Patient Name :
 Mr STALIN MISHRA
 MRN : 20010000074189
 Gender/Age : MALE , 41y (23/04/1982)

 Collected On :
 14/08/2023 08:23 AM
 Received On :
 14/08/2023 10:46 AM
 Reported On :
 14/08/2023 12:30 PM

 Barcode :
 212308140006
 Specimen :
 Whole Blood
 Consultant :
 Dr. S Shreyas(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-004 Patient Mobile No : 9583109258

	HAEMATOLOGY LAB		
Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Oxymethemoglobin Method)	13.1	g/dL	13.0-17.0
Red Blood Cell Count (Coulter Principle/Electrical Impedence)	4.97	Million/ul	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	41.2	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	83	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	26.2 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.7	g/L	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	16.6 H	%	11.6-14.0
Platelet Count (Coulter Principle/Electrical Impedence)	90 L	Thous/μL	150.0-450.0
platelet count verified manually. Macroplatelet	cs +		
Total Leucocyte Count(WBC) (Coulter Principle /Electrical Impedence)	6.9	Thous/cumm	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils	56.9	%	35.0-66.0
Lymphocytes	35.6	%	20.0-40.0
Monocytes	4.6	%	2.0-10.0
Eosinophils	2.8	%	1.0-6.0

Patient Name : Mr STALIN MISHRA	MRN : 20010000074189	Gender/Age : MALE	, 41y (23/04/1982)	
Basophils	0.1	%	0.0-1.0	
Absolute Neutrophil Count	3.93	-	2.0-7.0	
Absolute Lymphocyte Count	2.46	-	1.0-3.0	
Absolute Monocyte Count	0.32	-	0.2-1.0	
Absolute Eosinophil Count	0.19	-	0.02-0.5	
Absolute Basophil Count	0.01 L	-	0.02-0.1	

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

--End of Report-

Seen S

Dr. Seema Sivasankaran MD, DNB CONSULTANT PATHOLOGIST

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



 Patient Name :
 Mr STALIN MISHRA
 MRN : 20010000074189
 Gender/Age : MALE , 41y (23/04/1982)

 Collected On :
 14/08/2023 08:23 AM
 Received On :
 14/08/2023 10:46 AM
 Reported On :
 14/08/2023 01:01 PM

 Barcode :
 212308140007
 Specimen :
 Whole Blood
 Consultant :
 Dr. S Shreyas(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-004 Patient Mobile No : 9583109258

	LAB - BLOOD	BANK
Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group	А	-
RH Typing	Positive	-

--End of Report-

Seen S

Dr. Seema Sivasankaran MD, DNB CONSULTANT PATHOLOGIST

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- Kindly correlate clinically.



Patient Name : Mr STALIN MISHRA MRN : 20010000074189 Gender/Age : MALE , 41y (23/04/1982)

Collected On: 14/08/2023 08:23 AM Received On: 14/08/2023 10:46 AM Reported On: 14/08/2023 11:41 AM

Barcode : 202308140012 Specimen : Plasma Consultant : Dr. S Shreyas(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-004 Patient Mobile No : 9583109258

BIOCHEMISTRY			
Test	Result	Unit	<b>Biological Reference Interval</b>
Fasting Blood Sugar (FBS) (Hexokinase)	95	mg/dL	ADA standards 2020 =>126 : Diabetes 70 to 99 : Normal 100 to 125 : Pre-diabetes

--End of Report-

Seen S

Dr. Seema Sivasankaran MD, DNB CONSULTANT PATHOLOGIST

#### Note

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- Kindly correlate clinically.



Patient Name : Mr STALIN MISHRA MRN : 20010000074189 Gender/Age : MALE , 41y (23/04/1982)

Collected On: 14/08/2023 11:32 AM Received On: 14/08/2023 01:46 PM Reported On: 14/08/2023 02:31 PM

Barcode : 202308140039 Specimen : Plasma Consultant : Dr. S Shreyas(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-004 Patient Mobile No : 9583109258

BIOCHEMISTRY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
<b>Post Prandial Blood Sugar (PPBS)</b> (Glucose Oxidase, Peroxidase)	99	mg/dL	ADA standards 2020 =>200 : Diabetes 70 to 139 : Normal 140 to 199 : Pre-diabetes	

--End of Report-

Jeen S

Dr. Seema Sivasankaran MD, DNB CONSULTANT PATHOLOGIST

#### Note

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- Kindly correlate clinically.



