

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Janardhan B MRN : 2015000000159 Gender/Age : MALE , 40y (17/01/1983)

Collected On : 24/04/2023 08:58 AM Received On : 24/04/2023 01:22 PM Reported On : 24/04/2023 05:22 PM

Barcode : 022304240382 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8074677972

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	14.7	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	5.73 H	million/ μ l	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	46.3	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	80.7 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	25.6 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.8	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	14.8 H	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	279	$10^3/\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	4.8	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	36.5 L	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	49.4 H	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	5.2	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	8.5 H	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.4	%	0.0-2.0



Patient Name : Mr Janardhan B MRN : 20150000000159 Gender/Age : MALE , 40y (17/01/1983)

Absolute Neutrophil Count (Calculated)	1.76 L	x10 ³ cells/μl	2.0-7.0
Absolute Lymphocyte Count (Calculated)	2.38	x10 ³ cells/μl	1.0-3.0
Absolute Monocyte Count (Calculated)	0.25	x10 ³ cells/μl	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.41	x10 ³ cells/μl	0.02-0.5
Absolute Basophil Count (Calculated)	0.02	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

Interpretation Notes

- Haemoglobin , RBC Count and PCV: If below reference range, indicates Anemia. Further evaluation is suggested .
RBC Indices aid in typing of anemia.
WBC Count: If below reference range, susceptibility to infection.
If above reference range- Infection*
If very high in lakhs-Leukemia
Neutrophils -If above reference range-acute infection, mostly bacterial
Lymphocytes -If above reference range-chronic infection/ viral infection
Monocytes -If above reference range- TB,Typhoid,UTI
Eosinophils -If above reference range -Allergy,cough,Common cold,Asthma & worms
Basophils - If above reference range, Leukemia, allergy
Platelets: If below reference range- bleeding disorder, Dengue, drug- induced, malignancies
* In bacterial infection with fever total WBC count increases.
Eg Tonsillitis,Sinusitis,Bronchitis,Pneumonia,Appendicitis,UTI -12000-25000 cells/cumm.
In typhoid and viral fever WBC may be normal.
DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.

Erythrocyte Sedimentation Rate (ESR)	6	mm/1hr	0.0-10.0
(Westergren Method)			

Interpretation Notes

- ESR high - Infections, chronic disorders,, plasma cell dyscrasias.
DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert

Hema S

Dr. Hema S
MD, DNB, Pathology
Associate Consultant

Patient Name : Mr Janardhan B MRN : 2015000000159 Gender/Age : MALE , 40y (17/01/1983)

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Colorimetric - Glucose Oxidase Peroxidase)	96	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020
Post Prandial Blood Sugar (PPBS) (Colorimetric - Glucose Oxidase Peroxidase)	64 L	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020
HBA1C			
HbA1c (HPLC NGSP Certified)	5.3	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	105.41	-	-

Interpretation:

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

SERUM CREATININE

Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.88	mg/dL	0.66-1.25
eGFR (Calculated)	96.0	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	10	mg/dL	9.0-20.0
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	6.1	mg/dL	3.5-8.5

LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)

Cholesterol Total (Colorimetric - Cholesterol Oxidase)	161	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
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Patient Name : Mr Janardhan B MRN : 20150000000159 Gender/Age : MALE , 40y (17/01/1983)			
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	104	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	32 L	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	129.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	101 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	20.8	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	5.1 H	-	0.0-5.0
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.40	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.10	mg/dL	0.0-0.3
Unconjugated Bilirubin (Indirect) (Calculated)	0.31	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.10	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.20	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.9	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.45	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	23	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	16	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	70	U/L	38.0-126.0

Patient Name : Mr Janardhan B MRN : 20150000000159 Gender/Age : MALE , 40y (17/01/1983)			
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	18	U/L	15.0-73.0

Interpretation Notes

- Indirect Bilirubin result is a calculated parameter (Indirect Bilirubin = Total Bilirubin - Direct Bilirubin). Indirect bilirubin result includes the delta bilirubin fraction also. Delta Bilirubin is the bilirubin which is covalently bound to albumin. Delta Bilirubin is not expected to be present in healthy adults or neonates.

THYROID PROFILE (T3, T4, TSH)

Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)	1.31	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence)	8.95	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence)	0.9794	µIU/mL	0.4-4.049

Interpretation Notes

- TSH levels are subjected to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% , hence time of the day has influence on the measured serum TSH concentrations. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration.



Mrs. Latha B S
MSc, Mphil, Biochemistry
Incharge, Consultant Biochemistry



Dr. Anushre Prasad
MBBS,MD, Biochemistry
Consultant Biochemistry

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Colour	Brownish	-	-
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Patient Name : Mr Janardhan B MRN : 20150000000159 Gender/Age : MALE , 40y (17/01/1983)			
Consistency	Semi Solid	-	-
Mucus	Absent	-	-
CHEMICAL EXAMINATION			
Stool For Occult Blood (Standard Guaiac Method)	Negative	-	-
Reaction	Alkaline	-	-
Reducing Substances	Absent	-	-
MICROSCOPE EXAMINATION			
Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Trophozoite	Not Seen	-	-
Pus Cells	2-3	/hpf	0-5
Urine For Sugar (Fasting) (Enzyme Method (GOD POD))	Not Present	-	-
Urine For Sugar (Post Prandial) (Enzyme Method (GOD POD))	Not Present	-	-

--End of Report--



Dr. Sudarshan Chougule
MBBS, MD, Pathology
Consultant & Head - Hematology & Flow Cytometry

Patient Name : Mr Janardhan B MRN : 20150000000159 Gender/Age : MALE , 40y (17/01/1983)

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
(Fasting Blood Sugar (FBS), -> Auto Authorized)
(Lipid Profile, -> Auto Authorized)
(CR, -> Auto Authorized)
(LFT, -> Auto Authorized)
(, -> Auto Authorized)
(Uric Acid, -> Auto Authorized)
(Blood Urea Nitrogen (Bun), -> Auto Authorized)
(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Janardhan B MRN : 20150000000159 Gender/Age : MALE , 40y (17/01/1983)

Collected On : 24/04/2023 08:58 AM Received On : 24/04/2023 01:12 PM Reported On : 24/04/2023 03:32 PM

Barcode : 1B2304240018 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8074677972

NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	O	-
RH Typing (Column Agglutination Technology)	Positive	-



Dr. Prathip Kumar B R
MBBS,MD, Immunohaematology & Blood Transfusion
Consultant

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	STRAW	-	-
Appearance	Not Present	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (pH Indicator Method)	5.5	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.015	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present



Patient Name : Mr Janardhan B MRN : 2015000000159 Gender/Age : MALE , 40y (17/01/1983)			
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present
Bile Salts (Azo Coupling Method)	Not Present	-	Not Present
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present
Urobilinogen (Azo Coupling Method)	Normal	-	Normal
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present

MICROSCOPIC EXAMINATION

Pus Cells	0.3	/hpf	0-5
RBC	0.2	/hpf	0-4
Epithelial Cells	0.1	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.04	/hpf	0-1
Bacteria	7.2	/hpf	0-200
Yeast Cells	0.1	/hpf	0-1
Mucus	Not Present	-	Not Present

Interpretation Notes

- Since the analytical methodology of Urine Microscopy is Flow cytometry based and FDA approved the results of automated urine microscopy which includes RBCs, WBCs Epithelial cells etc are being reported in decimal fraction. Rounding off the value to nearest whole number is suggested.

--End of Report--



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Dr. Sudarshan Chougule
MBBS, MD, Pathology
Consultant & Head - Hematology & Flow Cytometry

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





MILESTONES

VISUAL DEVELOPMENT CENTER

105, 7th main, Jayanagar 4th block, Near Malys Restaurant, Bengaluru- 560 011.

