

Medall



# NETHRADHAMA SUPER SPECIALITY EYE HOSPITAL

(A Unit of Nethradhama Hospitals Pvt. Ltd.)

## OPD SHEET

Date: 12/11/22

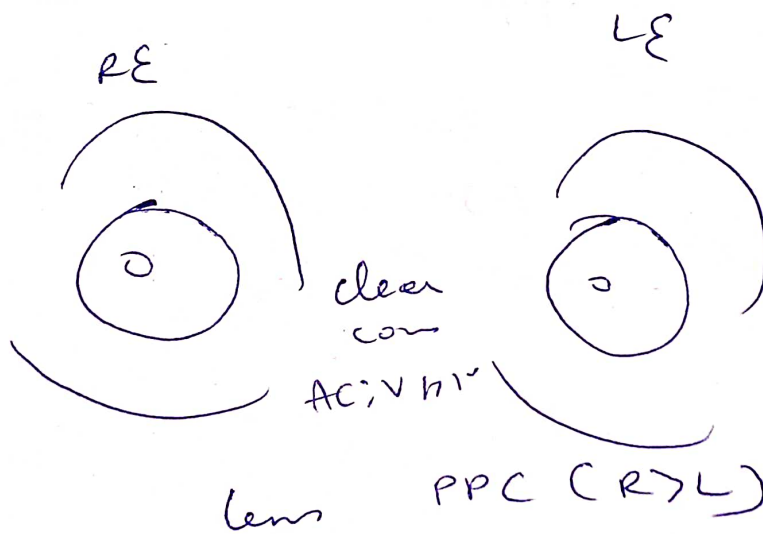
Patient's Name: Mr. Uday Kumar MB  
48 y M

OP No. 1218795  
12:40 Pm

**Dr. Priya. D**  
M.B.B.S.,  
Consultant Glaucoma & Cataract  
KMC No. 88421

for medical checkup

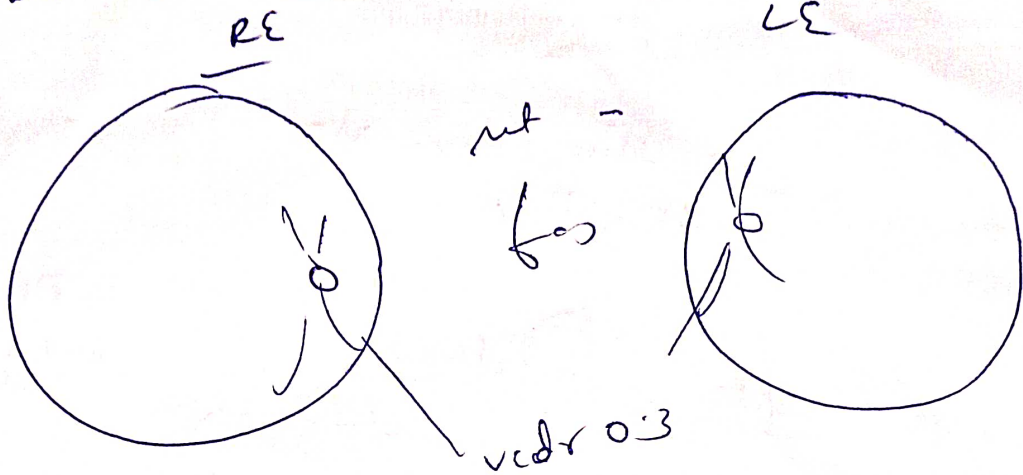
O/E BCVA (BE) 6/6 (P), NG



IOF 12  
12

(down vn (ischus) (OR) 38/38

Fluores



hyp (BE) cataract

Adi:

(BE) Phaco + IOL  
↓ LTA -

RE first vol  
AVP  
(back up 3 piece  
(OL)

Prigip  
(Dr Prigip)  
12/11/2022  
2-40pm



Customer Name : **MR.UDHAYA KUMAR M B**  
 Ref Dr Name : **MediWheel**  
 Customer Id : **MYS280464**  
 Email Id :  
 Corp Name : **MediWheel**  
 Address :

DOB : **01 Jul 1974**  
 Age : **48Y/MALE**  
 Visit ID : **712234253**  
 Phone No : **7899244893**

