

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr P Gunasheela MRN : 2015000000680 Gender/Age : MALE , 58y (20/04/1965)

Collected On : 27/06/2023 08:56 AM Received On : 27/06/2023 12:58 PM Reported On : 27/06/2023 03:20 PM

Barcode : 032306270119 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9900496780

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)	5.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.009	-	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)	Trace	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present

MICROSCOPIC EXAMINATION

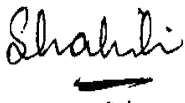
Pus Cells	0.3	/hpf	0-5
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Patient Name : Mr P Gunasheela MRN : 2015000000680 Gender/Age : MALE , 58y (20/04/1965)			
RBC	0.2	/hpf	0-4
Epithelial Cells	0.1	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	4.1	/hpf	0-200
Yeast Cells	0.0	/hpf	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.




Dr. Shalini K S
DCP, DNB, Pathology
Consultant

CLINICAL PATHOLOGY

Test	Result	Unit
Urine For Sugar (Fasting) (Enzyme Method (GOD POD))	Not Present	-
Urine For Sugar (Post Prandial) (Enzyme Method (GOD POD))	Not Present	-

Patient Name : Mr P Gunasheela MRN : 2015000000680 Gender/Age : MALE , 58y (20/04/1965)



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)	105 H	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)	131	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020
HBA1C			
HbA1c (HPLC NGSP Certified)	6.1 H	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	128.37	-	-

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)	0.92	mg/dL	0.66-1.25
eGFR (Calculated)	84.5	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.

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Narayana Institute of Cardiac Sciences

(A Unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497

Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099

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

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Appointments
1800-309-0309

Emergencies
97384 97384

Patient Name : Mr P Gunasheela MRN : 20150000000680 Gender/Age : MALE , 58y (20/04/1965)			
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	10	mg/dL	9.0-20.0
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	4.7	mg/dL	3.5-8.5
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	124	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	66	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	50	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	74.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	61 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	13.2	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	2.5	-	0.0-5.0
Prostate Specific Antigen (PSA) (Enhanced Chemiluminescence)	2.23	ng/mL	0.0-3.5

Interpretation Notes

- PSA is a recommended test for detection of prostate cancer along with Digital Rectal Examination (DRE) in males above 50 years of age.
PSA levels are increased in Prostate cancer, Benign Prostatic Hyperplasia, Prostatitis, Genitourinary infections.
False negative/positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy.
All values should be correlated with clinical findings and results of other investigations.
Note: Patient results determined by assay using different manufacturers or methods may not be comparable.

THYROID PROFILE (T3, T4, TSH)

Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)	1.41	ng/mL	0.97-1.69
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Patient Name : Mr P Gunasheela MRN : 2015000000680 Gender/Age : MALE , 58y (20/04/1965)			
Thyroxine (T4) (Enhanced Chemiluminescence)	8.60	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence)	0.9389	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.

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.81	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)	0.81	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	6.50	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.00	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.5	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.6	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	28	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	12	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	52	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	16	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.

Patient Name : Mr P Gunasheela MRN : 2015000000680 Gender/Age : MALE , 58y (20/04/1965)



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



Dr. Anushre Prasad
MBBS,MD, Biochemistry
Consultant Biochemistry

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
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COMPLETE BLOOD COUNT (CBC)

Haemoglobin (Hb%) (Photometric Measurement)	13.7	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.47 L	million/ μ L	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.2 L	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	87.8	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	30.7	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	35.0 H	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.6	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	252	$10^3/\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	6.8	$10^3/\mu$ L	4.0-10.0

DIFFERENTIAL COUNT (DC)

Neutrophils (VCS Technology Plus Microscopy)	62.0	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	28.3	%	20.0-40.0

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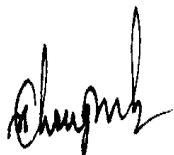
Emergencies
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Patient Name : Mr P Gunasheela MRN : 2015000000680 Gender/Age : MALE , 58y (20/04/1965)			
Monocytes (VCS Technology Plus Microscopy)	6.2	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	2.9	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.6	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	4.22	x10 ³ cells/ μ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	1.93	x10 ³ cells/ μ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.43	x10 ³ cells/ μ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.2	x10 ³ cells/ μ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.05	-	-

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.



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Consultant & Head - Hematology & Flow Cytometry

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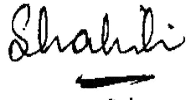
HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Westergren Method)	10	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



Dr. Shalini K S
DCP, DNB, Pathology
Consultant

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--



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

Note

- Abnormal results are highlighted.

