

భారత ప్రభుత్వం
Government of India

మండమూరి సత్య సాయి తేజ
Yandamuri Satye Sai Teja
పుట్టిన తేదీ/DOB: 07/12/1989
పురుషుడు/ MALE

3327 3632 3498
VID : 9109 6196 3927 8623
నా ఆధార్, నా గుర్తింపు



Name : MR. YANDAMURI SATYA SAI TEJA
Age /Sex : 31 Y / M
Ref. By : BANK OF BARODA (MW)

Reg. No : O23-2494
Registration Date : 19-12-2022
Alt ID : 8309600828

Ultrasound Scan Abdomen

- Liver** Size (132 mm), Shape, contour normal with increased echotexture . No localized or diffused mass lesions are seen. Intrahepatic vascular system, Portal vein, C.B.D and biliary radicals are normal
- Gall Bladder** Size, shape and wall thickness are normal. No calculus or no mass lesions are seen.
- Spleen** Size : 113 mm, Shape and echotexture normal, No abnormal calcifications seen.
- Pancreas** Head, body and tail echotexture are normal. Pancreatic duct normal. No mass or cystic lesions seen. No calcifications are seen.
- Kidneys** Right kidney Measures : 102 X 46 mm
Left kidney Measures : 102 X 48 mm
Peri renal areas normal, Renal capsule normal, Cortical thickness, Cortical echopattern and corticomedullary differentiation are normal. Pelvicalyceal system normal. No calculus or no mass lesions are seen.
- Urinary Bladder** Well distended, Normal wall thickness. No evidence of calculi. No focal lesions.
- Prostate** Size , Echotexture normal. No calcification seen.
Volume - 17 cc.
- Others** Aorta and IVC are normal. No lymphadenopathy. No ascitis.
- Impression** - GRADE - I FATTY LIVER.
Advice - Correlate Clinically.

Dr AZAM
Radiologist

ID : 119
Year : 60
Sex : Male
Weight : 60 kg
Height : 160 cm

Diagnosis Information:
Sinus Arrhythmia
Slight ST Elevation(V4,V5,V6)
Left Ventricular Hypertrophy

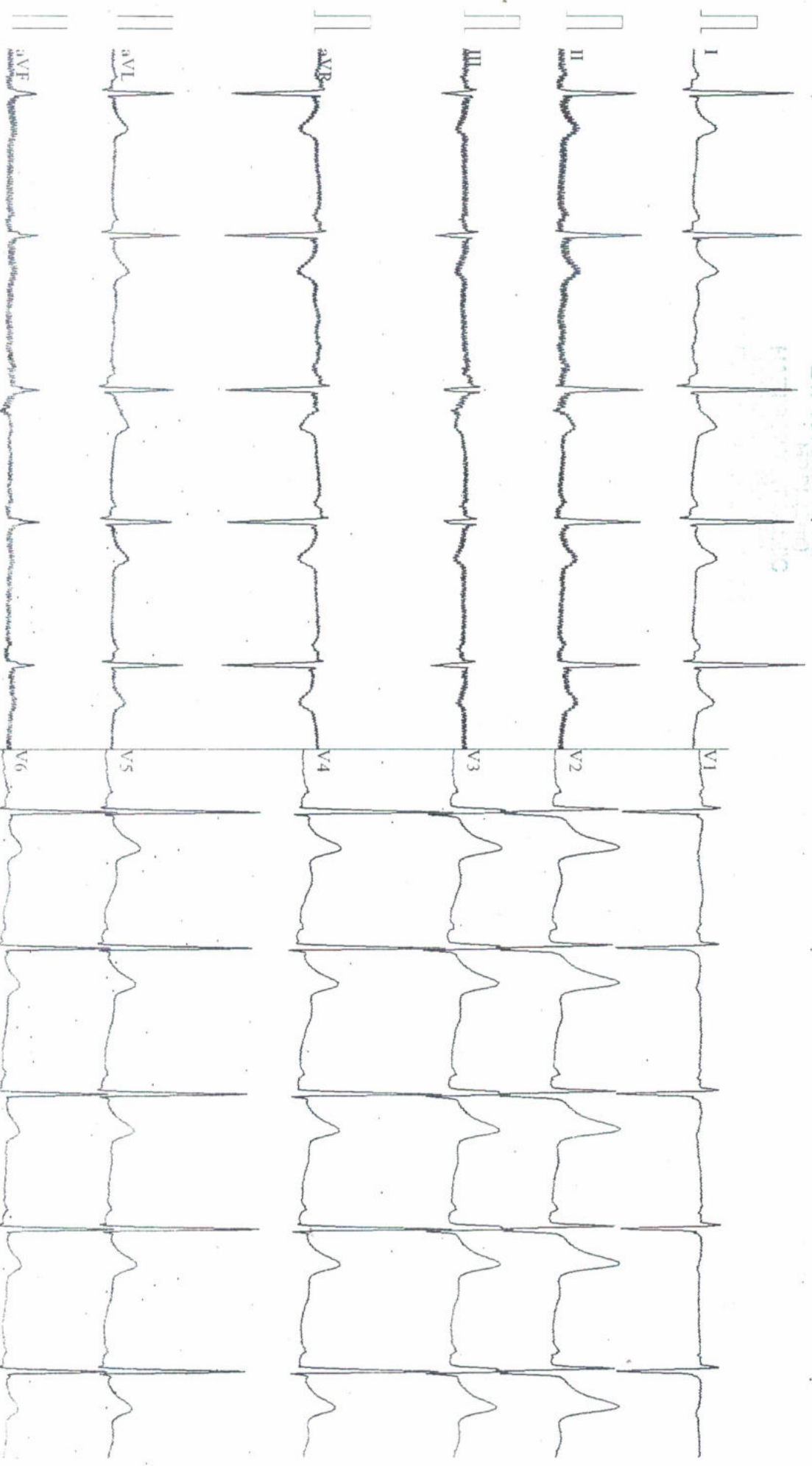
NSR

Dr. V. HARRAM

O23-2494 M/31 Y
MR. YANDAMURI SATYA SAITE
Aditya Diagnostics +9-12-2022

Technician :
Ref-Phys :
Report Confirmed by:

TO BE CORRELATED
CLINICALLY



0.67 100Hz AC50 25mm/s 10mm/mV 2*5s 460 SE-401 V105 SEMIP V181

19-01-2023 09:18:29 AM



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X-RAY CHEST PA VIEW

- Hilar regions are normal.
- Both C P angles are free.
- Domes of diaphragms are normal.
- Bony cage is normal
- Cardio thoracic ratio is normal.
- Lung - clear. No Evidence of any Signs of active Tuberculosis

IMPRESSION :