H - 182  
 W - 72  
 BP - 120/80  
 pulse - 74  
 wei - 36  
 HIP - 36

Package Name : **Mediwheel Full Body Health Checkup Male Above 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)				
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	TOTAL PROSTATE SPECIFIC ANTIGEN - PSA				
13	LAB	STOOL ANALYSIS - ROUTINE				
14	LAB	URINE ROUTINE				
15	LAB	CREATININE				

	BLOOD GROUP & RH TYPE (Forward Reverse) ←			
LAB	BUN/CREATININE RATIO			
OTHERS	physical examination	MYS2738921102651		
US	ULTRASOUND ABDOMEN ✓	MYS2738921103462		
OTHERS	<del>Treadmill</del> / 2D Echo <i>done</i>	MYS2738921127528		
OTHERS	Dental Consultation	MYS2738921134969		
OTHERS	EYE CHECKUP	MYS2738921135592		
X-RAY	X RAY CHEST ✓	MYS2738921145199		
OTHERS	Consultation Physician	MYS2738921148004		
ECHO	<del>ELECTROCARDIOGRAM</del> ECG <i>done</i>	MYS2738921149333		



Customer Name	MR.UDHAYA KUMAR M B	Customer ID	MYS280464
Age & Gender	48Y/MALE	Visit Date	12/11/2022
Ref Doctor	MediWheel		

### 2 D ECHOCARDIOGRAPHIC STUDY

#### M mode measurement:

AORTA	:	3.5cms
LEFT ATRIUM	:	3.5cms
LEFT VENTRICLE (DIASTOLE)	:	4.7cms
(SYSTOLE)	:	2.9cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.8cms
(SYSTOLE)	:	1.3cms
POSTERIOR WALL (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.3cms
EDV	:	76ml
ESV	:	27ml
FRACTIONAL SHORTENING	:	38%
EJECTION FRACTION	:	65%
RVID	:	1.6cms

#### DOPPLER MEASUREMENTS:

MITRAL VALVE	:	'E' - 0.87m/s	'A' - 0.25 m/s	NO MR
AORTIC VALVE	:	1.00m/s		NO AR
TRICUSPID VALVE	:	'E' - 0.83m/s	'A' - 0.38 m/s	NO TR
PULMONARY VALVE	:	0.80m/s		NO PR



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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 prolapse.

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:65%.
- NO REGIONAL WALL MOTION ABNORMALITIES.
- NORMAL VALVES.
- NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.