 Patient Name :
 Mr STALIN MISHRA
 MRN : 20010000074189
 Gender/Age : MALE , 41y (23/04/1982)

 Collected On :
 14/08/2023 08:23 AM
 Received On : 14/08/2023 10:46 AM
 Reported On : 14/08/2023 12:45 PM

Barcode : 212308140005 Specimen : Whole Blood - ESR Consultant : Dr. S Shreyas(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-004 Patient Mobile No : 9583109258

	HAEMATOLOGY LAB			
Test	Result	Unit	<b>Biological Reference Interval</b>	
Erythrocyte Sedimentation Rate (ESR)	15 H	mm/1hr	0.0-10.0	

--End of Report-

Jeen De

Dr. Seema Sivasankaran MD, DNB CONSULTANT PATHOLOGIST

#### Note

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- Kindly correlate clinically.



 Patient Name :
 Mr STALIN MISHRA
 MRN : 20010000074189
 Gender/Age : MALE , 41y (23/04/1982)

 Collected On :
 14/08/2023 08:23 AM
 Received On : 14/08/2023 10:46 AM
 Reported On : 14/08/2023 12:12 PM

Barcode : 202308140013 Specimen : Serum Consultant : Dr. S Shreyas(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-004 Patient Mobile No : 9583109258

BIOCHEMISTRY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
SERUM CREATININE				
Serum Creatinine (Enzymatic Method (hydrolase, Oxidase, Peroxidase))	0.96	mg/dL	0.66-1.25	
eGFR (Calculated)	86.4	mL/min/1.73m2	Indicative of renal impairment : < 60 Note:eGFR is inaccurate for Hemodyamically unstable patients eGFR is not applicable for less than 18 years of age.	
Blood Urea Nitrogen (BUN) (Enzymatic Method (uricase))	12.74	mg/dL	9.0-20.0	
Serum Uric Acid (Uricase, UV)	9.8 H	mg/dL	3.5-8.5	
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)				
Cholesterol Total (Enzymatic Method (cholesterol Oxidase, Esterase, Peroxidase))	179	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240	
Triglycerides (Enzymatic Method)	354 H	mg/dL	Both: Normal: < 150 Both: Borderline: 150-199 Both: High: 200-499 Both: Very High: > 500	
HDL Cholesterol (HDLC) (Direct Method)	20 L	mg/dL	40.0-60.0	
Non-HDL Cholesterol	159 H	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220	
LDL Cholesterol (Direct Method)	91.87	mg/dL	Both: Optimal: < 100 Both: Near to above optimal: 100-129 Both: Borderline High: 130-159 Both: High: 160-189 Both: Very High: > 190	
VLDL Cholesterol (Calculated)	70.8 H	mg/dL	0.0-40.0	

Page 1 of 3

007/190 Condo	(Ago + MALE 414 /22 /0	1/1092)
	7 Age : WALE , 419 (23/04	
9 H	-	0.0-5.0
0.466	ng/mL	Male: Normal: 0-4.0 Male: Hypertrophy and benign genito urinary conditions: 4-10 Male: Suspicious of malignancy: > 10.0 **PSA alone ahould not be used as an absolute indicator of malignancy
1.50	ng/mL	0.6-1.8
8.77	µg/dl	3.2-12.6
3.961	μIU/mL	0.4-4.049
0.64	mg/dL	0.2-1.3
0.2	mg/dL	0.0-0.3
0.44	mg/dL	0.0-1.1
8.0	g/dL	6.3-8.2
4.7	gm/dL	3.5-5.0
3.3	gm/dL	2.0-3.5
1.42	-	1.0-2.1
51	U/L	17.0-59.0
84 H	U/L	<50.0
82	U/L	38.0-126.0
48	U/L	15.0-73.0
	9 H         0.466         1.50         1.50         8.77         3.961         0.64         0.2         0.44         0.2         0.44         1.30         1.42         1.42         51         84 H         82	0.466ng/mL1.50ng/mL8.77μg/dI3.961μlU/mL0.64ng/dL0.64ng/dL0.2ng/dL1.42gm/dL1.42J51U/L52U/L82U/L