**** NORMAL STUDY**

Dr. Ravi Krishna

Consultant Radiologist



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Investigation

Result

Normal Ranges

HAEMOGRAM

Investigation

Result

Normal Range

Haemoglobin	13.4 gm%	Male : 14.0 - 18.0 gm % Female : 11.5 - 16.0 gm % Children : 12 - 14 gm%
R B C mil/cmm	4.6 mil/cmm	Male : 4.5 - 6.5 mil/cmm Female : 4.0 - 5.5 mil/cmm
Packed Cell volume (PCV)	42 %	Male : 40 - 54 % Female : 36 - 49 %
MCV	80 Cubic microns	76 - 96 Cubic microns
MCH	26 Picograms	27- 32 Picograms
MCHC	31 gm%	30 - 36 gm%
WBC (Total)	7,000 cells/cmm	4,000 - 11,000 cells/cmm

DIFFERENTIAL COUNT

Neutrophils (Polymorphs)	66 %	Adults : 40 - 75 % Children : 36- 50 %
Lymphocytes	30 %	Adults : 20 - 40 % Children : 36- 50 %
Eosinophils	02 %	1 - 6 %
Monocytes	02 %	2 - 10 %
Basophils	00 %	00 - 01 %
Platelet count	2,97,000 cells/cmm	1,50,000 - 4,00,000 cells/cmm
ESR 1st Hour	06 mm/hour	Male : 0 - 10 mm / hour Female : 0 - 14 mm / hour
Reticulocyte count	0.8 %	0.5 - 1.0 %

PERIPHERAL SMEAR EXAMINATION

RBC's Morphology	Normocytic / Normochromic
WBC	With in normal limits
Plateletes	Adequate
Abnor.nal Cells	Nil

Method : Automated Cellcounter&Microscopy

Dr Rajani Gutta, PhD
Chief Biochemist

* End of Report *

Verified by

Dr S Ramadevi, MD
Consultant Pathologist



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Investigation

Result

Reference Range

Fasting Plasma Glucose *
Blood Sugar
Method GOD-POD

110 mg/dl

70 - 110 mg/dl

Post Prandial Glucose *
(Blood Sugar)
Method GOD-POD

146 mg/dl

70 - 160 mg/dl

* End of Report *

Dr Rajini G, PhD
Chief Biochemist

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Investigation

Result

Reference Range

Liver Function Tests

Total Bilirubin (Method: Walter &Gerarde)	: 1.05 mg/dl	0.3 - 1.2 mg/dl
Direct Bilirubin (Conjugated) (Method: Walter &Gerarde)	: 0.36 mg/dl	0.0 - 0.2 mg/dl
Indirect Bilirubin (Unconjugated)	: 0.69 mg/dl	
Alkaline Phosphatase (Method: GSCC)	: 58 U/L	Male : 53 - 128 U/L Female : 42 - 98 U/L Children : 54 - 369 U/L
SGPT (Method: IFCC)	: 35 IU/L	UP TO 55 IU/L
SGOT (Method: IFCC)	: 24 IU/L	UP TO 55 IU/L
Total Proteins (Method: Biuret)	: 7.9 gm/dl	6.0 - 8.3 gm/dl
Albumin (Method: BCG)	: 4.2 gm/dl	3.5 - 5.2 gm/dl
Globulin (Method: Calculated)	: 3.7 gm/dl	
A/G Ratio	1.14	
Gamma GT IFCC Method	50 U/L	Male : 10 - 50 U/L Female : 7 - 35 U/L

Lab Incharge

* End of Report *

Dr Rajini G, PhD
Chief Biochemist

Verified by

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Consultant Pathologist



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Investigation

Result

Reference Range

Lipid Profile

Total Cholesterol *
Method CHOD-POD

261 mg/dL

Normal : < 200 mg/dL
Borderline High : 200 - 239 mg/dL
High : > 240 mg/dL

Serum Triglycerides *
Method GPO - POD

281 mg/dL

Normal : < 150 mg/dL
Borderline High : 150 - 199 mg/dL
High : 200 - 499 mg/dL
Very High : =/> 500 mg/dL

H D L Cholesterol *
Method Direct CHOD-PAD

34 mg/dL

Low : < 40
High : > 60

L D L Cholesterol *
Method Calculated

170.8 mg/dL

Optimal : < 100
Borderline High : 130 - 159
High : 160 - 189
Very High : =/> 190

V L D L Cholesterol *
Method Calculated

56.2 mg/dL

10 - 30 mg/dL

TC / HDL Cholesterol Ratio *
Method Calculated

7.68 Ratio

3.0 - 5.0 Ratio

LDL / HDL Ratio *
Method Calculated

5.02 Ratio

1.5 - 3.5 Ratio

* End of Report *

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Investigation

Result

Reference Range

Serum Creatinine *
Method Enzymatic

0.7 mg/dl

Male : 0.7 - 1.3 mg/dl
Female : 0.6 - 1.1 mg/dl
New Born 1 - 4 days : 0.3 - 1.0 mg/dl
Infant (upto 1year) : 0.2 - 0.4 mg/dl
Children : 0.3 - 0.7 mg/dl

Blood Urea *
Method GLDH

21 mg/dl

10 - 50 mg/dl

Blood Urea Nitrogen *
Calculated

9.8 mg/dl


6 - 25.5 mg/dl

Serum Uric Acid *
Method:Uricase POD


8.0 mg/dl

Male : 3.5 - 7.2 mg/dl
Female : 2.6 - 6.0 mg/dl

* End of Report *


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Investigation

Result

Reference Range

% HbA1c (Glycosylated Haemoglobin)
(Method: HPLC-NGSP Certified)

5.3 %

< 6.0 : Pre Diabetic
6-7 : Good Control
7-8 : Weak Control
> 8.0 : Poor Control

Intpretation :

HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.

Mean Plasma Glucose mg/dl = (HbA1c x 35.6) - 77.3)

Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only .81 (1.0 would be a straight line, which has "perfect" correlation...) This means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control.

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Chief Biochemist

* End of Report *

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Investigation

Result

Normal Ranges

Trilodothyronine Total (TT3)	: 106 ng/dL	60 - 200 ng/dL
Thyroxine - Total (TT4)	: 9.05 µg/dl	4.5 - 12.0 µg/dl
Thyroid Stimulating Hormone(TSH)	: 2..60 µIU/ml	0.3 - 5.5 µIU/ml
Method: C.L.I.A		


Interpretation

Primary malfunction of the thyroid gland may result in excessive (hyper) or below normal (hypo) release of T3 or T4. In addition, as thyroid function is directly affected by TSH.

Diagnostically, T3 concentration is more sensitive to certain thyroid conditions than T4. While T4 levels are a sensitive (and superior) indicator of hypothyroidism, T3 blood levels better define hyperthyroidism.


Because T3 concentration in serum changes faster and more markedly than T4, the T3 level is also an excellent indicator of the ability of the thyroid to respond to both stimulatory and suppressive tests. Under conditions of strong thyroid stimulation, the T3 level offers a good.

It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.