WWW.MILESTONESINSTITUTIONS.ORG | Ph: 080 2664 4448

Evaluation

24/12/23

Name : Parashram B
Age : 40
Gender : male
MRD No : 2011-154
Chief Complaint : Irregular astigmatism

Ocular History

General History

		OD	OS
VISION	Distance:	6/6	6/6
	Pinhole:		
	Near:	26	26

ADULT TRANS-THORACIC ECHO REPORT

NAME : MR.JANARDHAN B

AGE/SEX : 40YRS/MALE

MRN NO : 2015000000159

DATE : 24.04.2023

FINAL DIAGNOSIS:

- NORMAL CHAMBER DIMENSIONS
- NO RWMA
- NORMAL VALVES
- MR-MILD
- NORMAL PA PRESSURE
- NORMAL RV/LV FUNCTION
- LVEF- 60 %

MEASUREMENTS

AO: 26 MM LVID (d) : 47 MM IVS (d) : 11 MM RA : 36 MM
LA: 36 MM LVID(s) : 30 MM PW (d) : 11 MM RV : 27 MM
EF: 60 %

VALVES

MITRAL VALVE : NORMAL
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL

CHAMBERS

LEFT ATRIUM : NORMAL
RIGHT ATRIUM : NORMAL
LEFT VENTRICLE : NORMAL, NORMAL LV FUNCTION
RIGHT VENTRICLE : NORMAL, TAPSE-20 MM, NORMAL RV FUNCTION
RVOT/LVOT : NORMAL



Narayana Multispeciality Clinic

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E-mail: info.jayanagar@narayanahealth.org web: www.narayanahealth.org

SEPTAE

IVS : INTACT

IAS : INTACT

GREAT ARTERIES

AORTA : NORMAL, AORTIC ANNULUS-20 MM, LEFT ARCH

PULMONARY ARTERY : NORMAL

DOPPLER DATA

MITRAL VALVE : E/A – 0.6 /0.5M/S, MILD LVDD, MR-MILD

AORTIC VALVE : PG- 5 MMHG

TRICUSPID VALVE : TR- TRIVIAL, PASP- 24 MMHG

PULMONARY VALVE : PG- 3 MMHG

WALL MOTION ABNORMALITIES: NO RWMA

PERICARDIUM : NORMAL

VEGETATION/THROMBUS: ABSENT

OTHER FINDINGS

IVC- 14 MM NORMAL SIZED, COLLAPSIBILITY >50%, RAP -3 MM
SINUS RHYTHM/ HR –70 BPM

DR.SURESH P V
CONSULTANT CARDIOLOGIST



VISHALAKSHI H R
CARDIAC SONOGRAPHER

Patient Name : Mr. Janardhan B
Age : 40Years
Referring Doctor : EHP

Patient ID : 2015000000159
Sex : Male
Date : 24.04.2023

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and shows **increased** echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesions.

Portal vein is normal in size, course and caliber. **CBD** is not dilated.

Gall bladder is without evidence of , or pericholecystic fluid. **Shows few polyps measuring 4-5mm and shows soft calculus / in the echogenic polyp measuring 7-8mm.**

Pancreas to the extent visualized, appears normal in size, contour and echogenicity.

Spleen is normal in size, shape, contour and echogenicity. No evidence of mass or focal lesions.

Right Kidney is normal in size (measures 9.4cm in length & 1.2cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size (measures 9.2cm in length & 1.3cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Retroperitoneum – Obscured by bowel gas.

Urinary Bladder is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.


Prostate is normal in echopattern and normal in size, measures 2.8x3.0x3.2cm, Volume -14 cc.

Fluid - There is no ascites or pleural effusion.

Umbilical Hernia with a Defect measuring 1.5cm with Herniation of Omentum

IMPRESSION:

- **Grade 1 Fatty Liver**
- **Gall bladder Shows soft calculus / echogenic polyp with polyps**
- **Umbilical Hernia**


Dr B S Ramkumar 35772
Consultant Radiologist

Disclaimer:

Note: Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. This Report is not for Medico - Legal Purposes.



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Client

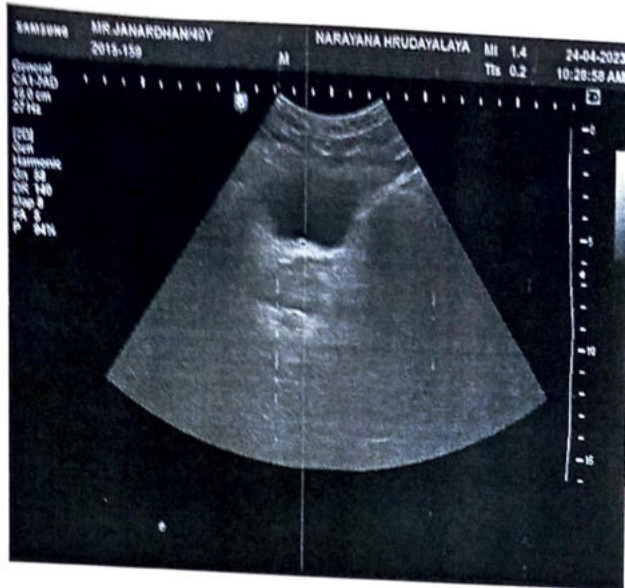
ID
Name
Birth Date
Gender

2015-159
MR. JANARDHANUYY
Male

Exam
Acquisition #
Exam Date
Description
Operator

11/24/2023

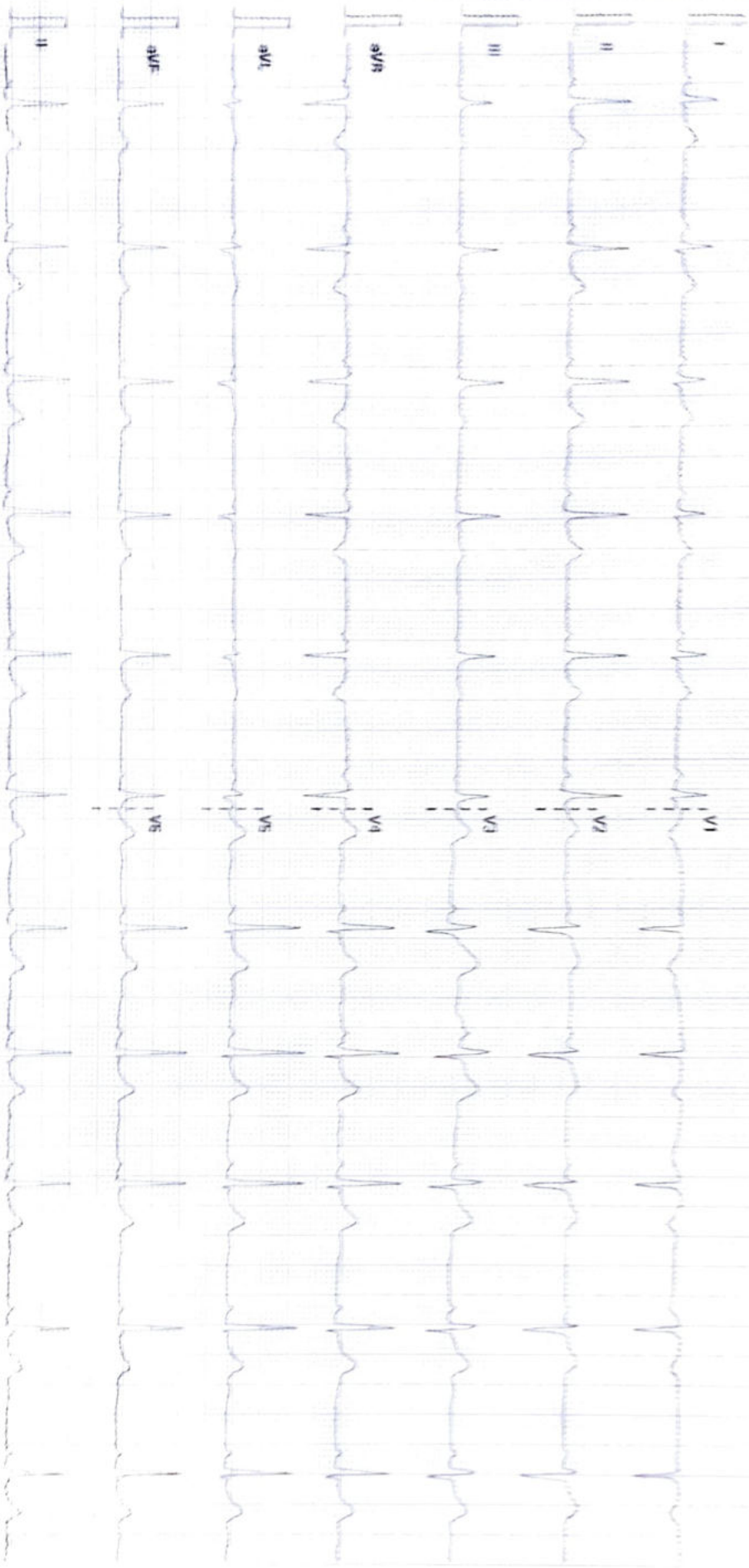




2015-159
Name: NARAYANAN B
Age: 41 Years
Gender: Male

24-04-2023 11:03:38 AM

Heart Rate	66 bpm
PR Interval	130 ms
QTc Interval	86 ms
QT/QTc Interval	378/389 ms
P/QRST/T Axes	15/68/43 deg
ECG Nodes	



25 mm/s (0 mm/mV) 50 Hz 200 35 Hz
NARAYANAN HEAL TH JAYANAGAR
02-06-06V08 4 1 SN EN 10000000

OPD SHEET

PATIENT NAME : MR. JANARDHAN B

MRN NO : 2015-0159

AGE : 40YRS MALE

DOCTOR NAME : DR. PRIYA

DEPT: FAMILY MEDS

BP 110/80mmHg, PR 67b/m, SpO2 100%, Wt 80.2kg

No known comorbidities

LDL: 101.