Patient Name : Mr STALIN MISHRA MRN : 20010000074189 Gender/Age : MALE , 41y (23/04/1982)

--End of Report-

Jeen S

Dr. Seema Sivasankaran MD, DNB CONSULTANT PATHOLOGIST

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



Patient Name : Mr STALIN MISHRA MRN : 20010000074189 Gender/Age : MALE , 41y (23/04/1982)

Collected On: 14/08/2023 08:23 AM Received On: 14/08/2023 10:46 AM Reported On: 14/08/2023 12:04 PM

Barcode : 202308140014 Specimen : Whole Blood Consultant : Dr. S Shreyas(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-004 Patient Mobile No : 9583109258

BIOCHEMISTRY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
HBA1C				
HbA1c	5.5	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.40 Diabetes: => 6.5 ADA standards: = 2020	
Estimated Average Glucose	111.15	%	-	

#### Interpretation:

1. 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.

2. 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.

3. Any sample with >15% should be suspected of having a haemoglobin variant.

#### --End of Report-

Seen &

Dr. Seema Sivasankaran MD, DNB CONSULTANT PATHOLOGIST

#### Note

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



Final	Report
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Page 1 of 1

 Patient Name :
 Mr STALIN MISHRA
 MRN : 20010000074189
 Gender/Age : MALE , 41y (23/04/1982)

 Collected On :
 14/08/2023 08:23 AM
 Received On :
 14/08/2023 01:46 PM
 Reported On :
 14/08/2023 03:18 PM

 Barcode :
 222308140005
 Specimen :
 Urine
 Consultant :
 Dr. S Shreyas(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-004 Patient Mobile No : 9583109258

	CLINICAL PATHOLOGY		
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	40	ml	-
Colour	Pale Yellow	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction)	5.0	-	4.8-7.5
Sp. Gravity	1.005	-	-
Protein	Negative	-	Negative
Urine Glucose	Negative	-	Negative
Ketone Bodies	Negative	-	Negative
Bile Salts	Negative	-	Negative
Bile Pigment (Bilirubin)	Negative	-	Negative
Urobilinogen	Normal	-	Normal
Blood Urine	Negative	-	Negative
MICROSCOPIC EXAMINATION			
Pus Cells	2-3/hpf	-	0-2 / hpf
RBC	Not Seen	-	Nil

Page 1 of 2

Patient Name :	Mr STALIN MISHRA	MRN : 20010000074189	Gender/Age : MALE , 41y (2	3/04/1982)
i adicite i tatific i		1111111111200100000711105		5,01,1502

Epithelial Cells	1-2/hpf	-	-
Crystals	Not Seen	-	-
Casts	Not Seen	-	-
Others	Nil	-	-
Urine For Sugar (Post Prandial) (Semiquantitative Strip Method)	Negative	-	-
Urine For Sugar (Fasting) (Semiquantitative Strip	Negative	-	-

Method)

--End of Report-

Seen S

Dr. Seema Sivasankaran MD, DNB CONSULTANT PATHOLOGIST

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- Kindly correlate clinically.