Dr Rajani Gutha, PhD
Chief Biochemist

* End of Report *


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Investigation

Result

Complete Stool Examination

PHYSICAL EXAMINATION

Colour : Brownish Yellow
Appearance : Semisolid
Mucus : Absent
Blood : Absent
Reaction : Alkaline

CHEMICAL EXAMINATION

REDUCING SUBSTANCES :

MICROSCOPIC EXAMINATION

OVA : Absent
CYST : Absent
PUS Cells : Occasional
RBCs : NIL
Epithelial Cells : NIL
FAT : Absent
Starch : Absent
Fungal Elements : Absent
Others : NIL

* End of report *

Dr Rajani Gutha
Chief Biochemist

Verified by

D RS Ramadevi, MD
Consultant Pathologist



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Investigation

Result

Complete Urine Examination

Investigation

Result

PHYSICAL EXAMINATION

Colour : Pale Yellow
Apperance : Clear
Reaction : Acidic
Specific Gravity : 1.015

CHEMICAL EXAMINATION

Albumin : Nil
Glucose : Nil

MICROSCOPIC EXAMINATION

Pus Cells : 2 - 4 /HPF
Epithelial Cells : 2 - 3 /HPF
RBC : Nil /HPF
Crystals : Nil
Casts : Nil
Bacteria : Nil
Others : Nil

* End of report *

Dr Rajani Gutha
Chief Biochemist

Verified by

Dr RS Ramadevi, MD
Consultant Pathologist

Protocol : BRUCE

Medication : NO
Ref. By : BANK OF BARODA

Objective :
History :

Stage	Stage Time (Min:Sec)	Phase Time (Min:Sec)	Speed (mph)	Grade (%)	METS	H.R. (bpm)	B.P. (mm-Hg)	R.P.P. x100	PVC	Comments
Supine					1.0	97	130/80	126	-	
Standing					1.0	97	130/80	126	-	
HV					1.0	94	130/80	122	-	
ExStart					1.0	98	130/80	127	-	
Stage 1	3:00	3:01	1.7	10.0	4.7	126	130/90	163	-	
Stage 2	3:00	6:01	2.5	12.0	7.1	153	140/90	214	-	
PeakEx	1:00	7:00	3.4	14.0	8.1	167	140/90	233	-	
Recovery	1:00		0.0	0.0	1.2	129	140/90	180	-	
Recovery	2:00		0.0	0.0	1.0	108	130/90	140	-	
Recovery	3:00		0.0	0.0	1.0	115	130/80	149	-	
Recovery	3:02		0.0	0.0	1.0	118	130/80	153	-	

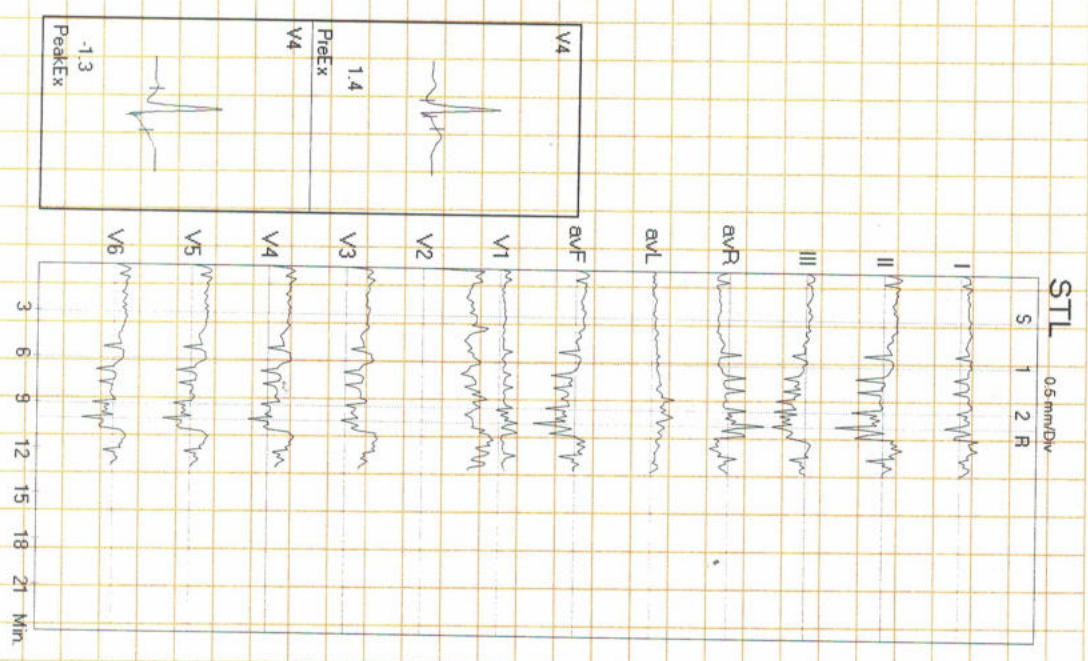
Findings :

Exercise Time : 07:00
Max HR Attained : 167 bpm 88% of Target 189
Max BP : 140/90 (mmHg)
Max WorkLoad attained : 8.1 (Fair Effort Tolerance)

TMTIS Negative FOR INDUCIBLE ISCHEMIA

Advice/Comments:

D. V. HARRIS
MD, DPL(Card)
HARRIS HEART CLINIC
1511 East 10th Ave, Suite 201
Denver, CO 80218
Tel: 303.733.2277



31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

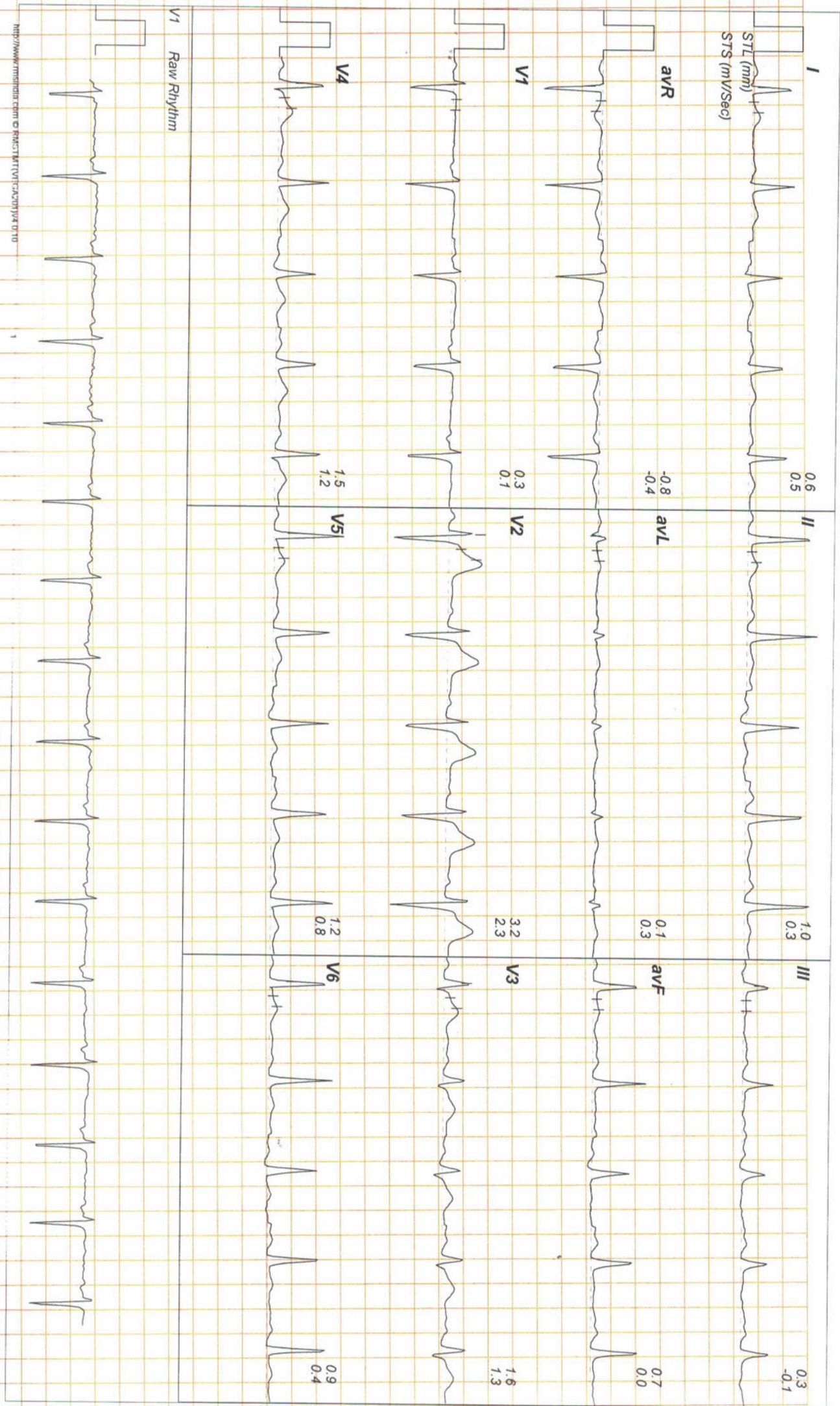
METS: 1.0
BP: 130/80

Speed: 11.0 mph,
Grade: 0.0%

(0.05-100)Hz

ECG Limb 01 01
BLC: On
Notch: On

SUPINE
1.0 Cm/mV
25 mm/Sec.



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232431 / Y SAI YA SAI TEJA
31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

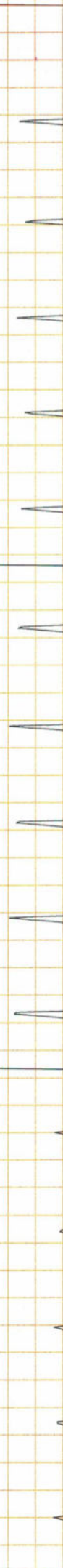
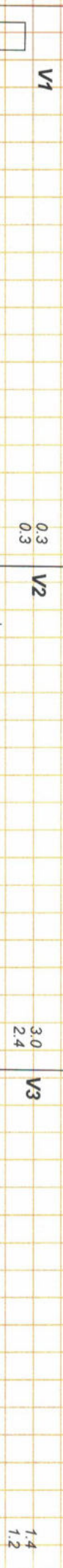
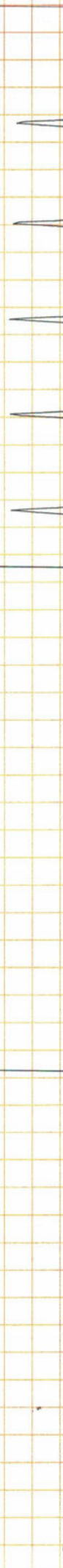
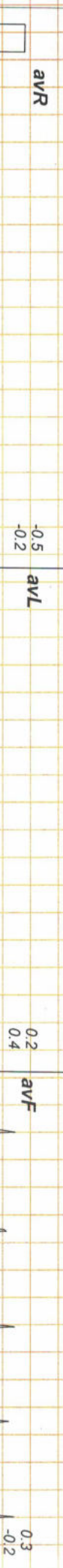
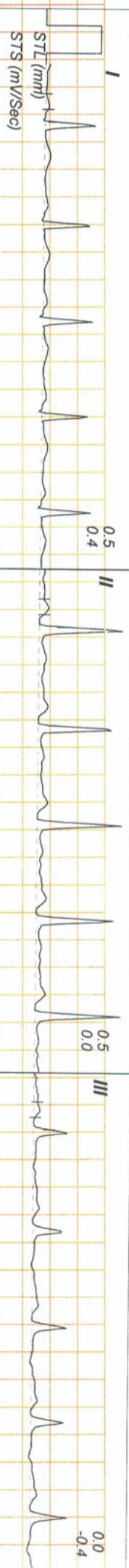
HR: 98 bpm
METs: 1.0
BP: 130/80

Tgt HR: 51% of 189
Speed: 11.0 mph,
Grade: 0.0%

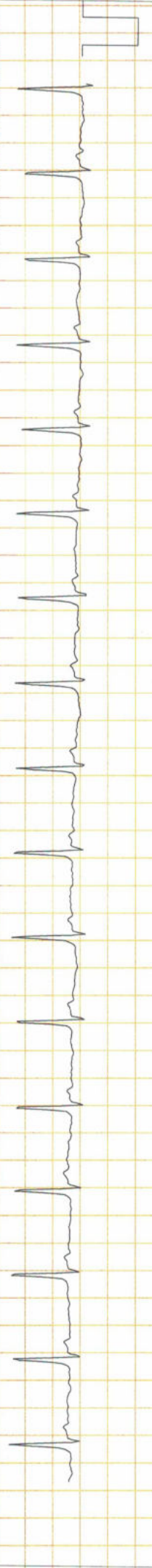
(0.05-100)Hz

Ex Time 02:00
BLC: On
Notch: On

STANDING
1.0 Cm/mV
25 mm/Sec.



V1 Raw Rhythm



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2

232431 / Y SAI YA SAI LEJA
31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