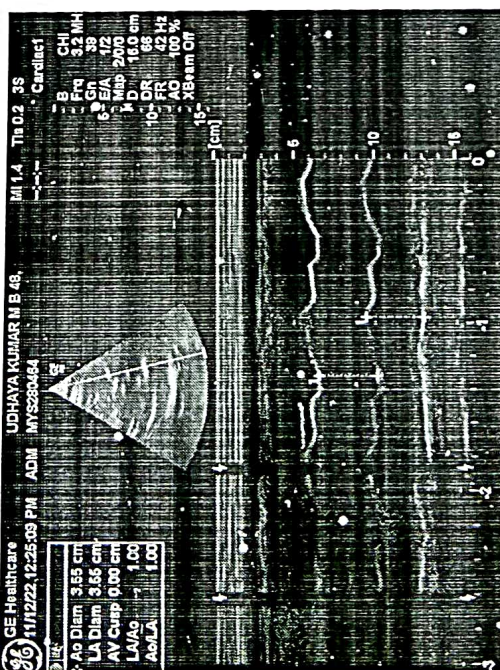
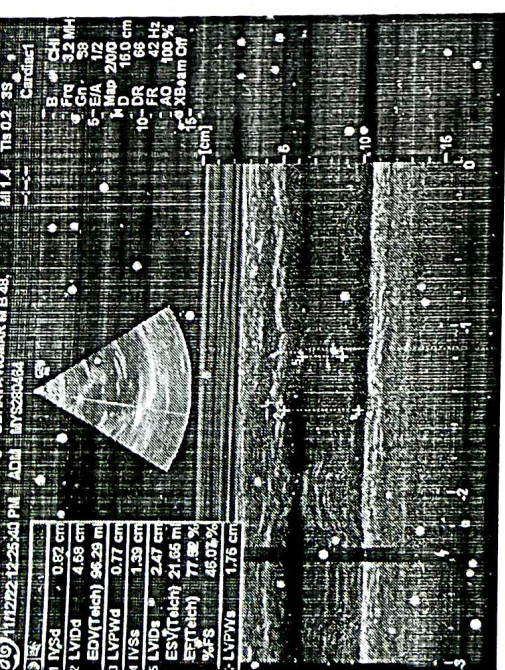
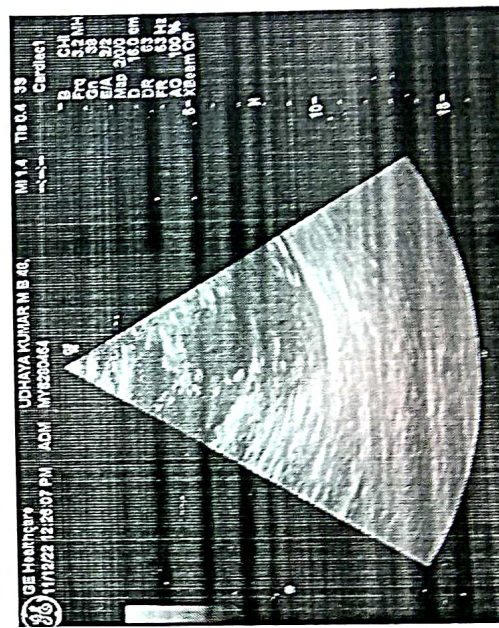
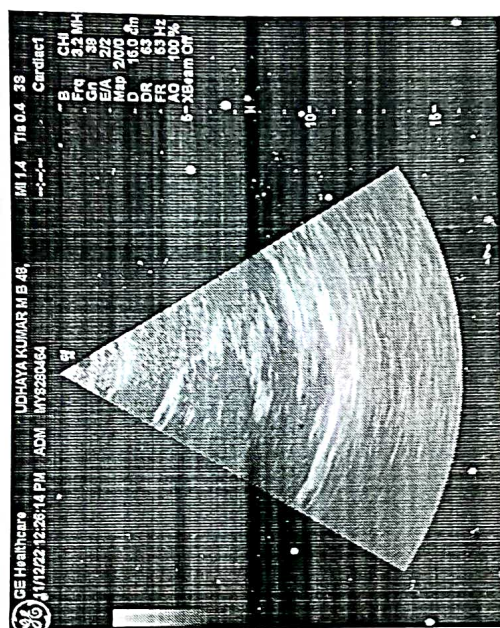
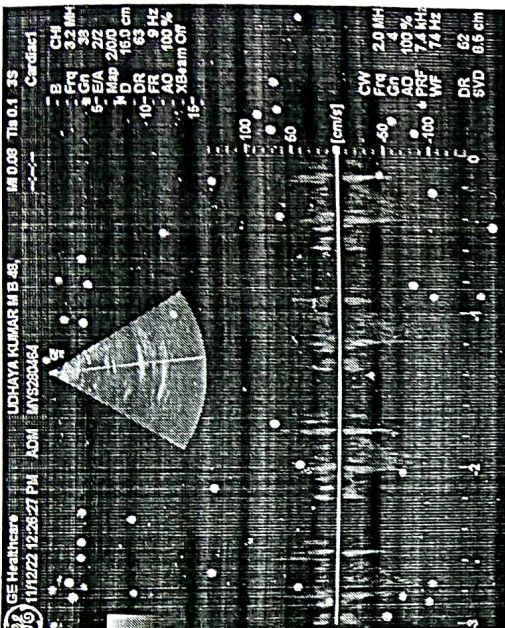