## PROVISIONAL

# ADULT TRANS-THORACIC ECHO REPORT



20%

PATIENT NAME GENDER/AGE LOCATION

: Mr STALIN MISHRA : Male, 41 Years : Op

PATIENT MRN PROCEDURE DATE **REQUESTED BY** 

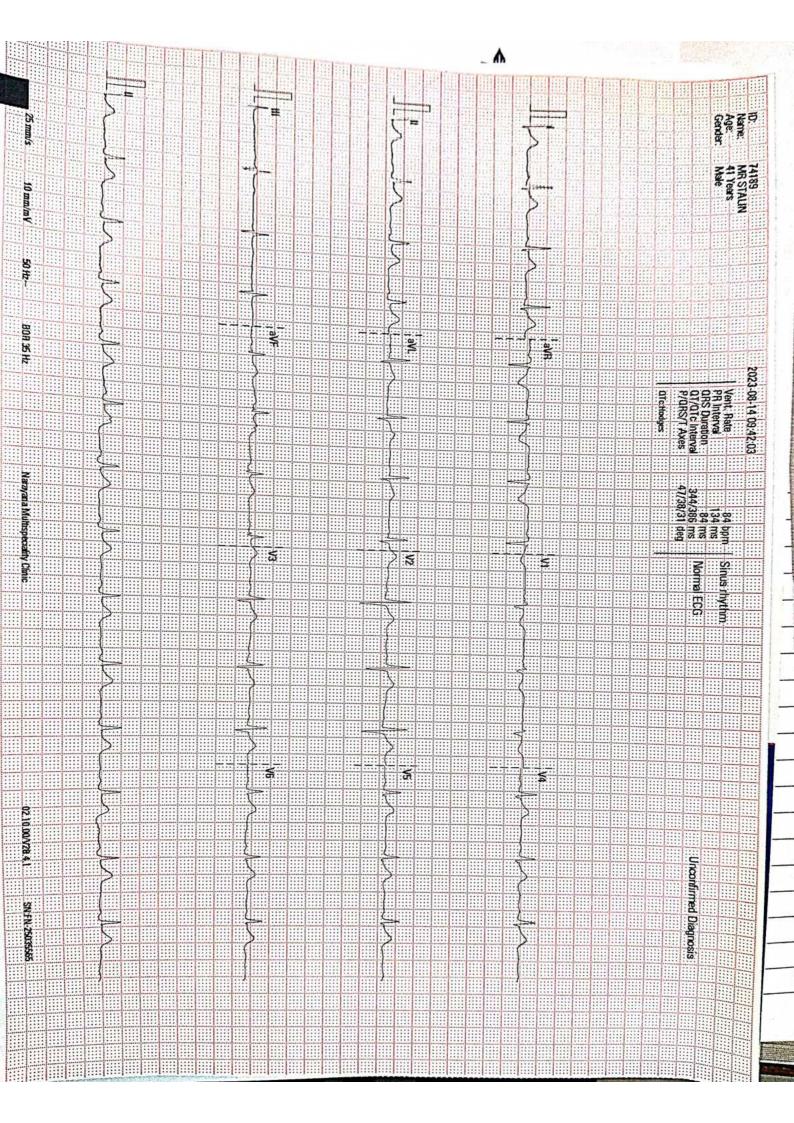
: 20010000074189 : 14/08/2023 10:50 AM : Dr. S Shreyas 