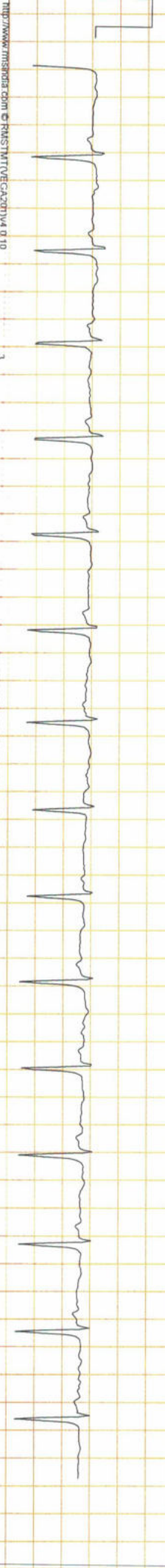
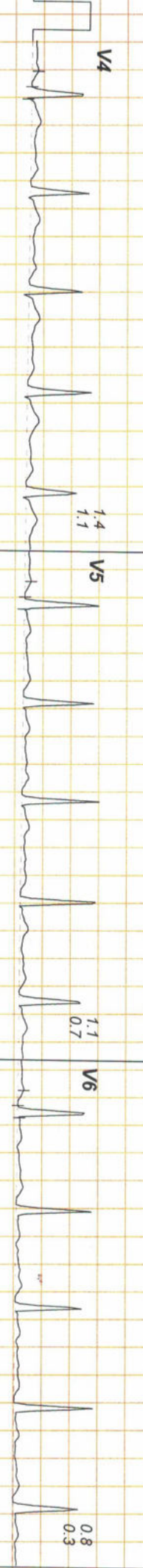
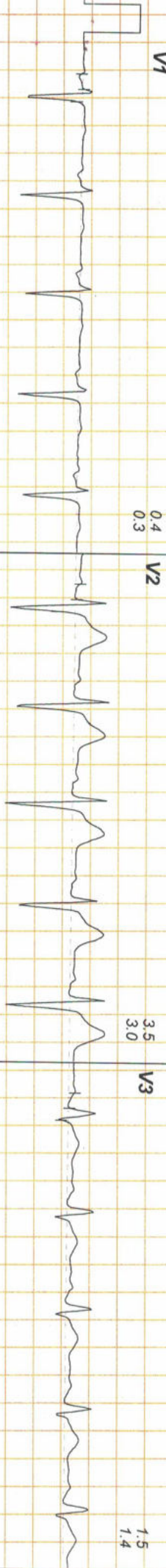
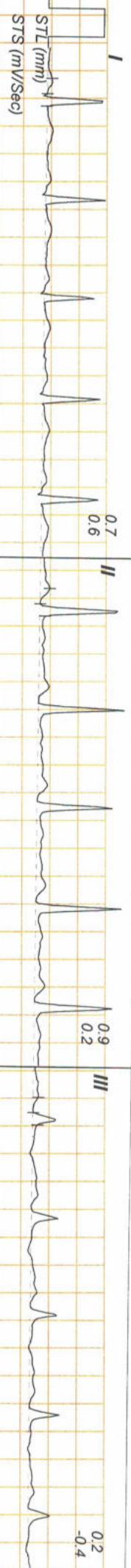
HR: 94 bpm
METS: 1.0
BP: 130/80

Tgt HR: 49% of 189
Speed: 11.0 mph,
Grade: 0.0%

(0.05-100)Hz

Ex Time 03:00
BLC: On
Notch: On

HV
1.0 Cm/mV
25 mm/Sec.



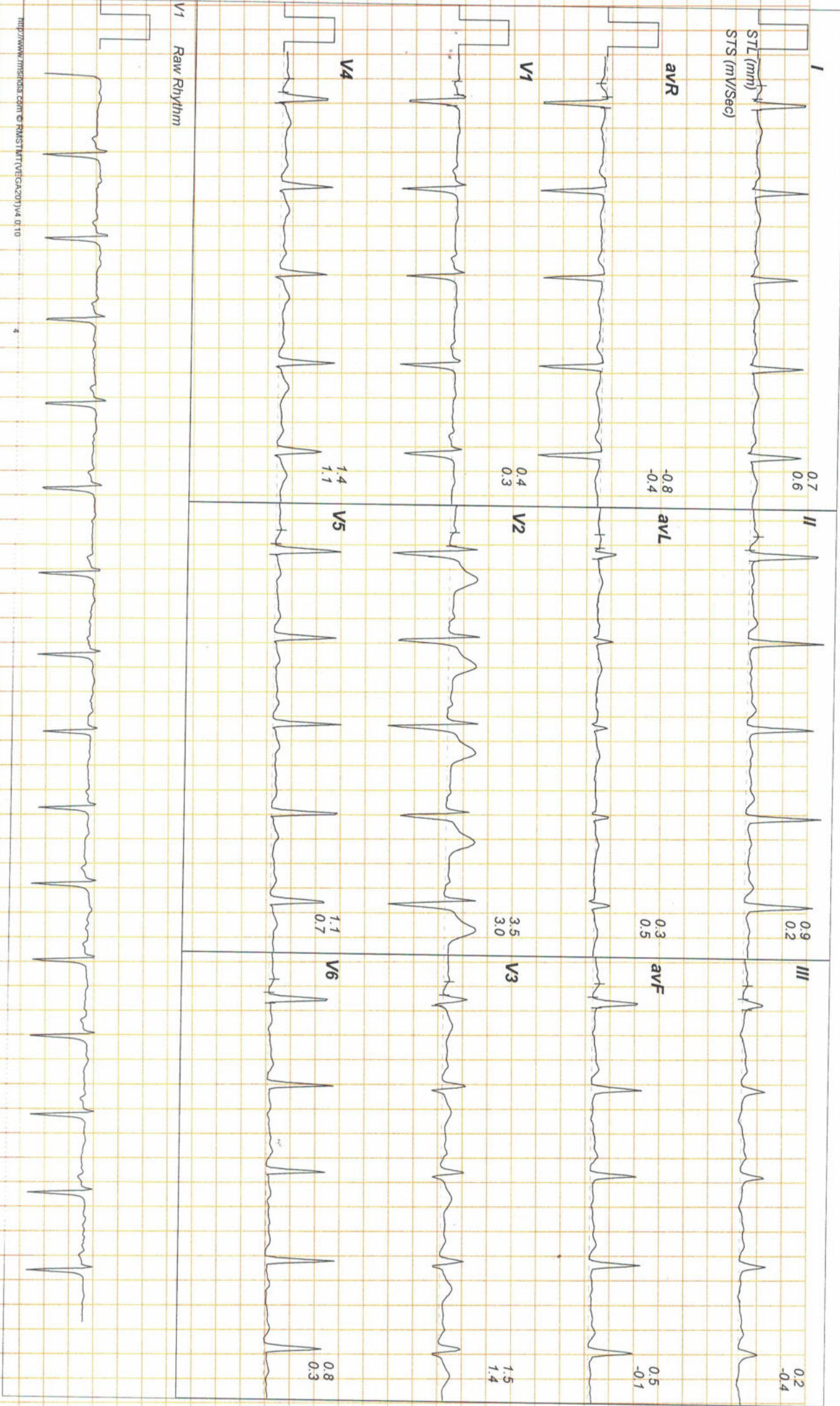
31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

METS: 1.0
BP: 130/80
Speed: 11.0 mph,
Grade: 10.0%

(0.05-100)Hz

Ex Time 00:00
BLC: On
Notch: On

ExStit
1.0 Cm/mV
25 mm/Sec.