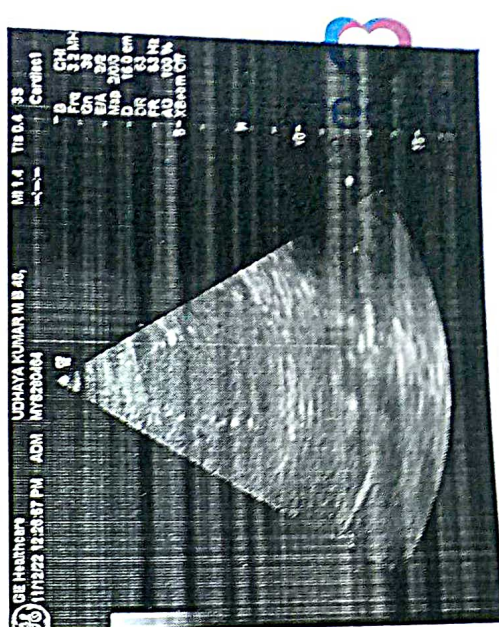
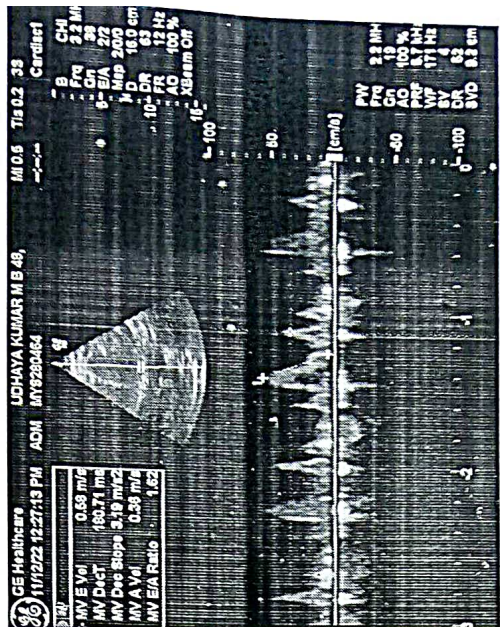
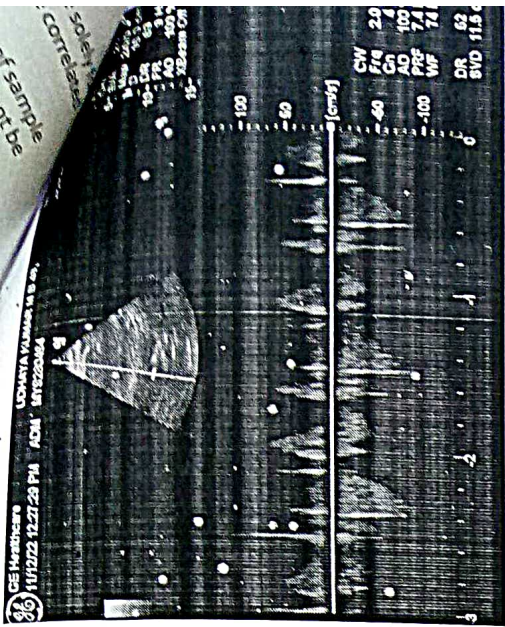
**DR. NIKHIL B**  
**INTERVENTIONAL CARDIOLOGIST**  
NB/SA