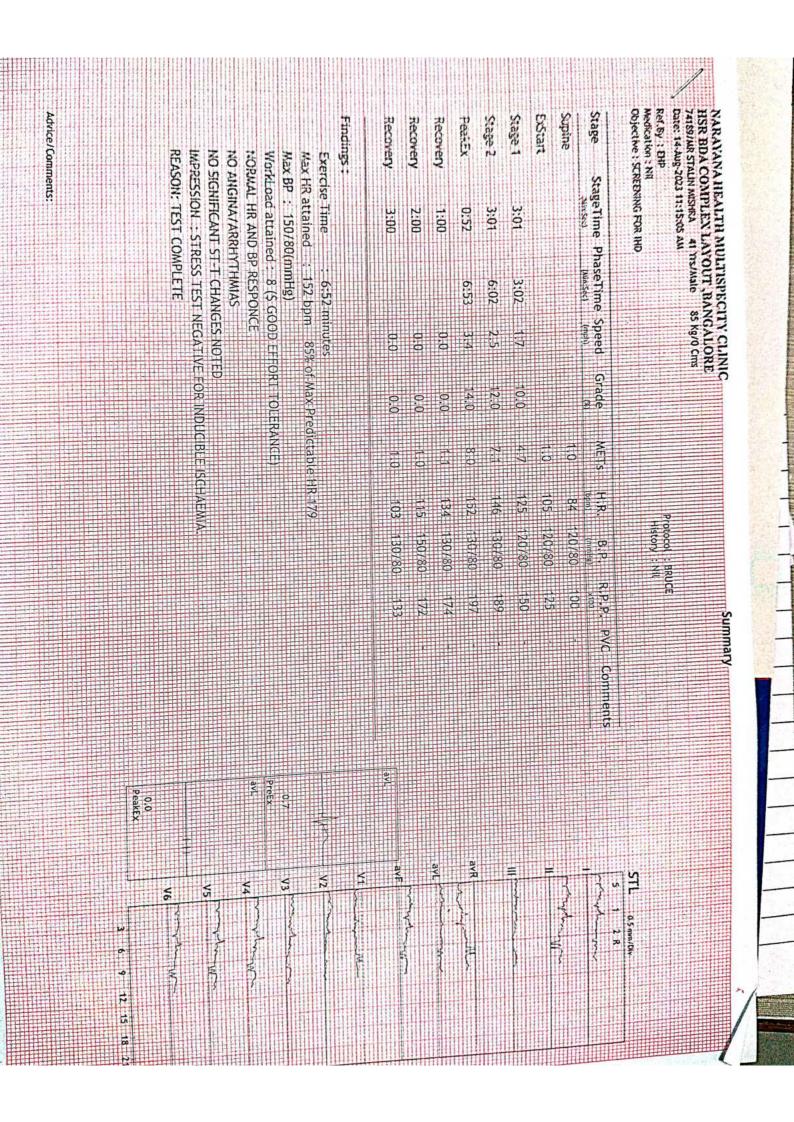
:	CARDIAC EVAL						
		UATION					
:		ermen					
:	27.777 A 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 197						
	HR (BPM) :90, SINUS RHYTHM, BP (MMHG) : -						
			DIMENSION				
		PRESSUR	E				
		SVSTOLIC	FUNCTION				
	<ul> <li>LVEF –60%</li> </ul>	STSTULIC	FUNCTION				
:	NORMAL SIZE	2					
:							
:							
			IVSD(MM)	: 13	EDV(ML)	: 112	
	LVIDS(MM)	: 32	LVPWD(MM)	: 12			
	E/A RATIO	: 0.9	E/E'(AVERAGE)	£	LVEF(%)	: 60	
	NORMAL SIZE	Million Constant of Constant o	NESS WITH NORM	AL FUNCTI	ON		
•							
:							
:	NO REGIONAL	WALL MO	TION ABNORMALIT	ES			
:				O CALCIFI	CATION. SUB	VALVAR STRUCT	URES
	ARE NORMAL,		IR THICKNESS WITH N		CATION PG =	4MMHG	
:		SILITY AND	THICKNESS WITH N	O CALCIFI	CATION, FU	VALVAR STRUCT	URES
	ARE NORMAL						
:	NORMAL MOE	BILITY AND	THICKNESS WITH N	O CALCIFI	CATION, PG =	2MMHG	
		0	age 1 of 2				
		<ul> <li>HR (BPM) :90, WINDOW : SUI</li> <li>NORMAL CH</li> <li>CONCENTRI</li> <li>NORMAL VA</li> <li>NORMAL VA</li> <li>NORMAL VA</li> <li>NORMAL VA</li> <li>NORMAL VA</li> <li>NORMAL IV</li> <li>LVEF -60%</li> </ul> I NORMAL SIZEI RAP DIAMETER( I NORMAL SIZEI RAP(MMHG): 1 CONCENTRIC I LVIDD(MM) LVIDS(MM) E/A RATIO NORMAL SIZE TAPSE(MM): 2 NORMAL SIZE TAPSE(MM): 2 NORMAL SIZE TAPSE(MM): 2 NORMAL MOE ARE NORMAL NORMAL MOE ARE NORMAL NORMAL MOE NORMAL NORMAL NORMAL NOR	<ul> <li>HR (BPM) :90, SINUS RHY WINDOW : SUBOPTIMAL</li> <li>NORMAL CHAMBERS I CONCENTRIC LVH+</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL PA PRESSURI</li> <li>NO RWMA</li> <li>NORMAL LV SYSTOLIC</li> <li>LVEF -60%</li> </ul> I NORMAL SIZED AP DIAMETER(MM): 30 NORMAL SIZED RAP(MMHG): 5 CONCENTRIC LVH+ LVIDD(MM) : 45 LVIDS(MM) : 32 E/A RATIO : 0.9 /0.7 NORMAL SIZE AND THICH TAPSE(MM): 22 NORMAL NORMAL MOBILITY AND ARE NORMAL, TRIVIAL M NORMAL MOBILITY AND ARE NORMAL NORMAL MOBILITY AND AND ARE NORMAL NORMAL MOBILITY AND ARE NORMAL SUBSTRICT ARE NORMAL SUBSTRICT AND A	<ul> <li>HR (BPM) :90, SINUS RHYTHM, BP (MMHG) : WINDOW : SUBOPTIMAL</li> <li>NORMAL CHAMBERS DIMENSION</li> <li>CONCENTRIC LVH+</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL PA PRESSURE</li> <li>NO RWMA</li> <li>NORMAL LV SYSTOLIC FUNCTION</li> <li>LVEF -60%</li> </ul> * NORMAL SIZED AP DIAMETER(MM): 30 * NORMAL SIZED RAP(MMHG): 5 * CONCENTRIC LVH+ LVIDD(MM) : 45 IVSD(MM) LVIDS(MM) : 32 LVPWD(MM) E/A RATIO : 0.9 E/E'(AVERAGE) /0.7 * NORMAL SIZE AND THICKNESS WITH NORMATAPSE(MM): 22 * NORMAL * NORMAL MOBILITY AND THICKNESS WITH NARE NORMAL, TRIVIAL MR * NORMAL MOBILITY AND THICKNESS WITH NARE NORMAL, TRIVIAL MR * NORMAL MOBILITY AND THICKNESS WITH NARE NORMAL **********************************	<ul> <li>HR (BPM) :90, SINUS RHYTHM, BP (MMHG) :- WINDOW : SUBOPTIMAL</li> <li>NORMAL CHAMBERS DIMENSION</li> <li>CONCENTRIC LVH+</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL LV SYSTOLIC FUNCTION</li> <li>LVEF – 60%</li> </ul> * NORMAL SIZED <ul> <li>AP DIAMETER(MM): 30</li> <li>NORMAL SIZED</li> <li>RAP(MMHG): 5</li> <li>CONCENTRIC