL EXAMINATION**


pH	5.0		4.6 - 8.0	Double Indicator
PROTEIN	NEGATIVE		NEGATIVE	Protein - error of Indicators
GLUCOSE(U)	NEGATIVE		NEGATIVE	Glucose Oxidase
UROBILINOGEN	NEGATIVE	mg/dl	< 1.0	Ehrlichs Reaction
KETONE BODIES	NEGATIVE		NEGATIVE	Nitroprasside
BILIRUBIN - TOTAL	NEGATIVE		Negative	Azo-coupling Reaction
BLOOD	NEGATIVE		NEGATIVE	Tetramethylbenzidine
LEUCOCYTE	NEGATIVE		Negative	by an azo-coupling reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization Reaction

**MICROSCOPIC EXAMINATION**

PUS CELLS	1-2	cells/HPF	0-5	
EPITHELIAL CELLS	2-4	/hpf	0 - 15	
RBCs	NIL	Cells/HPF	Nil	
CRYSTALS	NIL	Nil	Nil	
CASTS	NIL	/HPF	Nil	
BUDDING YEAST	NIL		Nil	
BACTERIA	NIL		Nil	
OTHER	NIL			

 Verified By :  
 SHARMILA


Approved By :

  
**Dr. Sumalatha**  
 MBBS, DCP  
 Consultant Pathologist

Visit ID	: YGT15351	UHID/MR No	: YGT.0000015226
Patient Name	: Mrs. GOWRI MANASA PANTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10526231
DOB	:	Registration	: 10/Jun/2023 07:53AM
Ref Doctor	: SELF	Collected	: 10/Jun/2023 07:54AM
Client Name	: MEDI WHEELS	Received	: 10/Jun/2023 08:23AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 10/Jun/2023 10:23AM
Hospital Name	:		

**DEPARTMENT OF CLINICAL PATHOLOGY**

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

**\*\*\* End Of Report \*\*\***Verified By :  
SHARMILA

Approved By :

**Dr. Sumalatha**  
MBBS, DCP  
Consultant Pathologist