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31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

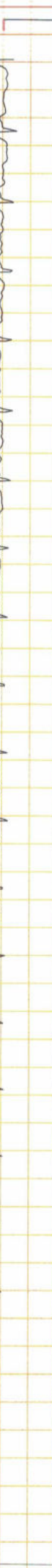
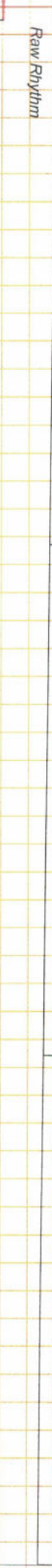
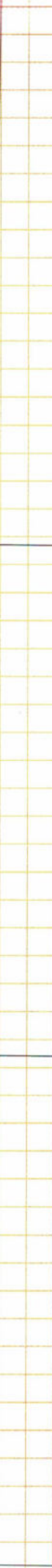
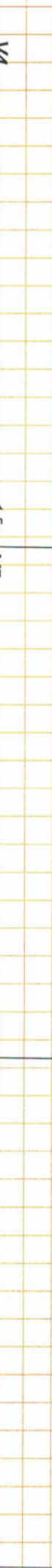
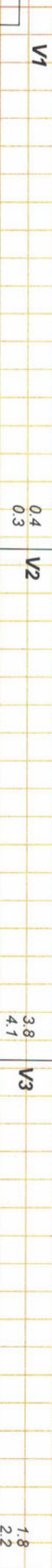
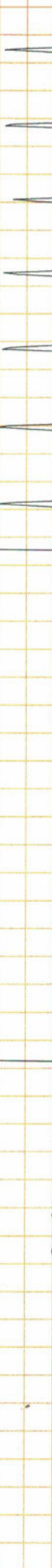
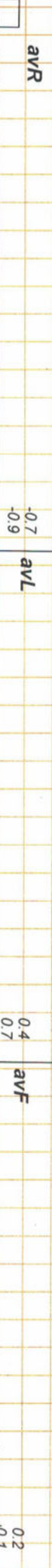
HR: 120 bpm
METs: 4.7
BP: 130/90

Reg HR: 66% of 189
Speed: 17.0 mph,
Grade: 10.0%

(0.05-100)Hz

Ex Time 03:00
BLC: On
Notch: On

Stage 1 (03:00)
1.0 Cm/mV
25 mm/Sec.



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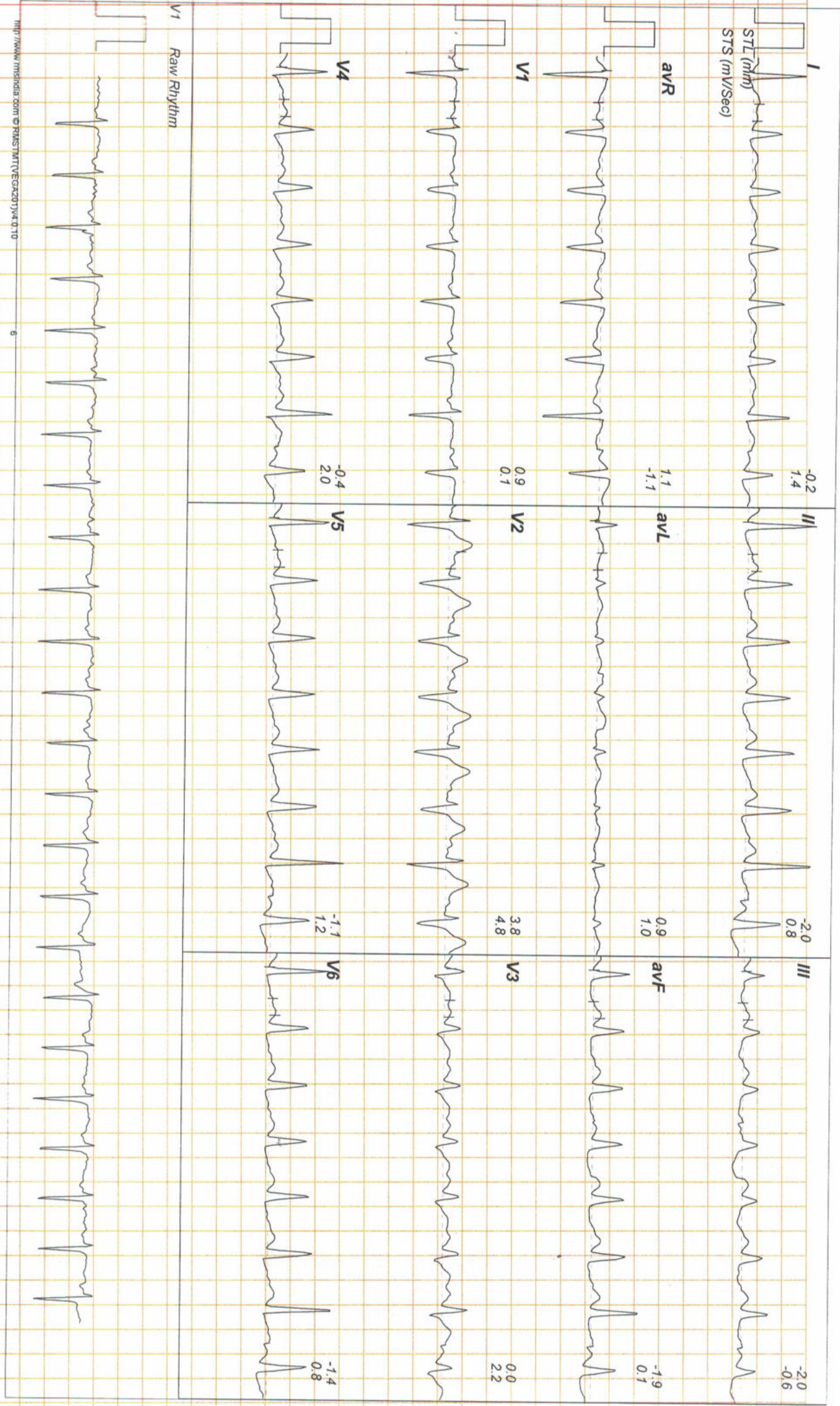
31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

METS: 7.1
BP: 140/90
Speed: 25.0 mph,
Grade: 12.0%

(0.05-100)Hz

Ex Time 06:00
BLC: On
Notch: On

Stage 2 (03:00)
1.0 Cm/mV
25 mm/Sec.



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31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