FBS - 96.

PPBS - 64.

HbA1c: 5.3%

URBS - 120.

ECG - NSR

USG Abd -

Gr 1 fatty liver

GB Polyp

umbilical hernia

TMT - neg.

2D ECHO - No RWMA

EF: 60%

ECG - NSR

Sdv.

lifestyle modifications

Cap. Reserve plus 1000 x 3 months. (P₁₀)

General Surgeon's opinion

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S. Priya

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EXERCISE STRESS TEST REPORT

Patient Name: MR.JANARDHAN B,
Patient ID: 2015-159
Height: 170 cm
Weight: 80 kg

DOB: 17.01.1983
Age: 40yrs
Gender: Male
Race:

Study Date: 24.04.2023
Test Type: Treadmill Stress Test
Protocol: BRUCE

Referring Physician: EHP
Attending Physician: DR.PRIYA S
Technician: MS.VISHALAKSHI HR

Medications:
--

Medical History:
--

Reason for Exercise Test:
Screening for CAD

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	01:02	0.00	0.00	70	110/80	
	STANDING	00:02	0.00	0.00	70	110/80	
	WARM-UP	00:10	1.20	0.00	68	110/80	
EXERCISE	STAGE 1	03:00	1.70	10.00	110	110/80	
	STAGE 2	03:00	2.50	12.00	130	120/80	
	STAGE 3	01:29	3.40	14.00	148	124/80	
RECOVERY		05:09	0.00	0.00	85	120/80	

The patient exercised according to the BRUCE for 7:28 min:s, achieving a work level of Max. METS: 9.20. The resting heart rate of 68 bpm rose to a maximal heart rate of 148 bpm. This value represents 82 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/80 mmHg, rose to a maximum blood pressure of 150/80 mmHg. The exercise test was stopped due to Fatigue, Target heart rate achieved.

Interpretation

--

Conclusions

GOOD EFFORT TOLERANCE
NORMAL HR AND BP RESPONSE
NO ANGINA OR ARRHYTHMIAS
NO SIGNIFICANT ST-T CHANGES NOTED DURING EXERCISE AND RECOVERY
IMP:STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Physician

S. Priya

Technician

Technique
11/08/00 00:00:00

PARMISTE
ST. PAULINE
100-500

BRUCE
44110101
4/11/00

Lead
ST Lead (mV)
ST Slope (mV/s)



*Computer Interpretation and Printouts

ST Lead (mV)
ST Slope (mV/s)

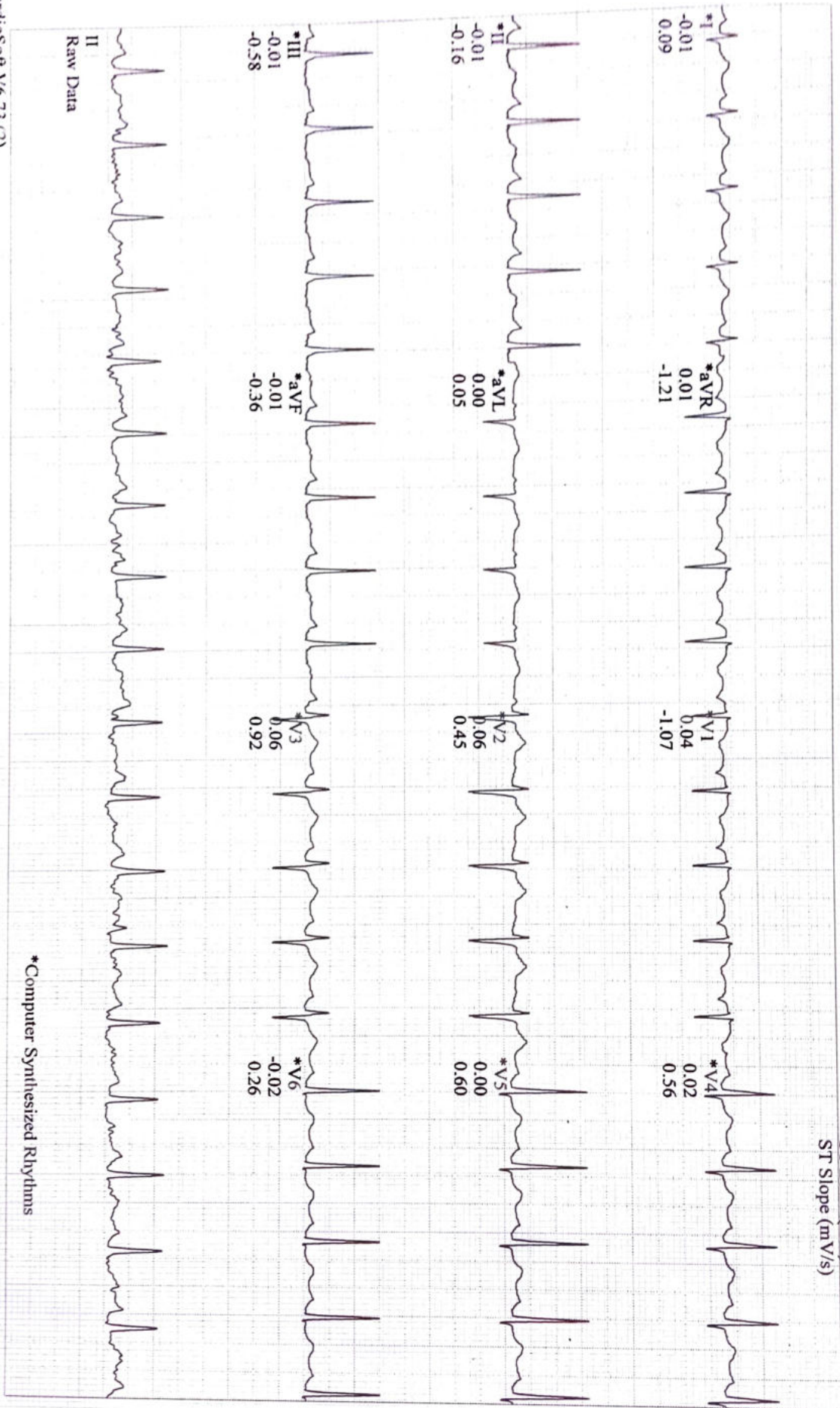
Lead
ST Lead (mV)
ST Slope (mV/s)

111 bpm
110/80 mmHg

EXERCISE
STAGE 1
02:50

BRUCE
1.7 mph
10.0%

Lead
ST Level (mV)
ST Slope (mV/s)