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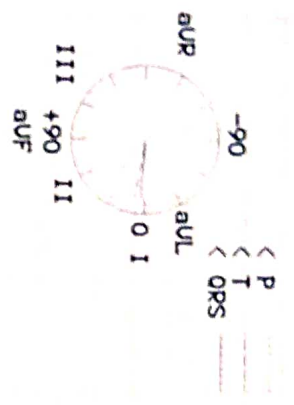
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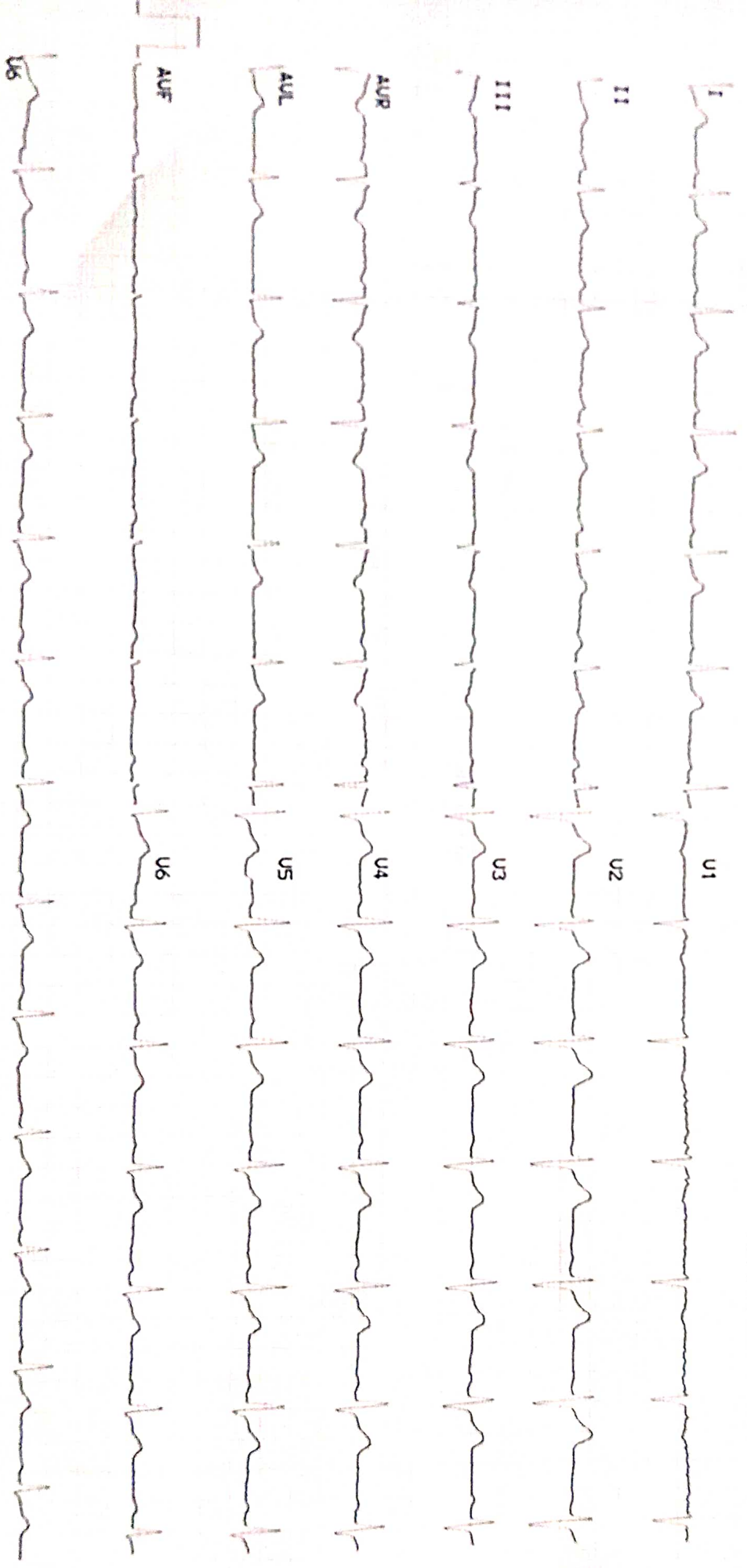
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AGE: 48  
 Measurement Results:  
 QRS : 98 ms  
 QT/QTcB : 362 / 406 ms  
 PR : 178 ms  
 P : 112 ms  
 PR/PP : 794 / 805 ms  
 P/QRS/T : 40 / 5 / 10 degrees  
 QTd/QTcBd : 26 / 29 ms  
 Sokolow : 1.2 mV  
 Max : 10



