

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Deepa M S MRN : 2015000000160 Gender/Age : FEMALE , 36y (24/08/1986)

Collected On : 24/04/2023 09:07 AM Received On : 24/04/2023 01:17 PM Reported On : 24/04/2023 06:15 PM

Barcode : 012304240647 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

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

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	91	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020
<b>Post Prandial Blood Sugar (PPBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	95	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020
<b>HbA1C</b>			
HbA1c (HPLC NGSP Certified)	5.0	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	96.8	-	-

**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)	0.55	mg/dL	0.52-1.04
eGFR (Calculated)	125.1	mL/min/1.73m <sup>2</sup>	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric – Urease)	8	mg/dL	7.0-17.0



Patient Name : Ms Deepa M S MRN : 2015000000160 Gender/Age : FEMALE , 36y (24/08/1986)  
**Serum Uric Acid** (Colorimetric - Uricase,Peroxidase) 5.3 mg/dL 2.5-6.2

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

Cholesterol Total (Colorimetric - Cholesterol Oxidase)	<b>212 H</b>	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	<b>156 H</b>	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	42	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	<b>170.0 H</b>	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	<b>127 L</b>	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	31.2	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	<b>5.1 H</b>	-	0.0-5.0

**THYROID PROFILE (T3, T4, TSH)**

Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)	0.973	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence)	11.0	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence)	<b>13.99 H</b>	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)**



Patient Name : Ms Deepa M S MRN : 2015000000160 Gender/Age : FEMALE , 36y (24/08/1986)			
Bilirubin Total (Colorimetric -Diazo Method)	1.00	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)	0.9	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.70	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.20	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.5	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.2	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	25	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	18	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	100	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	17	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.



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



Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

#### HEMATOLOGY

Patient Name : Ms Deepa M S MRN : 2015000000160 Gender/Age : FEMALE , 36y (24/08/1986)

Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Westergren Method)	9	mm/1hr	0.0-12.0

**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

**HEMATOLOGY**

Test	Result	Unit	Biological Reference Interval
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Photometric Measurement)	<b>11.9 L</b>	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.44	million/ $\mu$ l	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	36.2	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	<b>81.5 L</b>	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	<b>26.7 L</b>	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.7	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.1	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	294	$10^3/\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	7.0	$10^3/\mu$ L	4.0-10.0

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### DIFFERENTIAL COUNT (DC)

Neutrophils (VCS Technology Plus Microscopy)	57.8	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	27.6	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	10.0	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	3.4	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	1.2	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	4.05	$\times 10^3$ cells/ $\mu$ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	1.94	$\times 10^3$ cells/ $\mu$ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.7	$\times 10^3$ cells/ $\mu$ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.24	$\times 10^3$ cells/ $\mu$ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.09	-	-

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.

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

#### CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
<b>Urine For Sugar (Fasting)</b> (Enzyme Method (GOD POD))	Not Present	-	-

#### STOOL ROUTINE EXAMINATION

##### PHYSICAL EXAMINATION

Colour	Yellowish	-	-
Consistency	Semi Solid	-	-
Mucus	Absent	-	-
Blood	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	-	-
Pus Cells	4-6	/hpf	0-5
	Not Present	-	-

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#### Narayana Institute of Cardiac Sciences

(A Unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497

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Hospital Address: NH Health City, 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099

Email: info.nics@narayanahealth.org | www.narayanahealth.org



Appointments  
**1800-309-0309**

Emergencies  
**97384 97384**

Patient Name : Ms Deepa M S MRN : 2015000000160 Gender/Age : FEMALE , 36y (24/08/1986)

**Urine For Sugar (Post Prandial)** (Enzyme)

Method (GOD POD))

--End of Report--



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.  
(Lipid Profile, -> 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)



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Final Report

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Collected On : 24/04/2023 09:07 AM Received On : 24/04/2023 01:12 PM Reported On : 24/04/2023 03:33 PM

Barcode : 1B2304240023 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

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

**NARAYANA HRUDAYALAYA BLOOD CENTRE**

Test	Result	Unit
<b>BLOOD GROUP &amp; RH TYPING</b>		
Blood Group (Column Agglutination Technology)	B	-
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
<b>URINE ROUTINE &amp; MICROSCOPY</b>			
<b>PHYSICAL EXAMINATION</b>			
Colour	STRAW	-	-
Appearance	Not Present	-	-
<b>CHEMICAL EXAMINATION</b>			
pH(Reaction) (pH Indicator Method)	5.0	-	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

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Patient Name : Ms Deepa M S    MRN : 2015000000160    Gender/Age : FEMALE , 36y (24/08/1986)			
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	3.1	/hpf	0-5
RBC	2.5	/hpf	0-4
Epithelial Cells	6.6	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.02	/hpf	0-1
Bacteria	258.2	/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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**Note**

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- Results relate to the sample only.
- Kindly correlate clinically.