*Computer Synthesized Rhythms

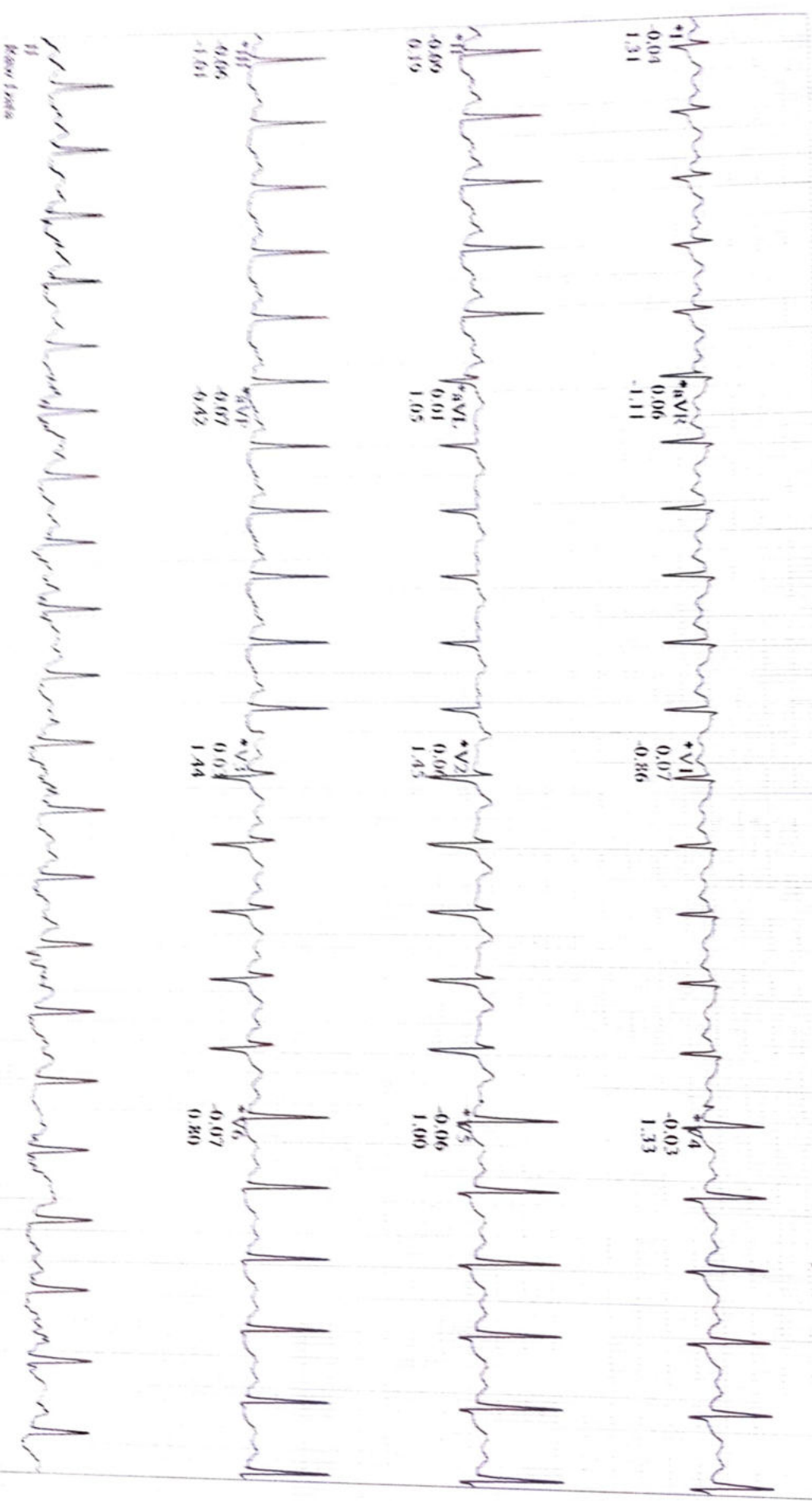
II
Raw Data

120 bpm
120/80 mmHg

Linked Medians
EXERCISE
STAGE 2
05:50

BRUCE
2.5 mph
12.0 %

Lead
ST Level (mV)
ST Slope (mV/s)



* Computer Synthesized Rhythms

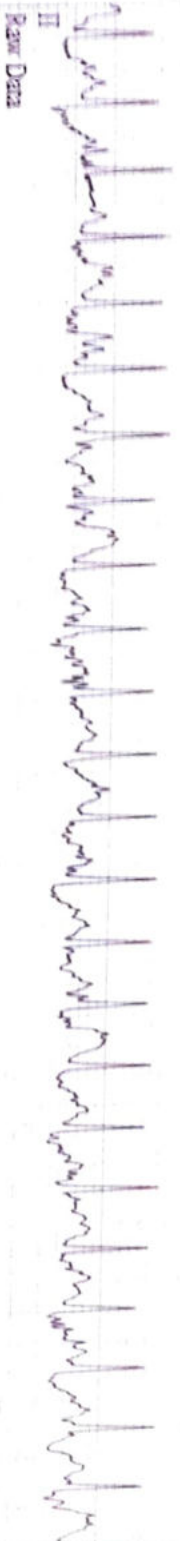
148 bpm
124/80 mmHg

Linked Medians (PEAK EXERCISE)
EXERCISE
STAGE 3
07:29

BRUCE
3.4 mph
14.0 %

Narayana Multispecialty Clinic

Lead
ST Level (mV)
ST Slope (mV/s)



*Computer Synthesized Rhythms

Linked Medians

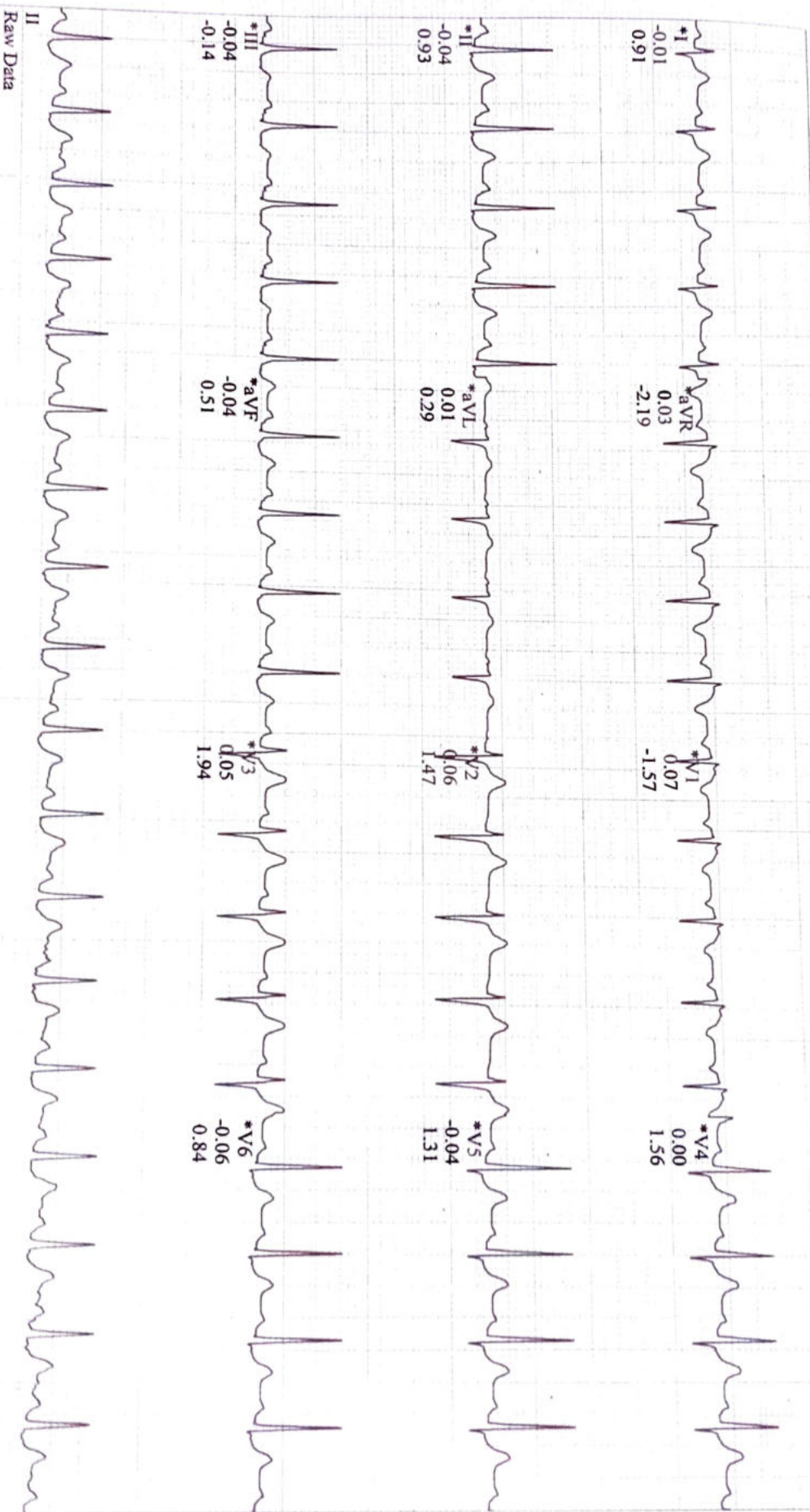
RECOVERY #1

01:00

110 bpm
150/80 mmHg

BRUCE
0.0 mph
0.0 %

Lead
ST Level (mV)
ST Slope (mV/s)



Raw Data

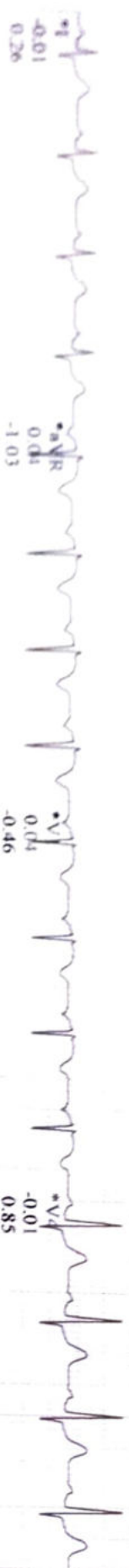
*Computer Synthesized Rhythms

96 bpm
130/80 mmHg

RECOVERY
#1
03:00

HR/UC
0.0 mph
0.0 %

Lead
ST Level (mV)
ST Slope (mV/s)