Interpretation:  
 < P  
 < T  
 < QRS  
 normal ECG



Unconfirmed report.



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Age & Gender	48Y/MALE	Visit Date	12/11/2022
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### ABDOMINO-PELVIC ULTRASONOGRAPHY

**LIVER** is normal in size and shows slightly increased echotexture.

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	8.4	1.7
Left Kidney	9.7	1.7

**URINARY BLADDER** is minimally distended.

**PROSTATE** shows normal shape, size and echopattern.

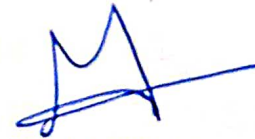
No evidence of ascites.

#### IMPRESSION:

> **GRADE I FATTY CHANGES IN LIVER.**

#### CONSULTANT RADIOLOGISTS

**DR. ANITHA ADARSH**  
MB/MS

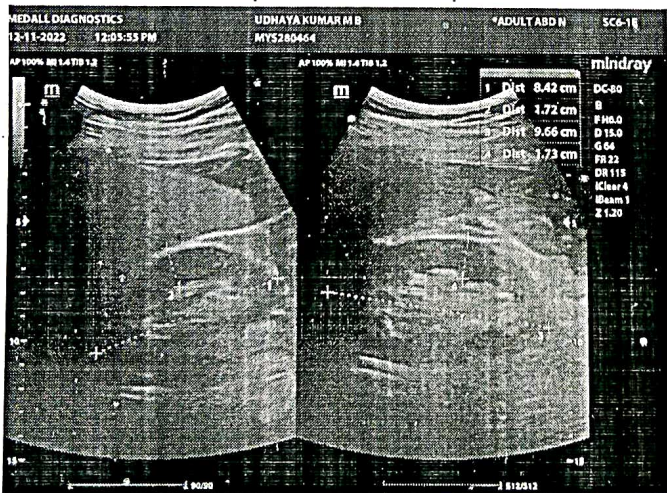
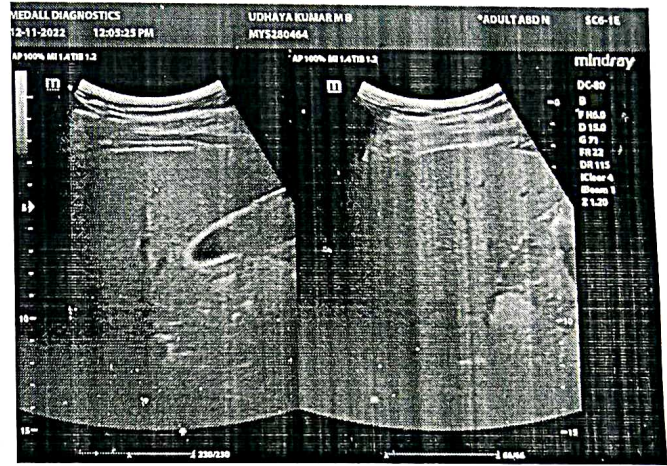
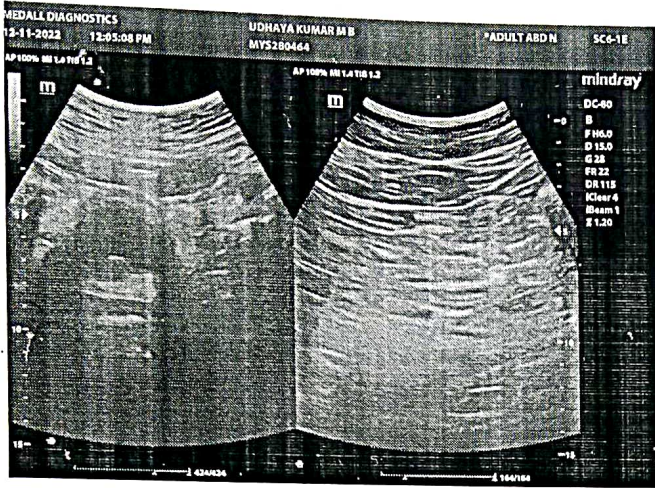