LVH+</li> <li>LVIDD(MM) : 45 IVSD(MM) : 13</li> <li>LVIDS(MM) : 32 LVPWD(MM) : 12</li> <li>E/A RATIO : 0.9 E/E'(AVERAGE) :</li> <li>/0.7</li> </ul> * NORMAL SIZEA AND THICKNESS WITH NORMAL FUNCTI TAPSE(MM): 22 <ul> <li>NORMAL</li> <li>NORMAL WALL MOTION ABNORMALITIES</li> </ul> * NORMAL MOBILITY AND THICKNESS WITH NO CALCIFI ARE NORMAL, TRIVIAL MR <ul> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFI ARE NORMAL, TRIVIAL MR</li> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFI ARE NORMAL, MOBILITY AND THICKNESS WITH NO CALCIFI ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFI ARE NORMAL</li> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFI ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFI ARE NORMAL</li> </ul>	<ul> <li>HR (BPM) :90, SINUS RHYTHM, BP (MMHG) :- WINDOW : SUBOPTIMAL</li> <li>NORMAL CHAMBERS DIMENSION</li> <li>CONCENTRIC LVH+</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL VSSTOLIC FUNCTION</li> <li>LVEF -60%</li> </ul> * NORMAL SIZED <ul> <li>AP DIAMETER(MM): 30</li> <li>NORMAL SIZED</li> <li>RAP(MMHG): 5</li> <li>CONCENTRIC LVH+</li> <li>LVIDD(MM) : 45 IVSD(MM) : 13 EDV(ML)</li> <li>LVIDS(MM) : 32 LVPWD(MM) : 12 ESV(ML)</li> <li>E/A RATIO : 0.9 E/E'(AVERAGE) : LVEF(%)</li> <li>/0.7</li> </ul> * NORMAL SIZEA AND THICKNESS WITH NORMAL FUNCTION TAPSE(MM): 22 <ul> <li>NORMAL</li> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB</li> <li>ARE NORMAL, TRIVIAL MR</li> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB</li> <li>ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB</li> <li>ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB</li> <li>ARE NORMAL</li> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB</li> <li>ARE NORMAL</li> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB</li> <li>ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB</li> <li>ARE NORMAL</li> </ul>	<ul> <li>HR (BPM) :90, SINUS RHYTHM, BP (MMHG) :- WINDOW : SUBOPTIMAL</li> <li>NORMAL CHAMBERS DIMENSION</li> <li>CONCENTRIC LVH+</li> <li>NORMAL VALVES</li> <li>NORMAL VALVES</li> <li>NORMAL PA PRESSURE</li> <li>NO RWMA</li> <li>NORMAL LV SYSTOLIC FUNCTION</li> <li>LVEF -60%</li> </ul> INORMAL SIZED <ul> <li>AP DIAMETER(MIM): 30</li> <li>NORMAL SIZED</li> <li>RAP(MMHG): 5</li> <li>CONCENTRIC LVH+</li> <li>LVIDD(MM) : 45 IVSD(MM) : 13 EDV(ML) : 112</li> <li>LVIDS(MM) : 32 LVPWD(MM) : 12 ESV(ML) : 34</li> <li>E/A RATIO : 0.9 E/E'(AVERAGE) : LVEF(%) : 60 / 0.7</li> <li>NORMAL SIZE AND THICKNESS WITH NORMAL FUNCTION</li> <li>TAPSE(MM): 22</li> <li>NORMAL</li> <li>NO REGIONAL WALL MOTION ABNORMALITIES</li> </ul> INORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL, TRIVIAL MR <ul> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL, TRIVIAL MR</li> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL, MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION. SUB VALVAR STRUCT ARE NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION, PG = 4MMHG</li> <li>NORMAL MOBILITY AND THICKNESS WITH NO CALCIFICATION, PG = 2MMHG</li> </ul>