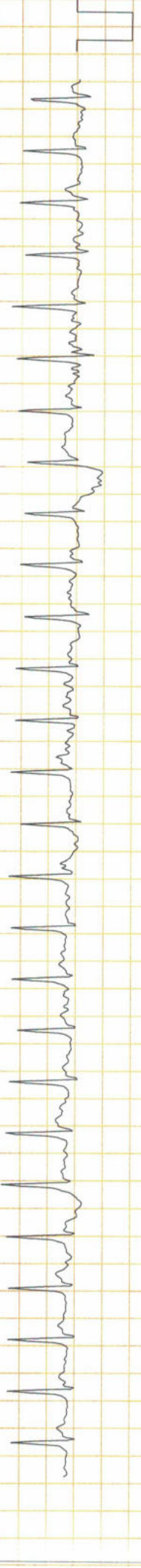
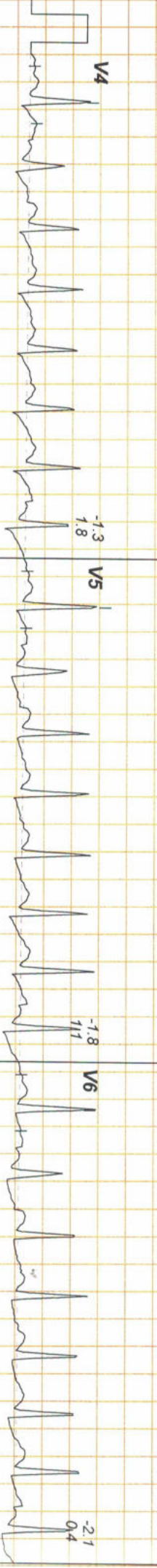
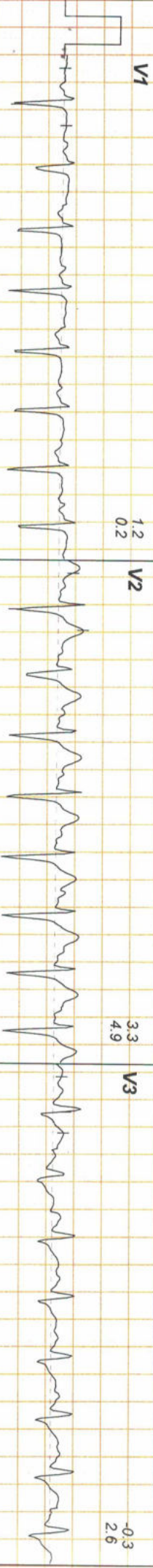
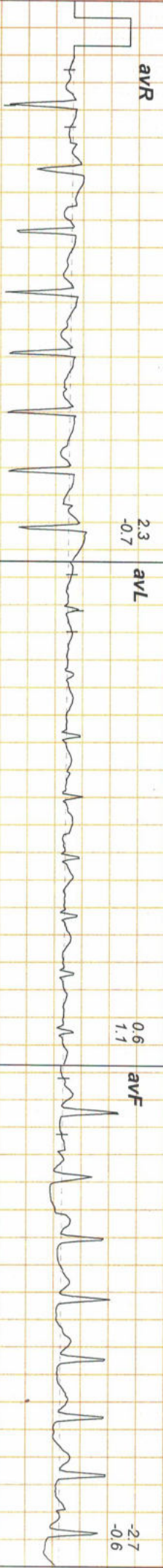
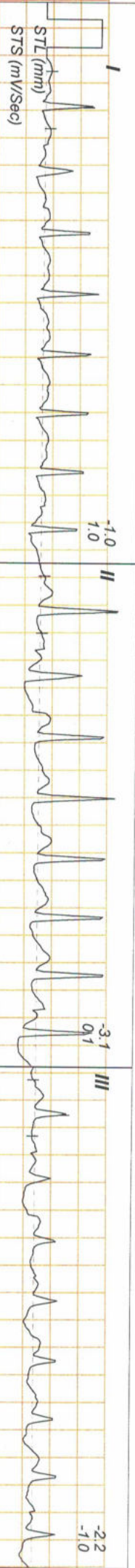
METS: 8.1
BP: 140/90

Speed: 34.0 mph,
Grade: 14.0%

(0.05-100)Hz

Ex Time 06:59
BLC: On
Notch: On

PeakEx
1.0 Cm/mV
25 mm/Sec.



V1 Raw Rhythm

7

http://www.instron.com © RASTINTVEGACDT1V4 0 10

31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

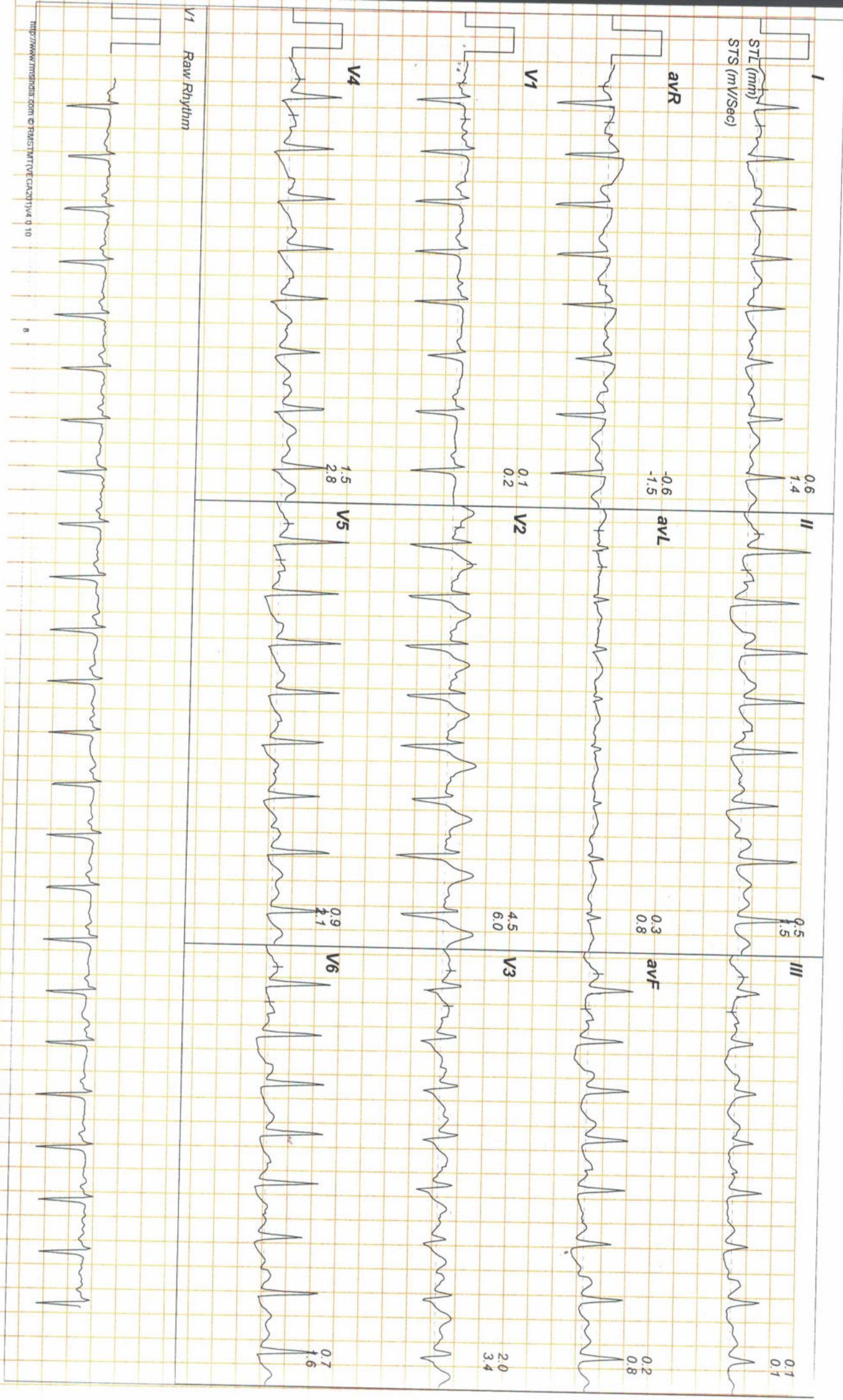
HR: 129 bpm
METs: 1.1
BP: 140/90

Light HR 68% of 189
Speed: 0.0 mph,
Grade: 0.0%

(0.05-100)Hz

Ex Time 06:59
BLC: On
Notch: On

Recovery : (00:59)
1.0 Cm/mV
25 mm/Sec.