**DR. MOHAN B**





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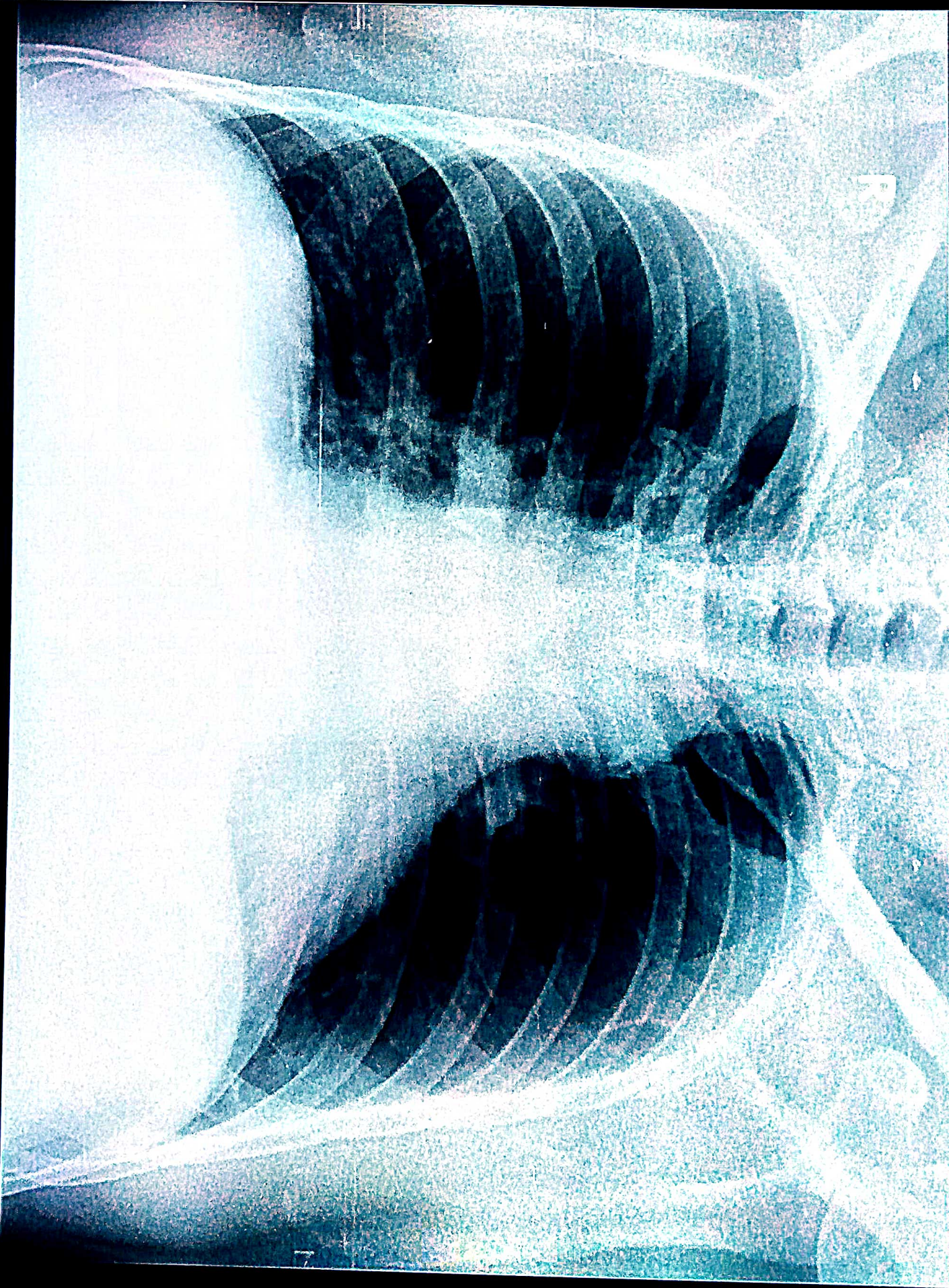


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UDHAYA KUMAR M B 48 MYS280464 M CHEST PA 11/12/2022 01:05 PM  
MEDALL CLUMAX DIAGNOSTIC







Name : Mr. UDHAYA KUMAR M B  
PID No. : MYS280464  
SID No. : 712234253  
Age / Sex : 48 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel


Register On : 12/11/2022 10:01 AM  
Collection On : 12/11/2022 11:33 AM  
Report On : 12/11/2022 5:55 PM  
Printed On : 12/11/2022 6:00 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	03	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	05	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	4.46	10 <sup>3</sup> / $\mu$ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.87	10 <sup>3</sup> / $\mu$ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.24	10 <sup>3</sup> / $\mu$ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.40	10 <sup>3</sup> / $\mu$ l	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10 <sup>3</sup> / $\mu$ l	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	<b>140</b>	10 <sup>3</sup> / $\mu$ l	150 - 450
MPV (Blood/Derived)	13.2	fL	7.9 - 13.7
PCT	0.18	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	06	mm/hr	< 15

  
Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY

  
DR SHAMIM JAVED  
MD PATHOLOGY  
KMC 88902

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## **BIOCHEMISTRY**

### **Liver Function Test**


Bilirubin(Total) (Serum/Diazotized Sulfanilic Acid)	1.2	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.3	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.90	mg/dL	0.1 - 1.0
Total Protein (Serum/Biuret)	6.7	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.2	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.50	gm/dL	2.3 - 3.6
A : G Ratio (Serum/Derived)	1.68		1.1 - 2.2