(A unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497 Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099 Address: #43/A-B, 1st Floor, BDA Complex, 6th Sector, HSR Layout, Bangalore - 560 102 Tel: +91-080 2572 7334, www.narayanahealth.org

nts 1800-309-0309 (Toll Free)

> Emergencies 97384-97384







: Mr Stalin	MRN	: 74189
: 41 Years	Sex	: Male
: EHP	Date	: 14-08-2023
	: 41 Years	: 41 Years Sex

## ULTRASOUND ABDOMEN AND PELVIS

#### FINDINGS:

Liver is normal in size and shows moderate diffuse increase in echogenicity. No intra or extra hepatic biliary duct dilatation. No focal lesions.

Portal vein is normal in course, caliber and shows hepatopetal flow. CBD is not dilated.

calculus/wall of evidence is no well distended. There Gallbladder is thickening/pericholecystic fluid.

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

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

Right Kidney is normal in size (measures 9.8 cm in length & 1.6 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 10.4 cm in length & 1.7 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

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

mural lesion.

Prostate is normal in size.

Fluid - There is no ascites or pleural effusion.

# IMPRESSION:

Moderate fatty liver(Grade II).

Dr. Tanuj Gupta Senior Consultant Radiologist

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 Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099 Address: #43/A-B, 1st Floor, BDA Complex, 6th Sector, HSR Layout, Bangalore - 560 102 www.narayanahealth.org

Appointments

1800-309-0309 (Toll Free)

Emergencies 97384-97384



Patient Name	MD CT			
the second se	MR STALIN MISHRA	Requested By		
MRN	20010000074189	and the second		
Age/Sex		Procedure DateTime	14-08-2023 08:26	
	40Y 11M/Male	Hospital	24-08-2023 08:26	
		litospital	NH-HSR CLINIC	

# 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. Tanuj Gupta MBBS, DMRD, DNB Lead and Senior Consultant Radiologist

\* This is a digitally signed valid document.Reported Date/Time: 14-08-2023 10:55

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## Narayana Multispeciality Clinic

(A unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497 Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099 Address: #43/A-B, 1st Floor, BDA Complex, 6th Sector, HSR Layout, Bangalore - 560 102 Tel: +91-080 2572 7334, www.narayanahealth.org

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