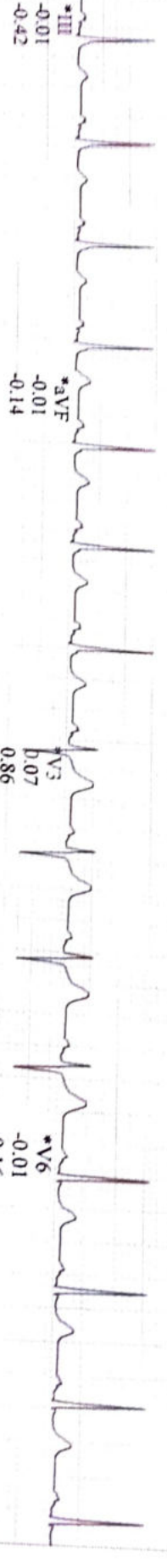
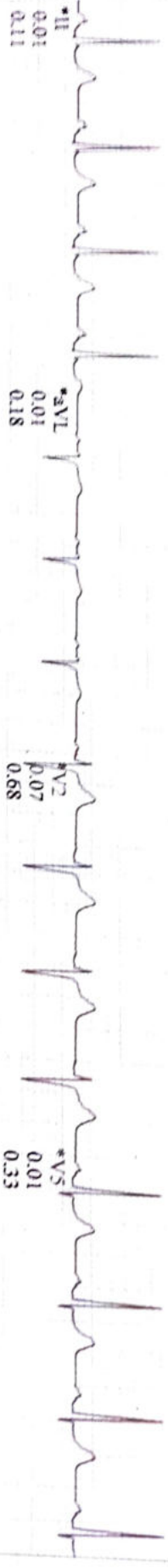
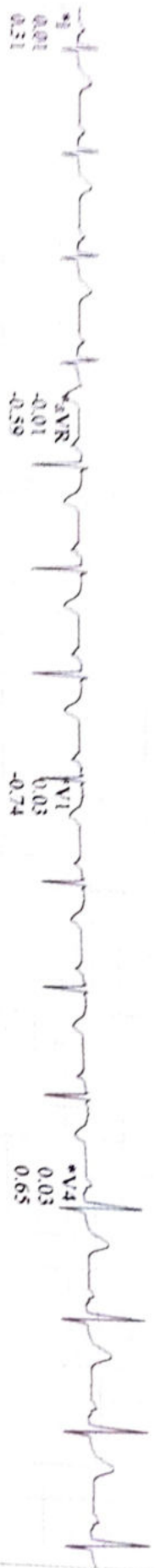
*Computer Synthesized Rhythms

ST Type
12080 normal

RECOVERY
#1
05:00

BRUCE
0.0 mph
0.0 %

Lead
ST Level (mV)
ST Slope (mV/s)



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V5,II)

*Computer Synthesized Rhythms

Start of Test: 12:40:24

Patient Name : Mr. Janardhan B

Patient ID : 2015000000159

Age : 40 Years

Sex : Male

Referring Doctor : EHP

Date : 24.04.2023

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and shows increased echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesions.

Portal vein is normal in size, course and caliber. CBD is not dilated.

Gall bladder is without evidence of or pericholecystic fluid. Shows few polyps measuring 4-5mm and shows soft calculus / in the echogenic polyp measuring 7-8mm.

Pancreas to the extent visualized, appears normal in size, contour and echogenicity.

Spleen is normal in size, shape, contour and echogenicity. No evidence of mass or focal lesions.

Right Kidney is normal in size (measures 9.4cm in length & 1.2cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size (measures 9.2cm in length & 1.3cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Retroperitoneum - Obscured by bowel gas.

Urinary Bladder is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

Prostate is normal in echopattern and normal in size, measures 2.8x3.0x3.2cm. Volume -14 cc.

Fluid - There is no ascites or pleural effusion.

Umbilical Hernia with a Defect measuring 1.5cm with Herniation of Omentum

IMPRESSION:

- Grade 1 Fatty Liver
- Gall bladder Shows soft calculus / echogenic polyp with polyps
- Umbilical Hernia


Dr B S Ramkumar 36772
Consultant Radiologist

Disclaimer

Note: Investigations have their limitations. Secondary pathological Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. This Report is not for Medico - Legal Purposes.



Narayana Multispecialty Clinic

1st & 30th Cross, 8th 'B' Main Road, 4th Block, Jayanagar, Bangalore - 560 011

Clinic No. : 8884000991, 9513919615 Pharmacy No. : 9513919615

E-mail: info.jayanagar@narayanahealth.org web: www.narayanahealth.org

Exam

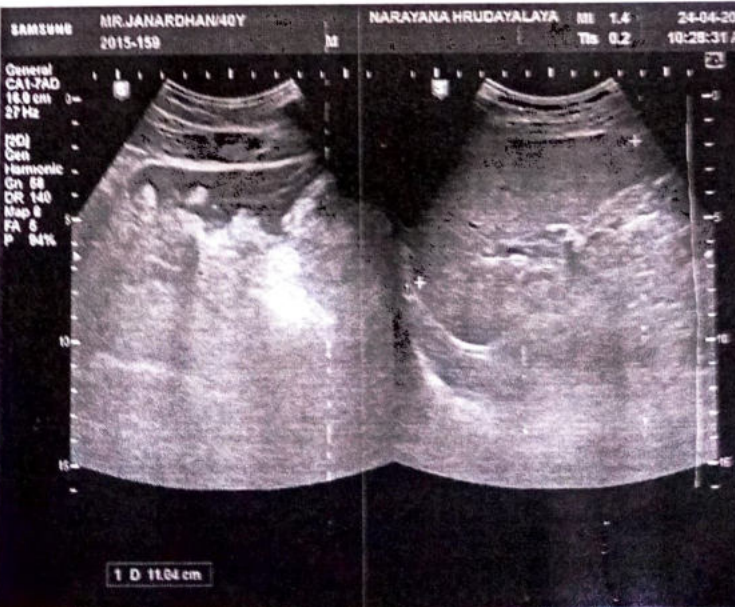
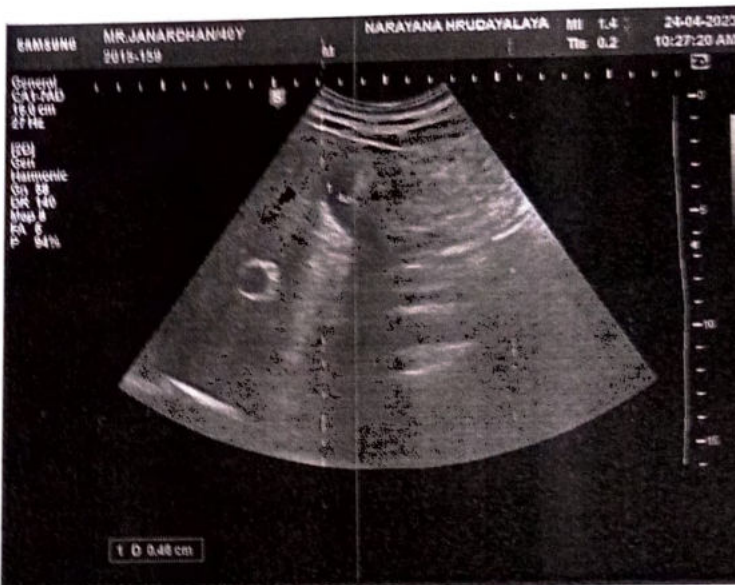
Name
Birth Date
Gender

2015-159
MR. JANARDHAN/40Y
Male

Exam

Accession #
Exam Date
Description
Operator

24-04-2023





ADULT TRANS-THORACIC ECHO REPORT

NAME : MR.JANARDHAN B

AGE/SEX : 40YRS/MALE

MRN NO : 2015000000159

DATE : 24.04.2023

FINAL DIAGNOSIS:

- **NORMAL CHAMBER DIMENSIONS**
- **NO RWMA**
- **NORMAL VALVES**
- **MR-MILD**
- **NORMAL PA PRESSURE**
- **NORMAL RV/LV FUNCTION**
- **LVEF- 60 %**

MEASUREMENTS

AO: 26 MM	LVID (d) : 47 MM	IVS (d) : 11 MM	RA : 36 MM
LA: 36 MM	LVID(s) : 30 MM	PW (d) : 11 MM	RV : 27 MM
EF: 60 %			

VALVES

MITRAL VALVE : NORMAL
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL

CHAMBERS

LEFT ATRIUM : NORMAL
RIGHT ATRIUM : NORMAL
LEFT VENTRICLE : NORMAL, NORMAL LV FUNCTION
RIGHT VENTRICLE : NORMAL, TAPSE-20 MM, NORMAL RV FUNCTION
RVOT/LVOT : NORMAL



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Narayana Multispeciality Clinic
JAYANAGAR
BANGALORE

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: MR.JANARDHAN B,
Patient ID: 2015-159
Height: 170 cm
Weight: 80 kg

DOB: 17.01.1983
Age: 40yrs
Gender: Male
Race:

Study Date: 24.04.2023
Test Type: Treadmill Stress Test
Protocol: BRUCE

Referring Physician: EHP
Attending Physician: DR.PRIYA S
Technician: MS.VISHALAKSHI H R

Medications:

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Medical History:

--

Reason for Exercise Test:
Screening for CAD

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	01:02	0.00	0.00	70	110/80	
	STANDING	00:02	0.00	0.00	70	110/80	
EXERCISE	WARM-UP	00:10	1.20	0.00	68	110/80	
	STAGE 1	03:00	1.70	10.00	110	110/80	
	STAGE 2	03:00	2.50	12.00	130	120/80	
	STAGE 3	01:29	3.40	14.00	148	124/80	
RECOVERY		05:09	0.00	0.00	85	120/80	

The patient exercised according to the BRUCE for 7:28 min:s, achieving a work level of Max. METS: 9.20. The resting heart rate of 68 bpm rose to a maximal heart rate of 148 bpm. This value represents 82 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/80 mmHg, rose to a maximum blood pressure of 150/80 mmHg. The exercise test was stopped due to Fatigue, Target heart rate achieved.