Narayana Multispecialty Clinic  
JAYANAGAR  
BANGALORE

Station  
Telephone:

### EXERCISE STRESS TEST REPORT

Patient Name: MS.DEEPA M S,  
Patient ID: 2015-160  
Height: 162 cm  
Weight: 62 kg

DOB: 24.08.1986  
Age: 36yrs  
Gender: Female  
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:  
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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	00:32	0.00	0.00	86	110/70	
	STANDING	00:02	0.00	0.00	86	110/70	
	WARM-UP	01:11	1.20	0.00	95	110/70	
EXERCISE	STAGE 1	03:00	1.70	10.00	130	110/70	
	STAGE 2	03:00	2.50	12.00	151	114/70	
	STAGE 3	01:13	3.40	14.00	166	126/70	
RECOVERY		05:07	0.00	0.00	101	120/70	

The patient exercised according to the BRUCE for 7:12 min:s, achieving a work level of Max. METS: 8.80. The resting heart rate of 86 bpm rose to a maximal heart rate of 169 bpm. This value represents 91 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg , rose to a maximum blood pressure of 130/70 mmHg. The exercise test was stopped due to Target heart rate achieved.

#### Interpretation

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#### Conclusions

GOOD EFFORT TOLERANCE  
NORMAL HR AND BP RESPONSE  
NO ANGINA OR ARRHYTHMIAS  
MILD ST-T CHANGES NOTED DURING EXERCISE AND RECOVERY  
IMP:CORRLATE CLINICALLY

Physician \_\_\_\_\_ Technician \_\_\_\_\_

Linked Medians

88 bpm  
110/70 mmHg

PRETEST  
SUPINE  
00:26

BRUCE  
0.0 mph  
0.0 %

Narayana Multispecialty Clinic

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



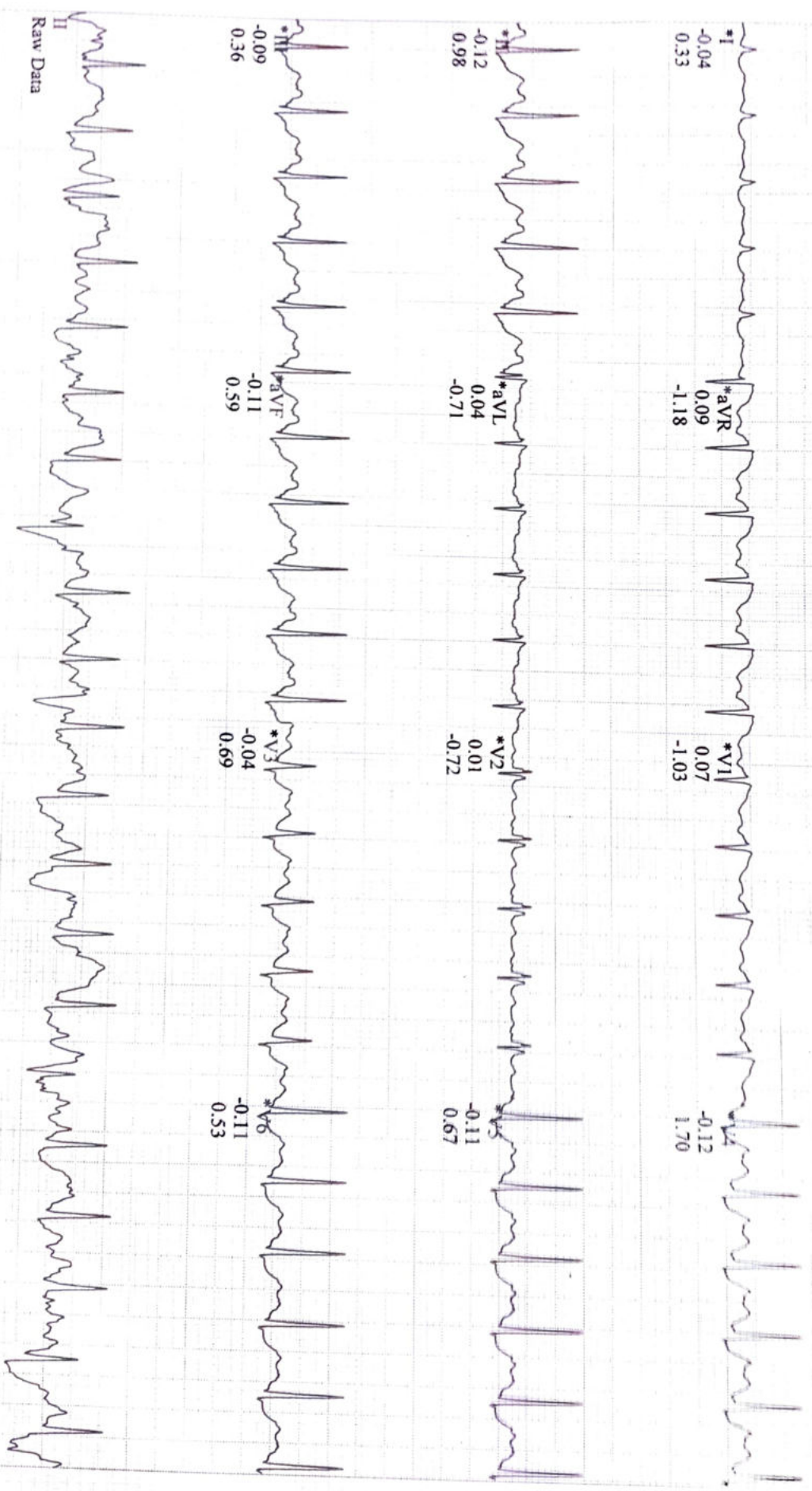
Raw Data

\*Computer Synthesized Rhythms

GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(Q1,V5)

