

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Sandhya MRN : 2015000001164 Gender/Age : FEMALE , 33y (09/03/1990)

Collected On : 26/08/2023 10:31 AM Received On : 26/08/2023 12:05 PM Reported On : 26/08/2023 04:07 PM

Barcode : 032308260198 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9164956837

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

Colour	Yellow	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction) (pH Indicator Method)	5.5	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.013	-	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
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	0.2	/hpf	0-5
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RBC	3.5	/hpf	0-4
Epithelial Cells	2.3	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	2.0	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	0.00	-	-

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.

Urine For Sugar (Fasting) (Enzyme Method (GOD POD)) Not Present - -

Urine For Sugar (Post Prandial) (Enzyme Method (GOD POD)) Not Present - -



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

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Colorimetric - Glucose Oxidase Peroxidase)	89	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020



Patient Name : Ms Sandhya MRN : 2015000001164 Gender/Age : FEMALE , 33y (09/03/1990)

Post Prandial Blood Sugar (PPBS) (Colorimetric - 94 mg/dL 70 to 139 : Normal
Glucose Oxidase Peroxidase) 140 to 199 : Pre-diabetes
=>200 : Diabetes
ADA standards 2020

HBA1C

HbA1c (HPLC NGSP Certified) 5.6 % Normal: 4.0-5.6
Prediabetes: 5.7-6.4
Diabetes: => 6.5
ADA standards 2020

Estimated Average Glucose (Calculated) 114.02 - -

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 0.58 mg/dL 0.52-1.04
Aminohydrolase)

eGFR (Calculated) 119.8 mL/min/1.73m² 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 5 L mg/dL 7.0-17.0
/Colorimetric – Urease)

Serum Uric Acid (Colorimetric - Uricase,Peroxidase) 3.43 mg/dL 2.5-6.2

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

Cholesterol Total (Colorimetric - Cholesterol 161 mg/dL Desirable: < 200
Oxidase) Borderline High: 200-239
High: > 240

Triglycerides (Colorimetric - Lip/Glycerol Kinase) 114 mg/dL Normal: < 150
Borderline: 150-199
High: 200-499
Very High: > 500

HDL Cholesterol (HDLC) (Colorimetric: Non HDL 44 mg/dL 40.0-60.0
Precipitation Phosphotungstic Acid Method)

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Non-HDL Cholesterol (Calculated)	117.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	100 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	22.8	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	3.7	-	0.0-5.0
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)	1.33	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence)	10.1	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence)	0.9057	µIU/mL	> 18 Year(s) : 0.4 -4.5 Pregnancy: 1st Trimester: 0.129-3.120 2nd Trimester: 0.274-2.652 3rd Trimester: 0.312-2.947

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.

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.60	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.00	mg/dL	0.0-0.3
Unconjugated Bilirubin (Indirect) (Calculated)	0.6	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.20	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.20	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.0	gm/dL	2.0-3.5

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Albumin To Globulin (A/G)Ratio (Calculated)	1.41	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	21	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	24	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	55	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	42	U/L	12.0-43.0

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.



Dr. Anushre Prasad
MBBS,MD, Biochemistry
Consultant Biochemistry



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

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	11.0 L	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.31	million/ μ l	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	34.4 L	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	79.8 L	fL	83.0-101.0

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MCH (Mean Corpuscular Haemoglobin) (Calculated)	25.5 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.0	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	15.0 H	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	354	10 ³ /μL	150.0-450.0
Mean Platelet Volume (MPV)	8.8	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	7.1	10 ³ /μL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	59.9	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	30.9	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	6.9	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	2.0	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.3	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	4.26	x10 ³ cells/μl	2.0-7.0
Absolute Lymphocyte Count (Calculated)	2.2	x10 ³ cells/μl	1.0-3.0
Absolute Monocyte Count (Calculated)	0.49	x10 ³ cells/μl	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.15	x10 ³ cells/μl	0.02-0.5
Absolute Basophil Count (Calculated)	0.03	-	-

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.

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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)	29 H	mm/1hr	0.0-12.0
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(Westergren Method)

Interpretation Notes

- ESR high - Infections, chronic disorders,, plasma cell dyscrasias.

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

NARAYANA HRUDAYALAYA BLOOD CENTRE

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

--End of Report--



Patient Name : Ms Sandhya MRN : 2015000001164 Gender/Age : FEMALE , 33y (09/03/1990)



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

Note

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



Patient Name	MS.SANDHYA	Requested By	EHP
MRN	20150000001164	Procedure DateTime	26-08-2023 11:43
Age/Sex	33Y 5M/Female	Hospital	NH-JAYANAGAR

CHEST RADIOGRAPH (PA VIEW)

CLINICAL DETAILS: For executive health checkup.

FINDINGS:

- The lung fields and bronchovascular markings appear normal.
- The cardiac size is within normal limits.
- Mediastinum and great vessels are within normal limits.
- Trachea is normal and is central. The hilar shadows are unremarkable.
- The costo-phrenic angles are clear. No evidence of pleural effusion or pneumothorax.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

IMPRESSION:

- **No significant abnormality detected.**



Dr Sunil Kumar K, MD
Fellowship in abdominal and MSK Radiology
Consultant in Body imaging

* This is a digitally signed valid document. Reported Date/Time: 26-08-2023 14:09

*This report has been generated from **NH Teleradiology 24/7**, a service of Narayana Health*

-- End of Report --

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Narayana Multispeciality Clinic

17/1, 30th Cross, 8th 'B' Main Road, 4th Block, Jayanagar, Bangalore - 560 011

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

ADULT TRANS-THORACIC ECHO REPORT

NAME : MRS.SANDYA

AGE/SEX : 33YRS/FEMALE

MRN NO :20110000001164

DATE : 26.08.2023

FINAL DIAGNOSIS:

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

MEASUREMENTS

AO: 29 mm LVID (d) : 40 mm IVS (d) : 10 mm RA : 32 MM
LA: 30 mm LVID(s) : 25 mm PW (d) : 10 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-19 MM, NORMAL RV FUNCTION
RVOT/LVOT : NORMAL



SEPTAE

IVS : INTACT

IAS : INTACT

GREAT ARTERIES

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

PULMONARY ARTERY : NORMAL

DOPPLER DATA

MITRAL VALVE : E/A – 0.7/0.5M/S, MR-MILD

AORTIC VALVE : PG- 6 MMHG

TRICUSPID VALVE : TR-TRIVIAL, PASP- 23MMHG

PULMONARY VALVE : PG- 3 MMHG

WALL MOTION ABNORMALITIES: NO RWMA

PERICARDIUM : NORMAL

VEGETATION/THROMBUS: ABSENT

OTHER FINDINGS

IVC- 13 MM NORMAL SIZED, COLLAPSIBILITY >50%, RAP -3 MM
SINUS RHYTHM/ HR – 85BPM

M. Gijb
GULSUM JAMEEL FATHIMAM M
CARDIAC SONOGRAPHER