Interpretation

--

Conclusions

GOOD EFFORT TOLERANCE
NORMAL HR AND BP RESPONSE
NO ANGINA OR ARRHYTHMIAS
NO SIGNIFICANT ST-T CHANGES NOTED DURING EXERCISE AND RECOVERY
IMP:STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Physician _____ Technician _____

76 bpm
810/480 mmHg

PRETEST
SUPINE
00:54

BRUCE
0.0 mph
0.0 %

Lead
ST Level (mV)
ST Slope (mV/s)

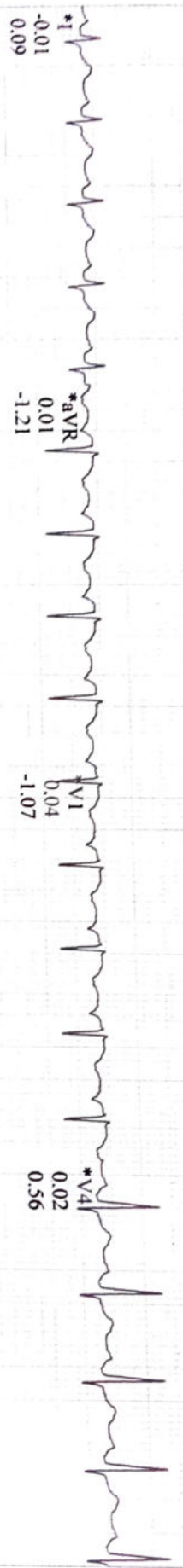


111 bpm
110/80 mmHg

Linked Medians
EXERCISE
STAGE 1
02:50

BRUCE
1.7 mph
10.0 %

Lead
ST Level (mV)
ST Slope (mV/s)

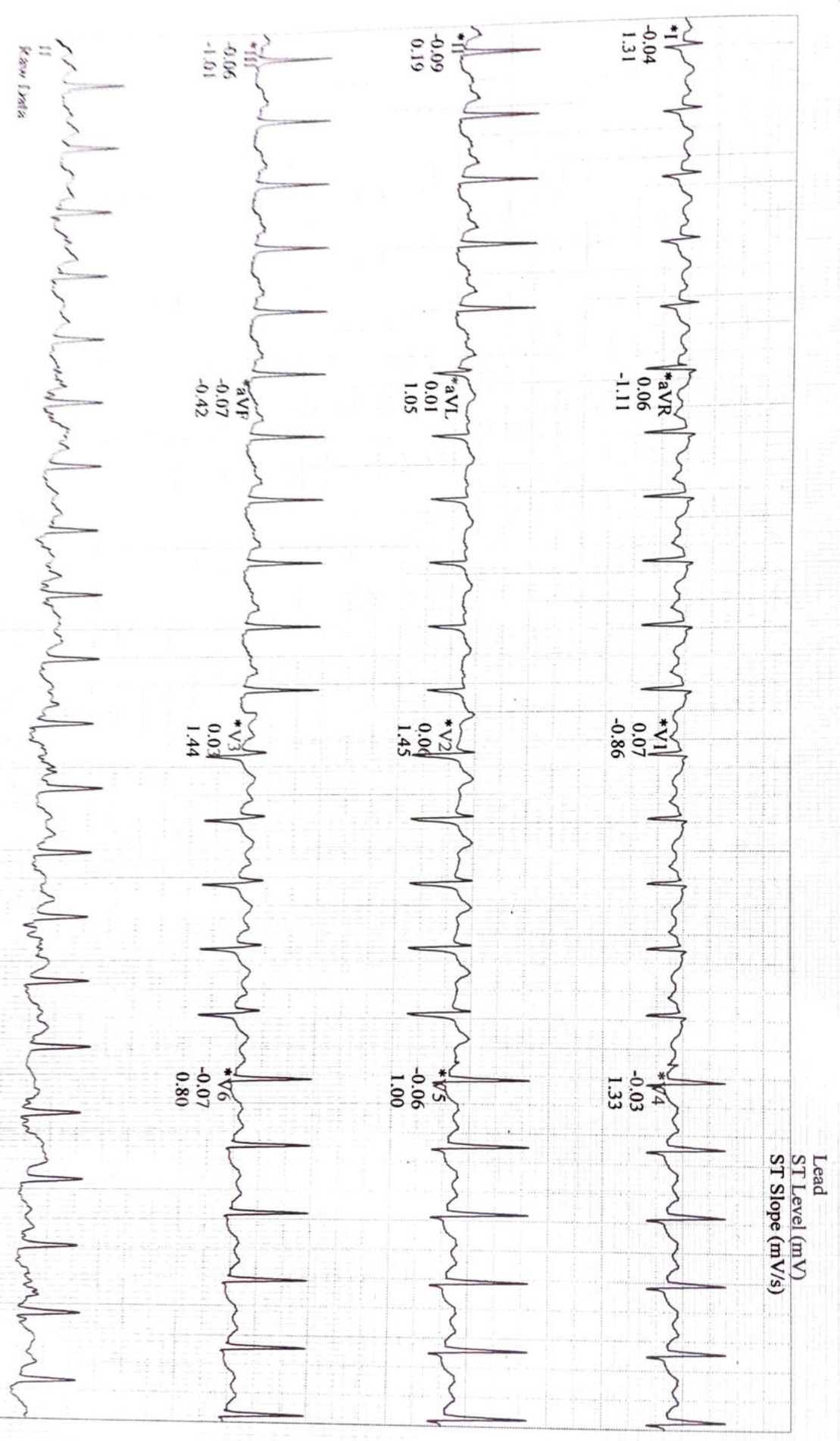


*Computer Synthesized Rhythms

129 bpm
120/80 mmHg

EXERCISE
STAGE 2
05:50

BRUCE
2.5 mph
12.0 %



II
Known Exotic

Case: Narayana Health (16-11-19)
25 records (16 records) of 25512 (9.61 - 20512 % - EHR/V5.11)

Start of Test: 12:40:24

*Computer Synthesized Rhythms

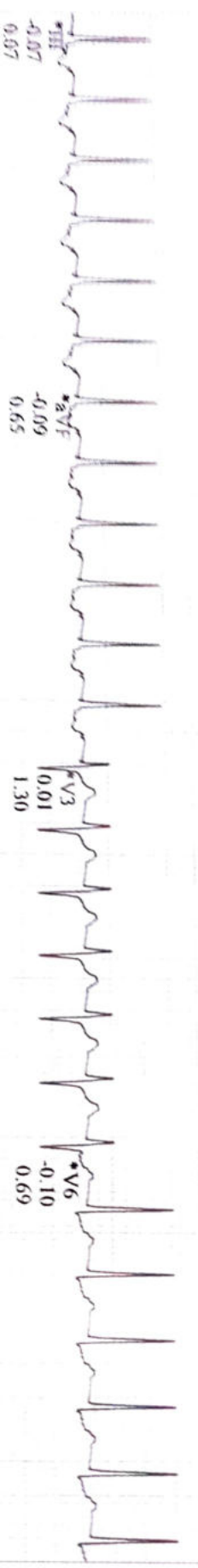
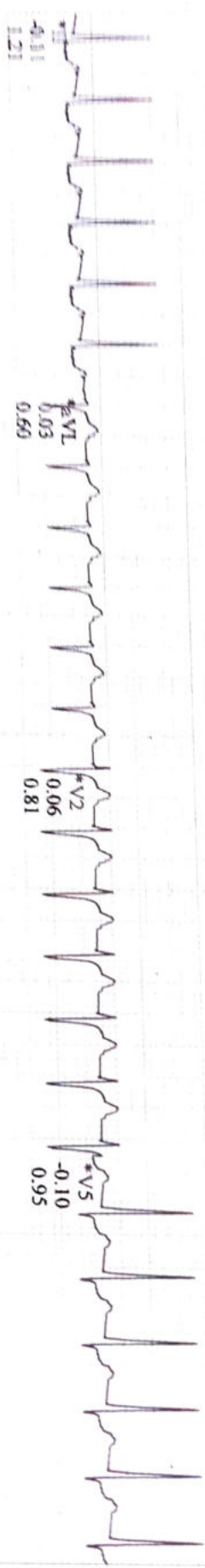
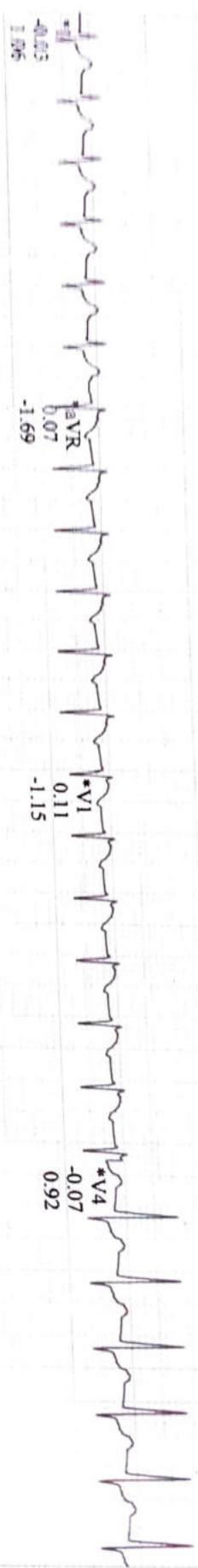
Linked Medians (PEAK EXERCISE)