Start of Test: 12-22-07

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

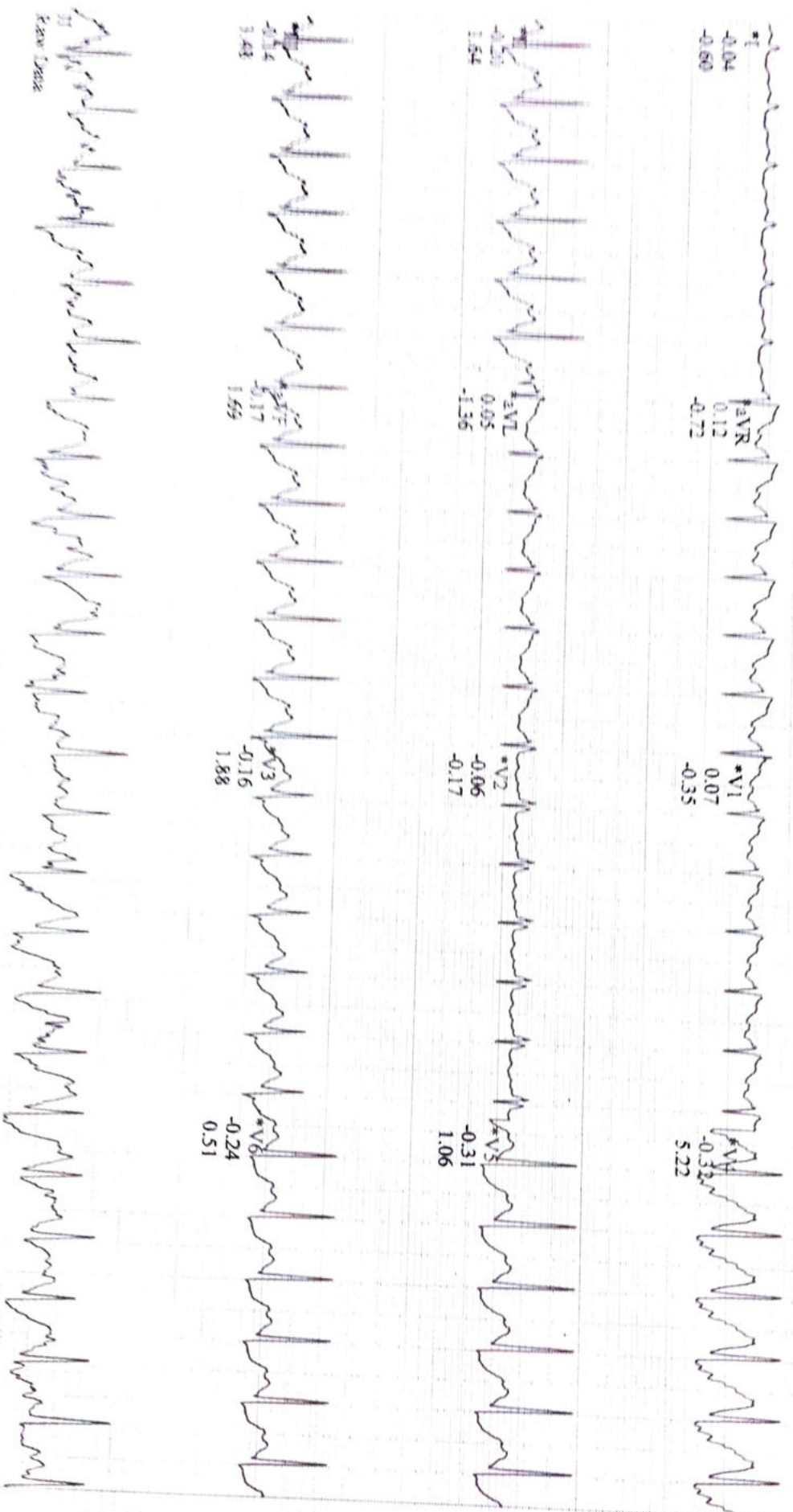


\*Computer Synthesized Rhythms

150 bpm  
114/70 mmHg  
EXERCISE  
STAGE 2  
05:50

BRUCE  
2.5 mph  
12.0 %

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



31  
Kaw Sana

File CardiacSoc06 V6 73 (2)  
25 mm/s 10 mm/mV 50Hz (1.0) - 2033z S+ 33P(V5J1)