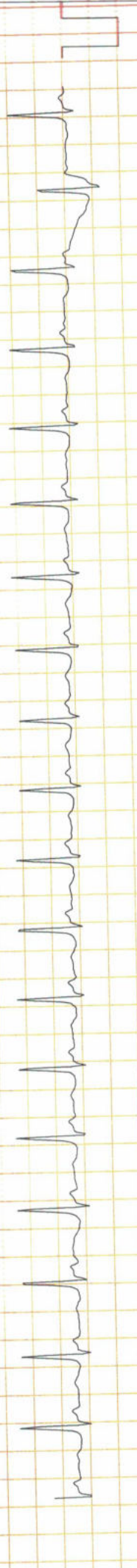
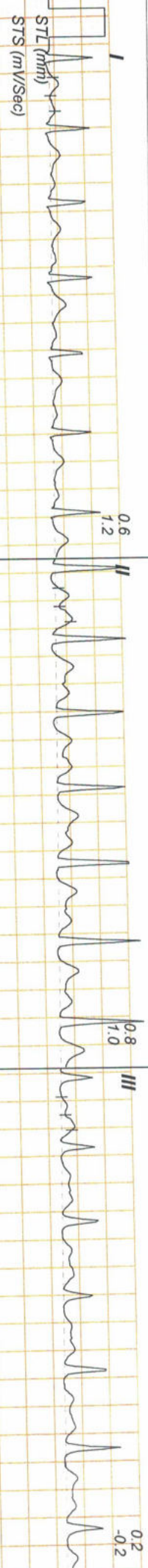
http://www.rmsindia.com © RMSI™TVECA2D1V4 0 10

232437 / Y SATYA SAI TEJA
31 Yrs / Male
77 Kg / 175 Cm/
Date: 20-Dec-2022 10:58:11 AM

HR: 108 bpm
METs: 1.0
BP: 130/90
Tgt HR 57% of 189
Speed: 0.0 mph,
Grade: 0.0%

(0.05-100)Hz
LX (mm) 0.5
BLC: On
Notch: On

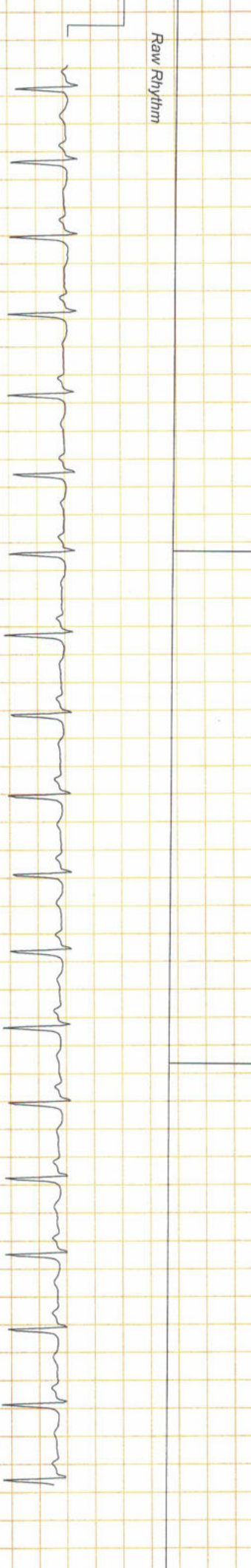
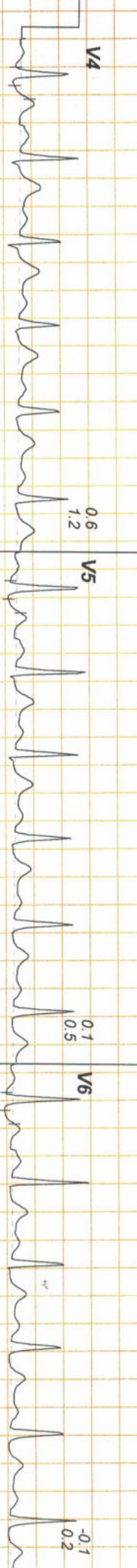
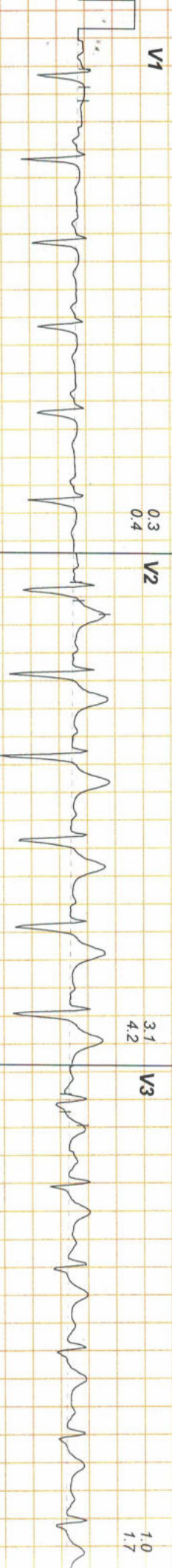
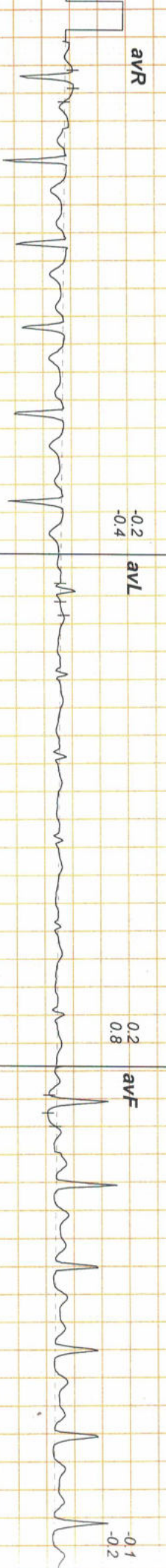
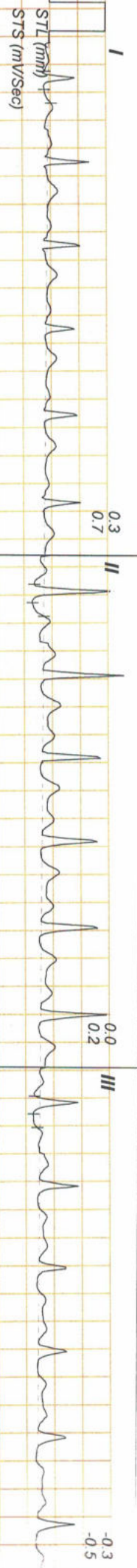
Recovery: (01:35)
1.0 Cm/1mV
25 mm/Sec.



232437 / Y SATYA SAI TEJA
 31 Yrs / Male
 77 Kg / 175 Cm/
 Date: 20-Dec-2022 10:58:11 AM

HR: 115 bpm
 METS: 1.0
 BP: 130/80
 Tgt HR: 60% of 189
 Speed: 0.0 mph
 Grade: 0.0%
 (0.05-100)Hz

Ex Time 06:59
 BLC : On
 Notch : On
 Recovery : (02:59)
 1.0 Cm/mV
 25 mm/Sec.



V1 Raw Rhythm

<http://www.rmsmed.com> © RMS1MTRV(CAC201)VA 0.10

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