148 bpm
124/80 mmHg

EXERCISE
STAGE 3
07:29

BRUCE
3.4 mph
14.0 %

Lead
ST Level (mV)
ST Slope (mV/s)



*Computer Synthesized Rhythms

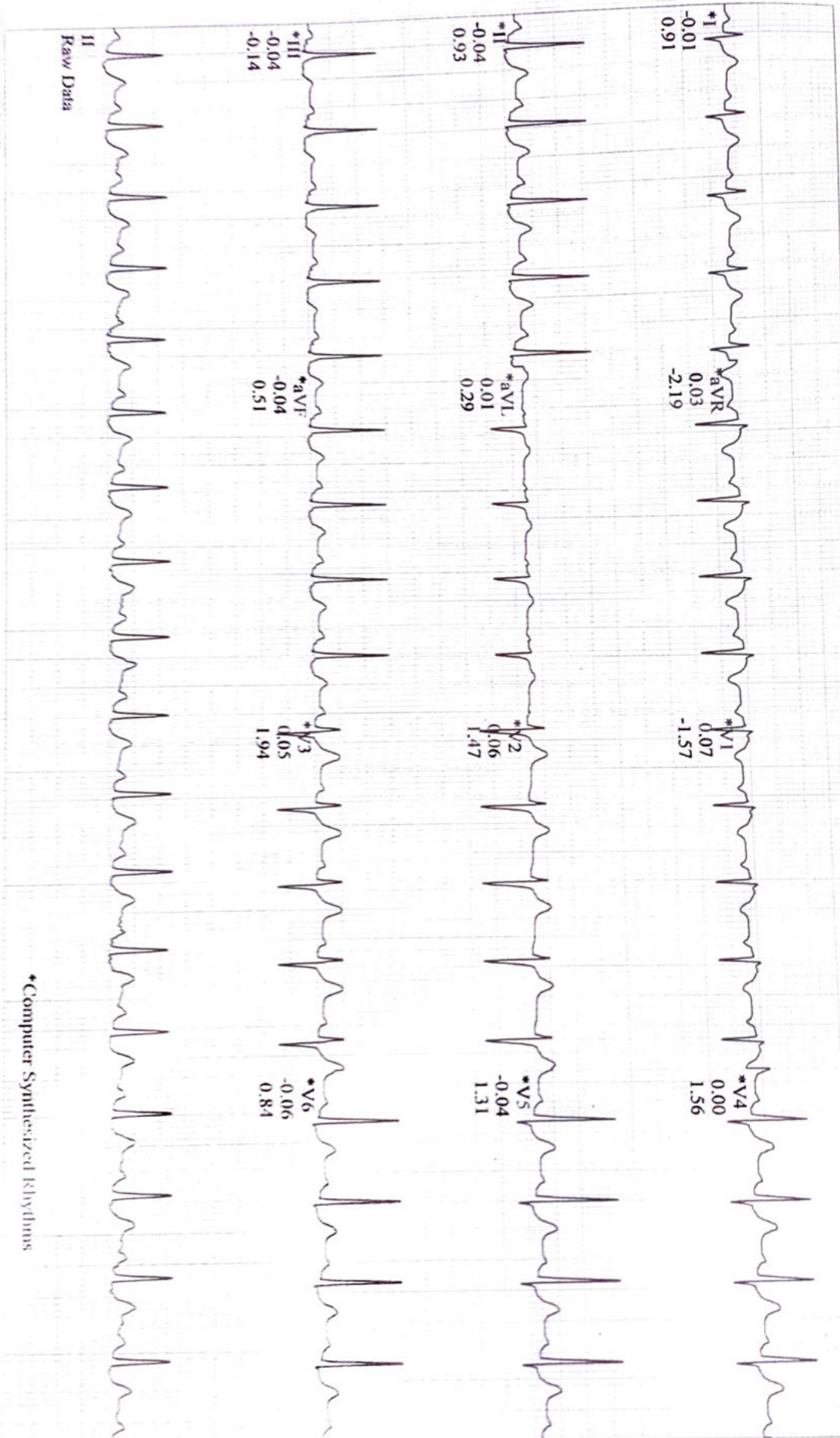
Linked Medians

110 bpm
150/80 mmHg

RECOVERY
#1
01:00

BRUCE
0.0 mph
0.0 %

Lead
ST Level (mV)
ST Slope (mV/s)



Raw Data

*Computer Synthesized Rhythms

Linked Medians

RECOVERY

#1

03:00

96 bpm

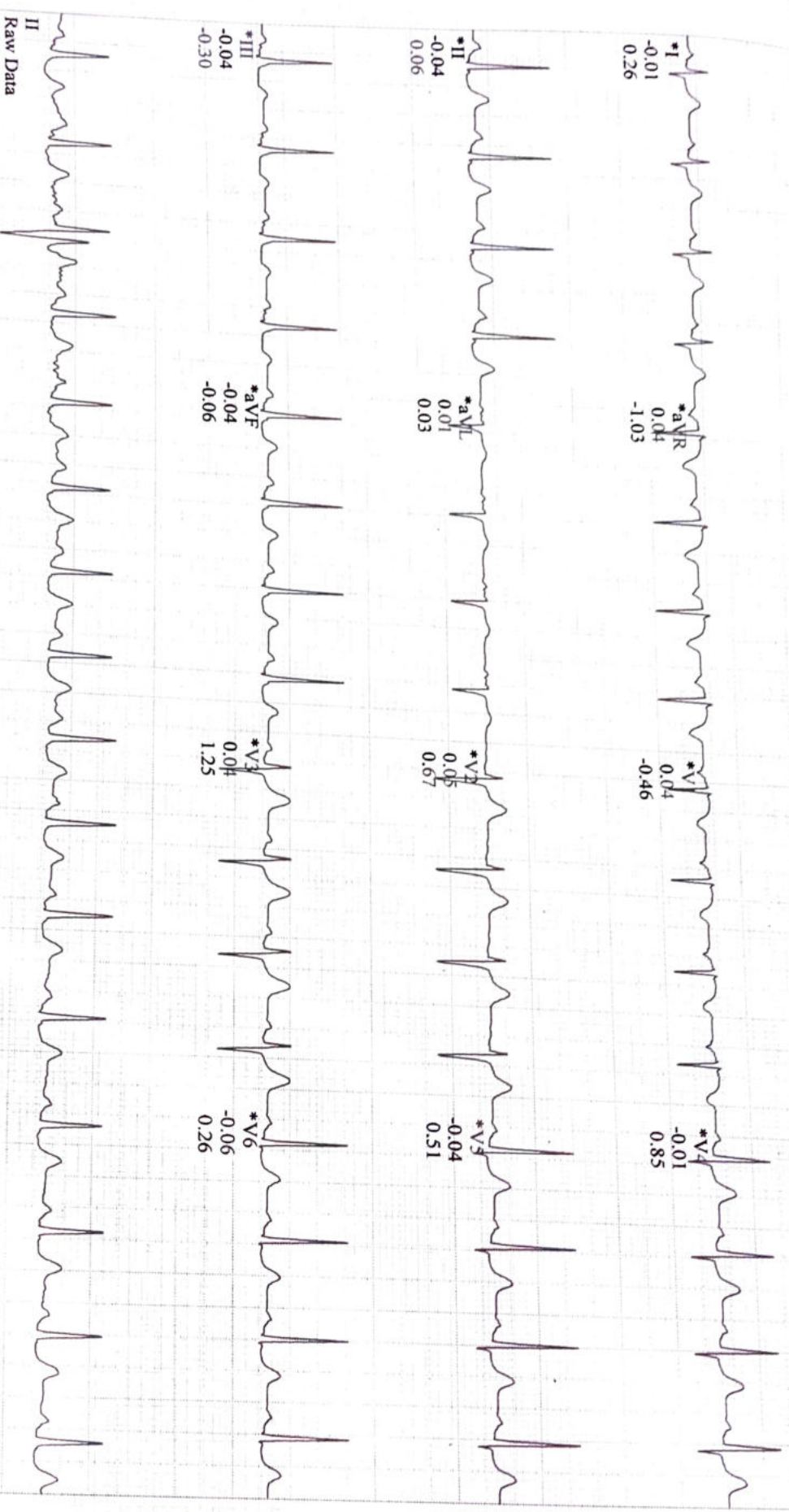
130/80 mmHg

BRUCE

0.0 mph

0.0 %

Lead
ST Level (mV)
ST Slope (mV/s)