\*Computer Synthesized Rhythms

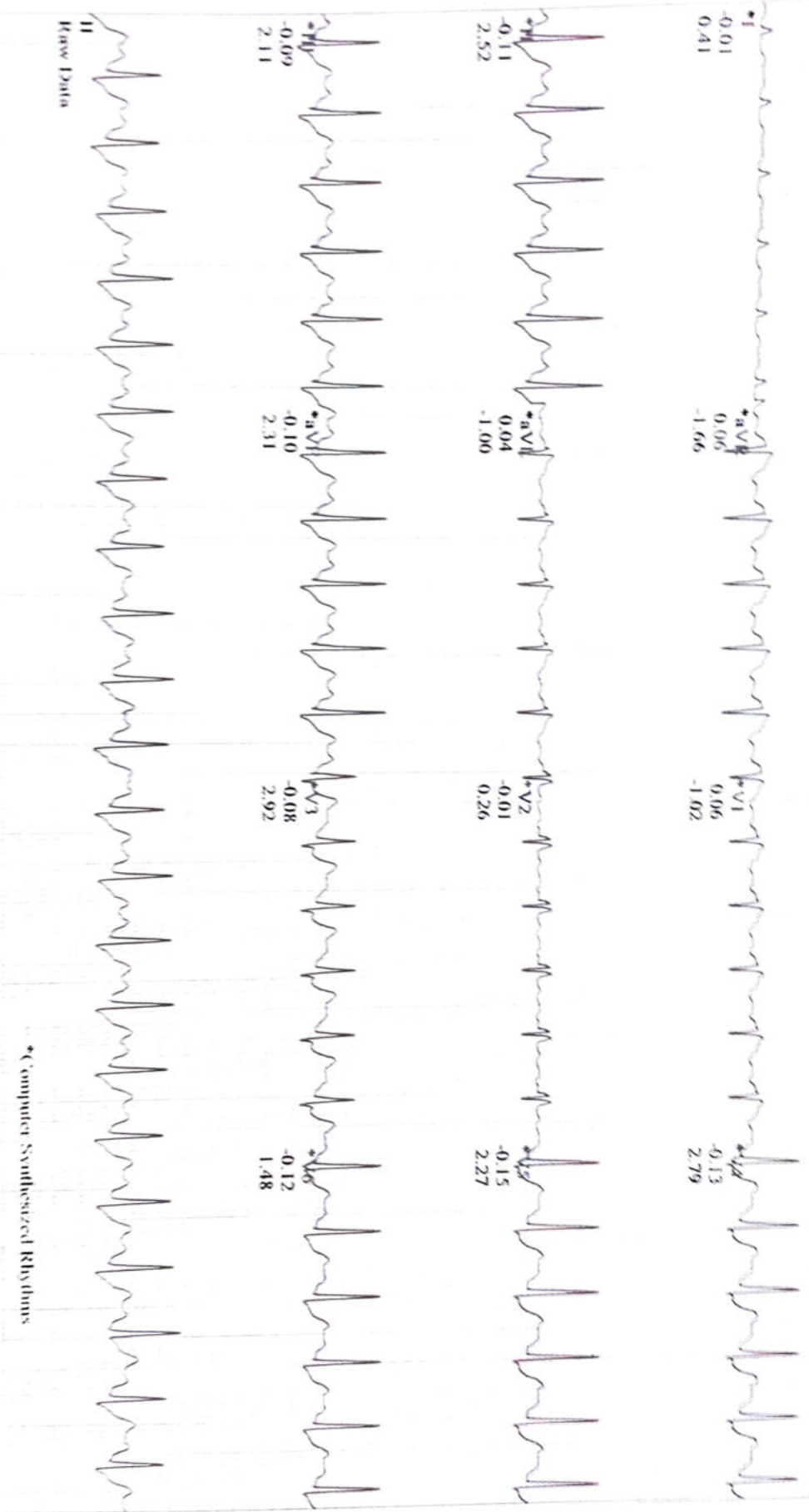


136 bpm  
120190mmHg

Linked Medians  
RECOVERY #1  
01:00

BRUCE  
0.0 mph  
0.0%

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



II  
Raw Data

\*Computer Synthesized Rhythms



Linked Medians

RECOVERY

109 bpm

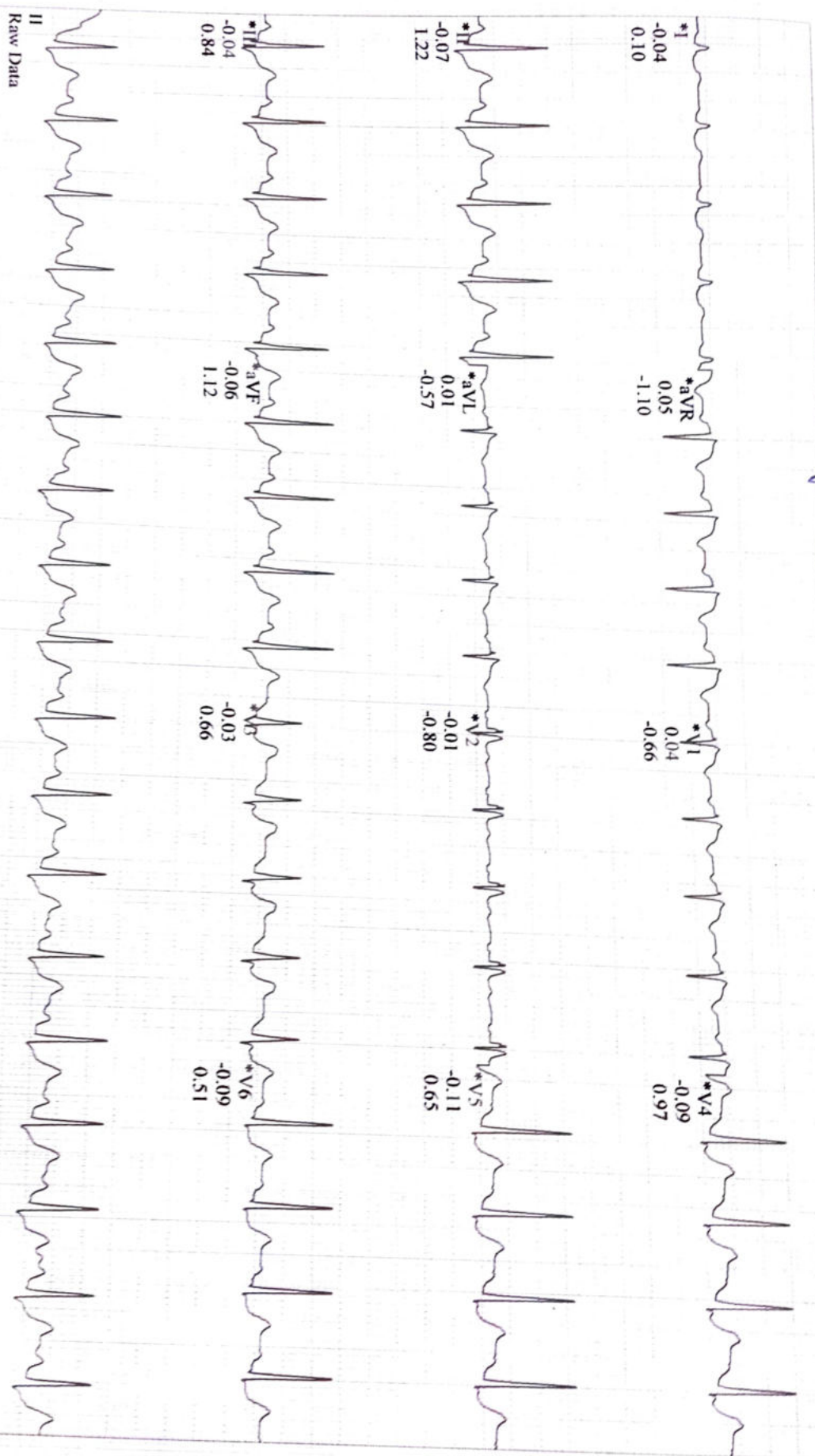
#1

03:00

BRUCE  
0.0 mph  
0.0 %

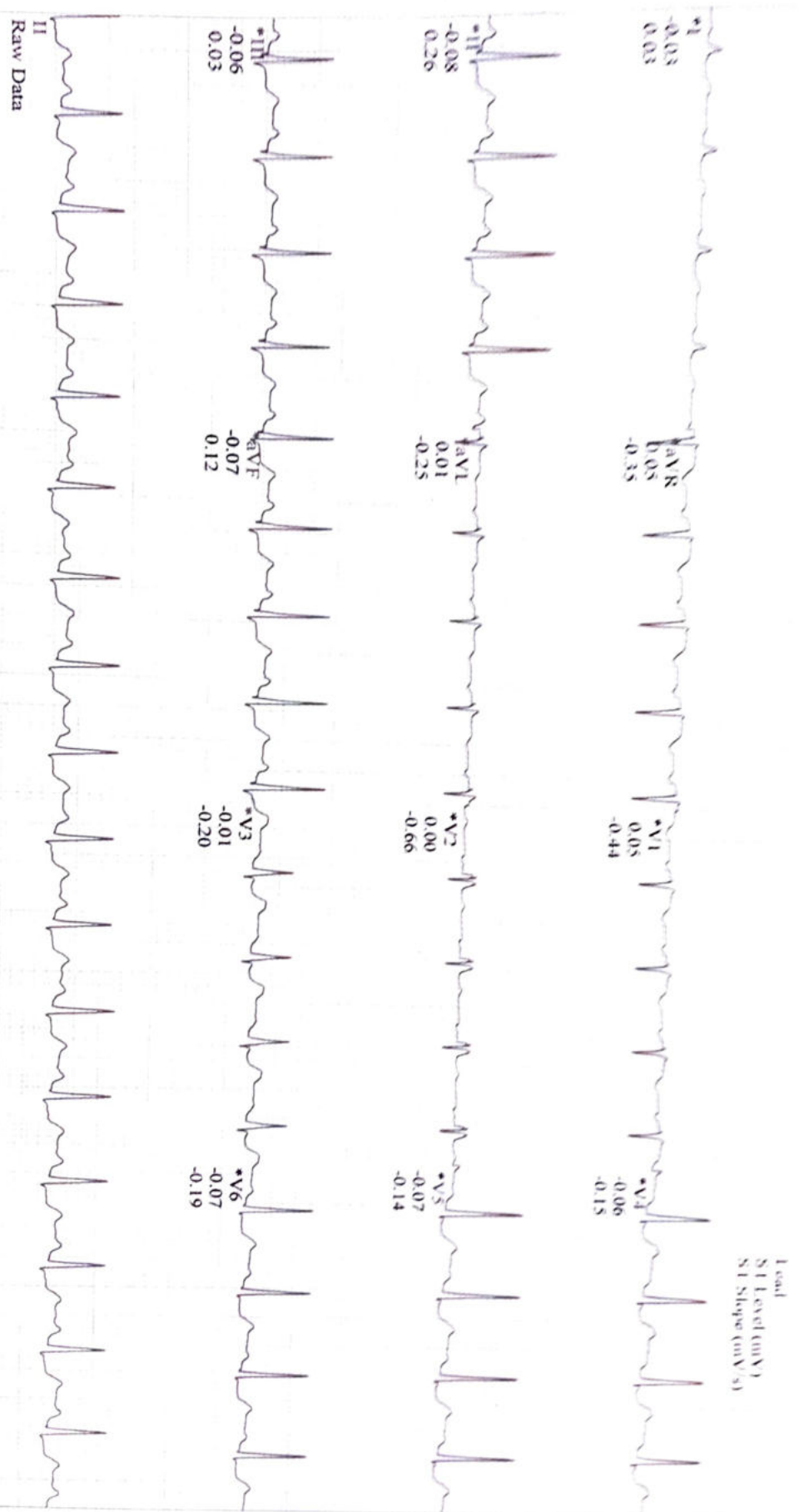
130/80 mmHg

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



Raw Data

\*Computer Synthesized Rhythms



\*Computer Synthesized Rhythms

**Patients Name : Mrs Deepa M S**  
**Age : 36Years**  
**Referring Doctor : EHP**

**Patient ID : 2015000000160**  
**Sex : Female**  
**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 course and caliber. **CBD** is not dilated.

**Gallbladder** is normal without evidence of calculi, wall thickening or pericholecystic fluid.

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

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

**Right Kidney** is normal in size (measures 9.5 cm in length & 1.5 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Left Kidney** is normal in size (measures 10.3 cm in length & 1.5 cm 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.

**Uterus** is anteverted and **Bulky** in size, measures 8.9x3.4x5.1 cm. Myometrial and endometrial echoes are normal. **Endometrium** measures 7 mm. Endometrial cavity is empty.

**Both ovaries** are normal in size and echopattern.

**Right ovary:** measures 3.1x1.8 cm

**Left ovary:** measures 3.0x1.7 cm

**Umbilic Hernia with a Defect measuring 2.3cm with Herniation of Omentum**

**Both adnexa:** No mass is seen.

There is no ascites or pleural effusion.

**IMPRESSION:**

- **Grade 1 Fatty Liver**
- **Bulky Uterus**
- **Umbilic 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.