Patient Name : Mr P Gunasheela MRN : 2015000000680 Gender/Age : MALE , 58y (20/04/1965)

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



Narayana Multispeciality Clinic
JAYANAGAR
BANGALORE

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: MR GUNASHEELA,
Patient ID: 2015-680
Height: 165 cm
Weight: 70.1 kg

DOB: 20.04.1965
Age: 58yrs
Gender: Male
Race:

Study Date: 27.06.2023
Test Type: Treadmill Stress Test
Protocol: BRUCE

Referring Physician: EHP
Attending Physician: DR PRIYA S
Technician: MS GULSUM JAMEEL FATHIMA

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	01:25	1.20	0.00	65	140/90	
EXERCISE	STAGE 1	03:00	1.70	10.00	104	140/90	
	STAGE 2	03:00	2.50	12.00	113	150/90	
	STAGE 3	02:08	3.40	14.00	122	150/90	
RECOVERY		05:01	0.00	0.00	76	120/80	

The patient exercised according to the BRUCE for 8:07 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 73 bpm rose to a maximal heart rate of 139 bpm. This value represents 85 % of the maximal, age-predicted heart rate. The resting blood pressure of 140/90 mmHg, rose to a maximum blood pressure of 150/90 mmHg. The exercise test was stopped due to 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