Raw Data

*Computer Synthesized Rhythms

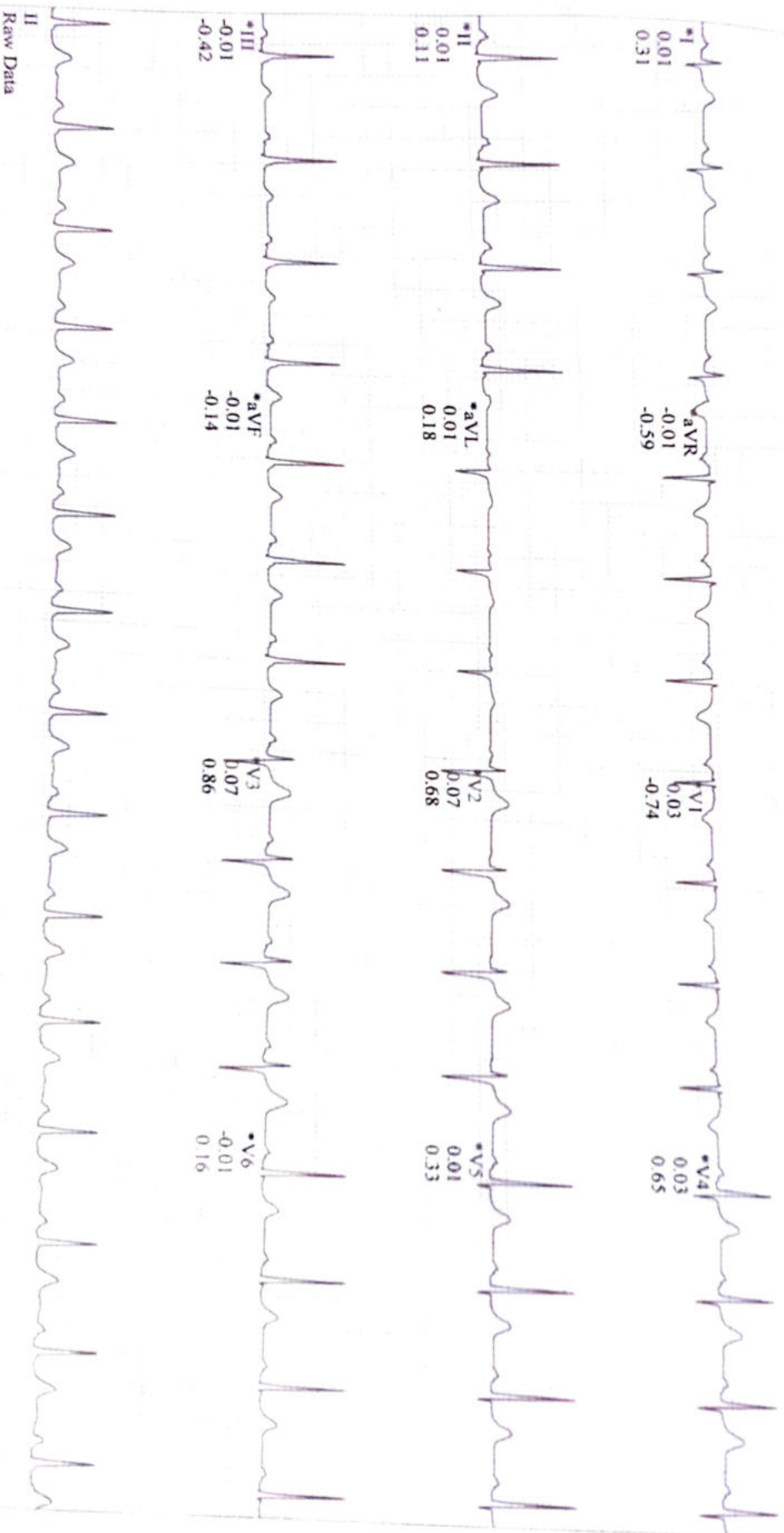
Linked Medians

87 bpm
120/80 mmHg

RECOVERY #1
05:00

BRUCE
0.0 mph
0.0%

Lead
ST Level (mV)
ST Slope (mV/s)



Raw Data

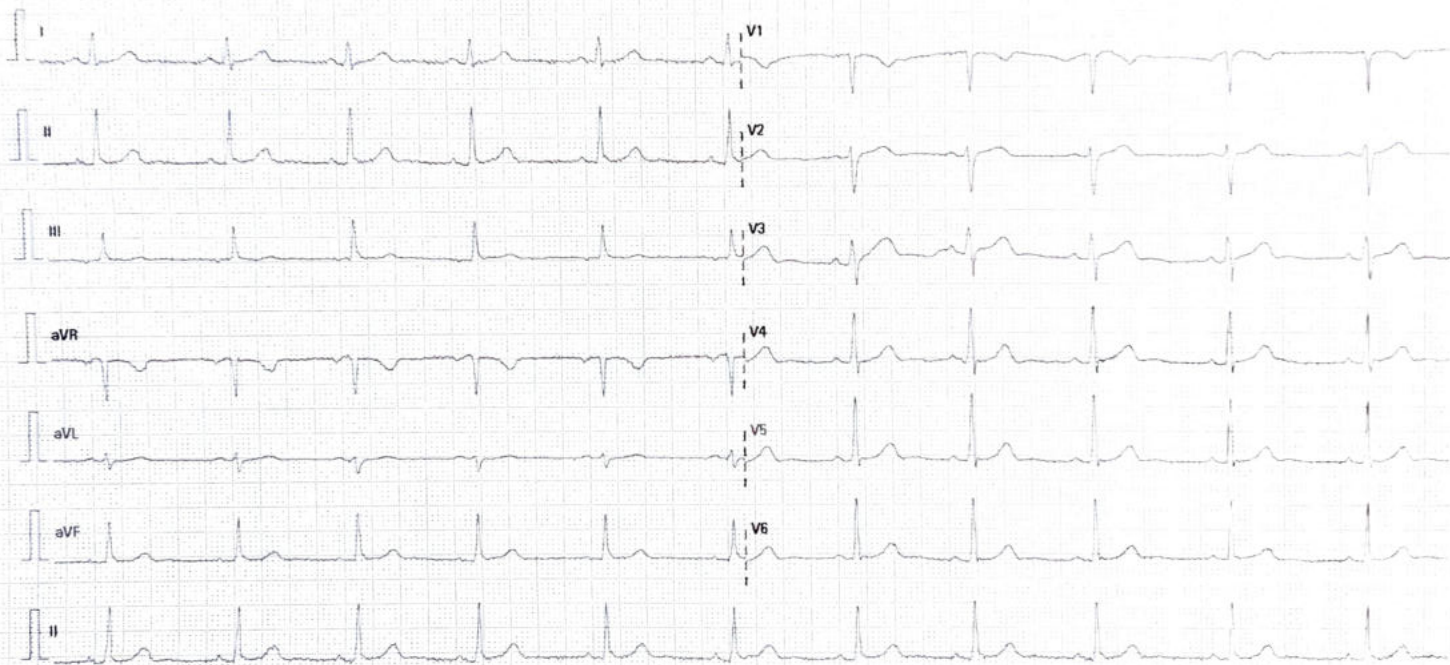
*Computer Synthesized Rhythms

ID: 2015 159
Name: MR JANARDHAN B
Age: 40 Years
Gender: Male

24-04-2023 11:03:38 AM

Vent Rate	66 bpm
PR Interval	130 ms
QRS Duration	86 ms
QT/QTc Interval	378/389 ms
P/QRS/T Axes	15/68/43 deg

QTc: Hodges



OPD SHEET

PATIENT NAME : MR. JANARDHAN B

: 2015-0159

MRN NO

: 40YRS MALE

AGE

DOCTOR NAME : DR. PRIYA

DEPT: FAMILY MEDS

Sp No 180, mro 49, FR 67k/m, Spoz 100%, wt 80 2/19