**Narayana Multispeciality Clinic**

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

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

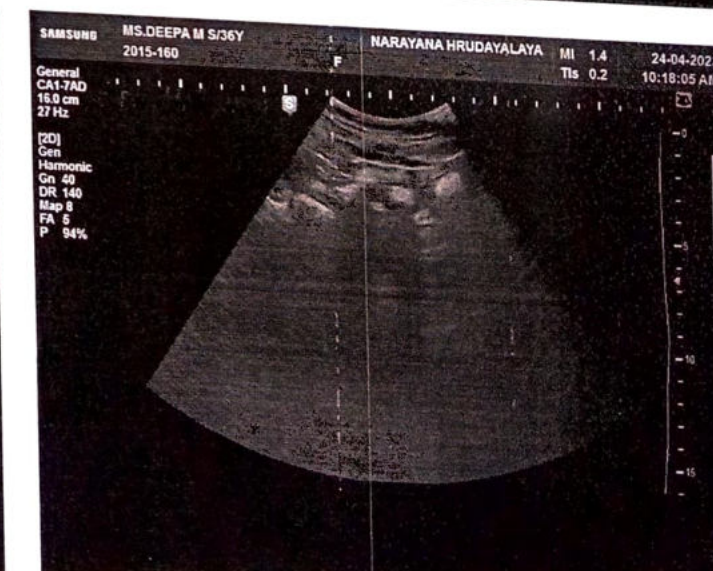
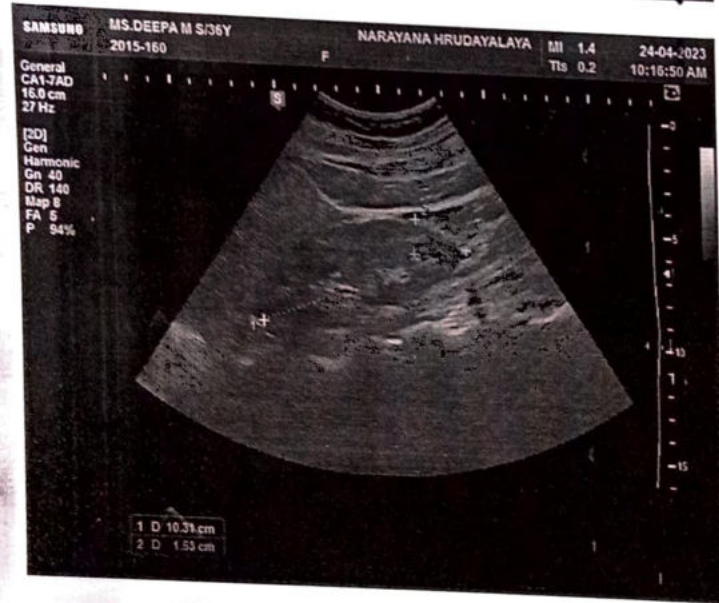
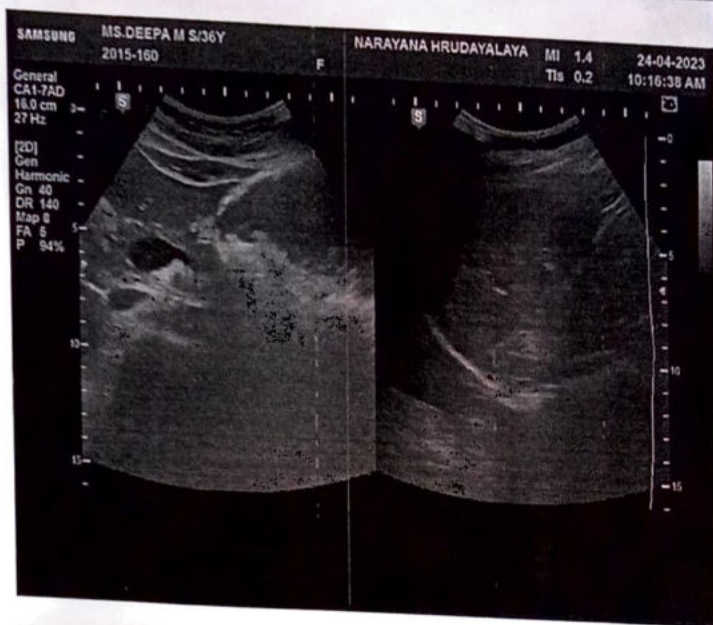
E-mail: info.jayanagar@narayanahealth.org, web : www.narayanahealth.org

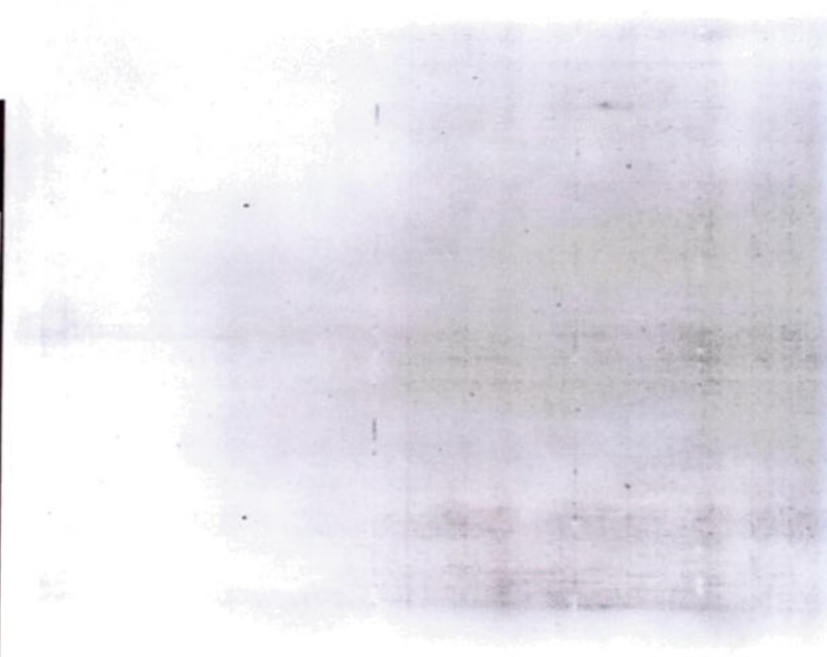
Name  
Birth Date  
Gender

2015-160  
MS.DEEPA M S/36Y  
Female

Exam  
Accession #  
Exam Date  
Description  
Operator

24-04-2023





**ADULT TRANS-THORACIC ECHO REPORT**

**NAME : MRS.DEEPA M S**

**AGE/SEX : 36YRS/FEMALE**

**MRN NO : 2015000000160**

**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) : 40 MM                      IVS (d) : 10 MM                      RA : 36 MM  
LA: 36 MM                      LVID(s) : 28 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-20 MM, NORMAL RV FUNCTION  
RVOT/LVOT : NORMAL