**INTERPRETATION:** Remark : Electrophoresis is the preferred method

SGOT/AST (Aspartate Aminotransferase) (Serum/IFCC / Kinetic)	24	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/IFCC / Kinetic)	28	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/PNPP / Kinetic)	99	U/L	53 - 128
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	42	U/L	< 55

  
Mr. S. Mohan Kumar  
Sr. Lab Technician

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MD PATHOLOGY  
KMC 88902

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<b><u>Lipid Profile</u></b>			
Cholesterol Total (Serum/Oxidase / Peroxidase method)	187	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	148	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

**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)	46	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	111.4	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	29.6	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	141.0	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

  
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**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)	4.1		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)	3.2		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)	2.4		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
---	-----	--	---

A handwritten signature in black ink, appearing to read "S. Mohan Kumar".

Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY

A handwritten signature in black ink, appearing to read "Shamim Javed".

DR SHAMIM JAVED  
MD PATHOLOGY  
KMC 88902

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<b><u>Glycosylated Haemoglobin (HbA1c)</u></b>			
HbA1C (Whole Blood/HPLC)	5.9	%	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)	122.63	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))	1.30	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))	10.64	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.

TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Immunometric Assay (CLIA))	2.607	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&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

  
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## CLINICAL PATHOLOGY

### PHYSICAL EXAMINATION


Colour (Urine/Physical examination)	Pale Yellow		Yellow to Amber
Volume (Urine/Physical examination)	30		ml
Appearance (Urine)	Clear		

### CHEMICAL EXAMINATION

pH (Urine)	7.0		4.5 - 8.0
Specific Gravity (Urine/Dip Stick ~ Reagent strip method)	1.020		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

  
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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)	2-4	/hpf	< 5
Epithelial Cells (Urine/Microscopy)	1-2	/hpf	No ranges
Others (Urine)	Nil		Nil

A handwritten signature in black ink, appearing to read "S. Mohan Kumar".

Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY

A handwritten signature in black ink, appearing to read "Shamim Javed".

DR SHAMIM JAVED  
MD PATHOLOGY  
KMC 88902

APPROVED BY



Name : Mr. UDHAYA KUMAR M B  
PID No. : MYS280464  
SID No. : 712234253  
Age / Sex : 48 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel


Register On : 12/11/2022 10:01 AM  
Collection On : 12/11/2022 11:33 AM  
Report On : 12/11/2022 5:55 PM  
Printed On : 12/11/2022 6:00 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>Stool Analysis - ROUTINE</u></b>			
Colour (Stool)	Brownish		Brown
Blood (Stool)	Not present		Not present
Mucus (Stool)	Not present		Not present
Reaction (Stool)	Alkaline		Alkaline
Consistency (Stool)	Semi solid		Semi solid
Ova (Stool)	Nil		Nil
Others (Stool)	Nil		Nil
Cysts (Stool)	Nil		Nil
Trophozoites (Stool)	Nil		Nil
RBCs (Stool)	Nil	/hpf	Nil
Pus Cells (Stool)	1-2	/hpf	Nil
Macrophages (Stool)	Nil		Nil
Epithelial Cells (Stool)	Nil	/hpf	Nil

  
Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY

  
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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**IMMUNOHAEMATOLOGY**  
BLOOD GROUPING AND Rh TYPING  
(EDTA Blood Agglutination)

'B' Positive'

**Remark:** test to be confirmed by gel method

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Mr.S.Mohan Kumar  
Sr.LabTechnician

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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**BIOCHEMISTRY**

BUN / Creatinine Ratio	7.3		
Glucose Fasting (FBS) (Plasma - F/GOD- POD)	79	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
Glucose Postprandial (PPBS) (Plasma - PP/GOD - POD)	124	mg/dL	70 - 140

**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
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	7.3	mg/dL	7.0 - 21
Creatinine (Serum/Jaffe Kinetic)	1.3	mg/dL	0.9 - 1.3

**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)	8.5	mg/dL	3.5 - 7.2
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**Remark:** Kindly correlate clinically.

Mr. S. Mohan Kumar  
Sr. Lab Technician

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**Ref. Dr** : MediWheel



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-- End of Report --

Name	MR.UDHAYA KUMAR M B	ID	MYS280464
Age & Gender	48Y/MALE	Visit Date	12/11/2022
Ref Doctor Name	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.**