**Narayana Multispeciality Clinic**

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

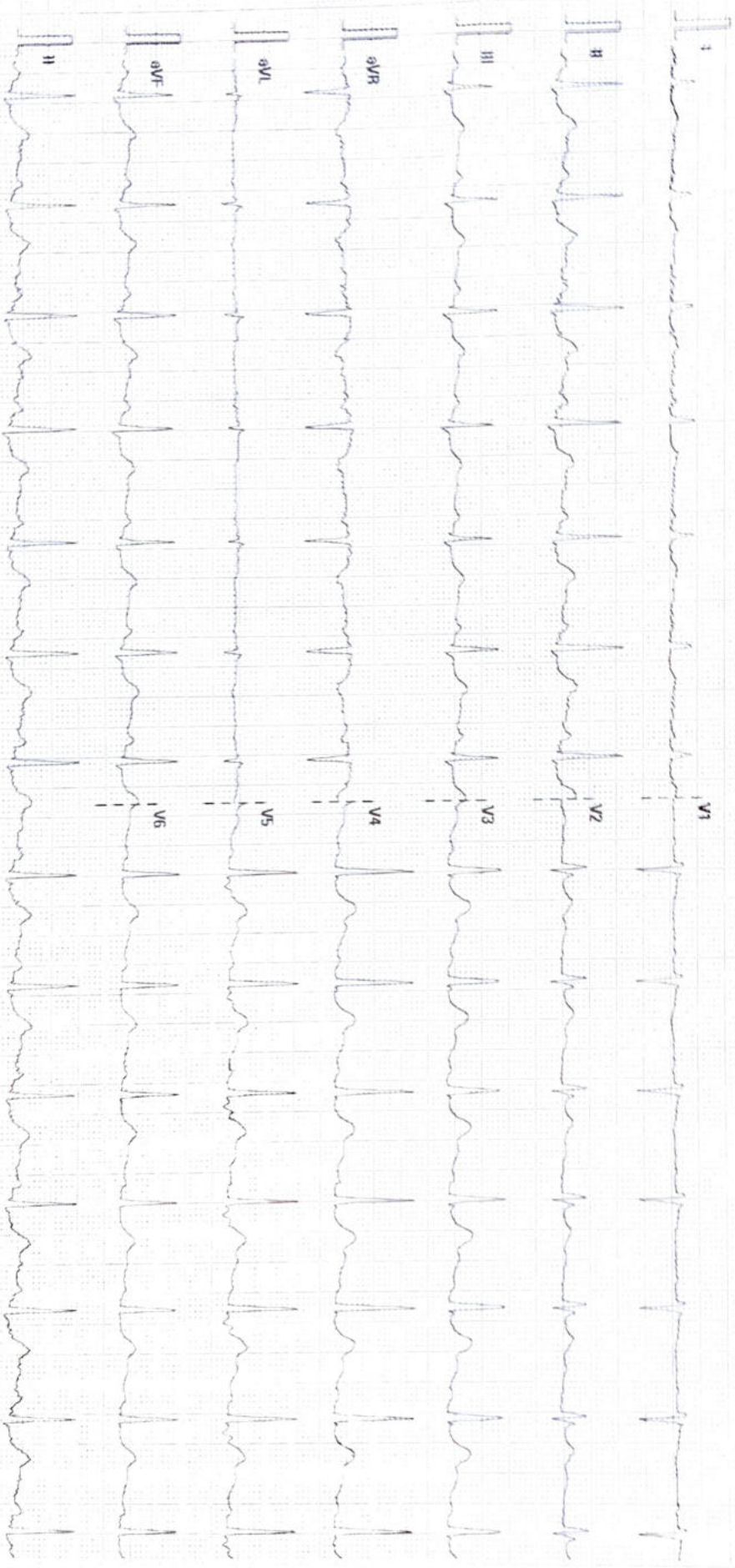
Clinic No. : 8884000991, 9513919615, Pharmacy No. : 9513919615

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

ID: 2015-1356  
Name: MRS DEEPA M S  
Age: 35 years  
Gender: Female

24-04-2023 11:11:56 AM

Heart Rate: 81 bpm  
PR Interval: 158 ms  
QRS Duration: 92 ms  
QT/QTc Interval: 376/413 ms  
P/QRS/T Axes: 71/64/69 deg  
Dr: Chidambaram



25 mm/s

10 mm/mV

50 Hz

BDR 35 Hz

NARAYANA HEALTH, JAYANAGAR

02.06.00.V28.4.1

SN: N-73001176

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Deepa M S MRN : 2015000000160 Gender/Age : FEMALE , 36y (24/08/1986)  
Collected On : 24/04/2023 09:08 AM Received On : 24/04/2023 04:43 PM Reported On : 24/04/2023 05:05 PM  
Barcode : 012304240649 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)  
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8074677972

**Test**

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Post Prandial Blood Sugar (PPBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	95	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

--End of Report--



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



Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

**Note**

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.  
(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)





OPD SHEET

PATIENT NAME : MRS. DEEPA M S

MRN NO : 2015-0160

AGE : 36-YRS FEMALE

DOCTOR NAME : DR. PRIYA

DEPT: FAMILY MEDS

*Dr. Nalfo Muttu, PR 88.6kg, SpO2 97%, at 62.1kg*

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