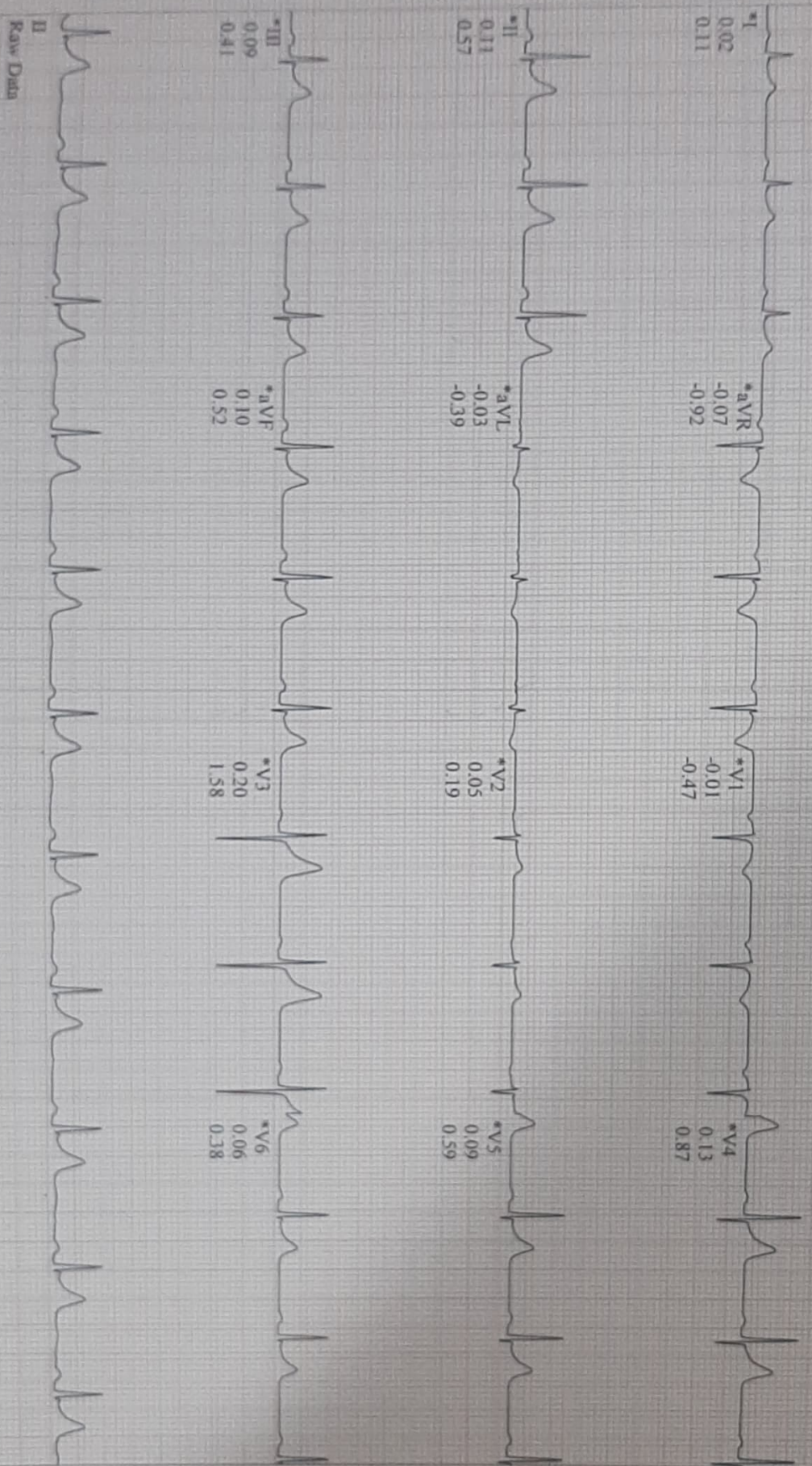
Physician _____ Technician _____

68 bpm
140/90 mmHg

PRETEST
SUPINE
00:15

BRUCE
0.0 mph
0.0 %

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



Raw Data

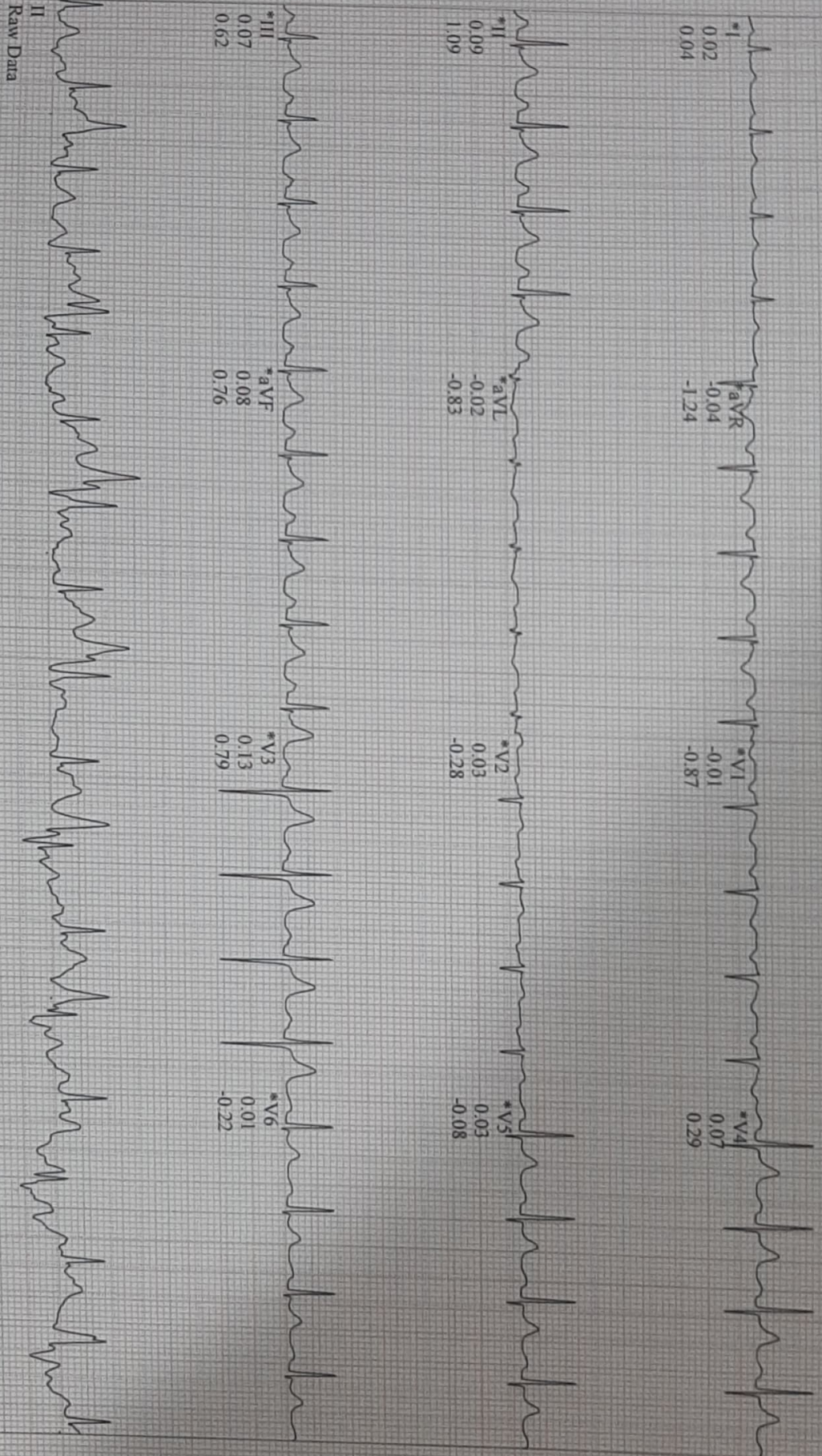
*Computer Synthesized Rhythms

103 bpm
140/90 mmHg

EXERCISE
STAGE 1
02:50

BRUCE
1.7 mph
10.0%

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(V5,V3)

Start of Test: 12:43:17

114 bpm
150/90 mmHg

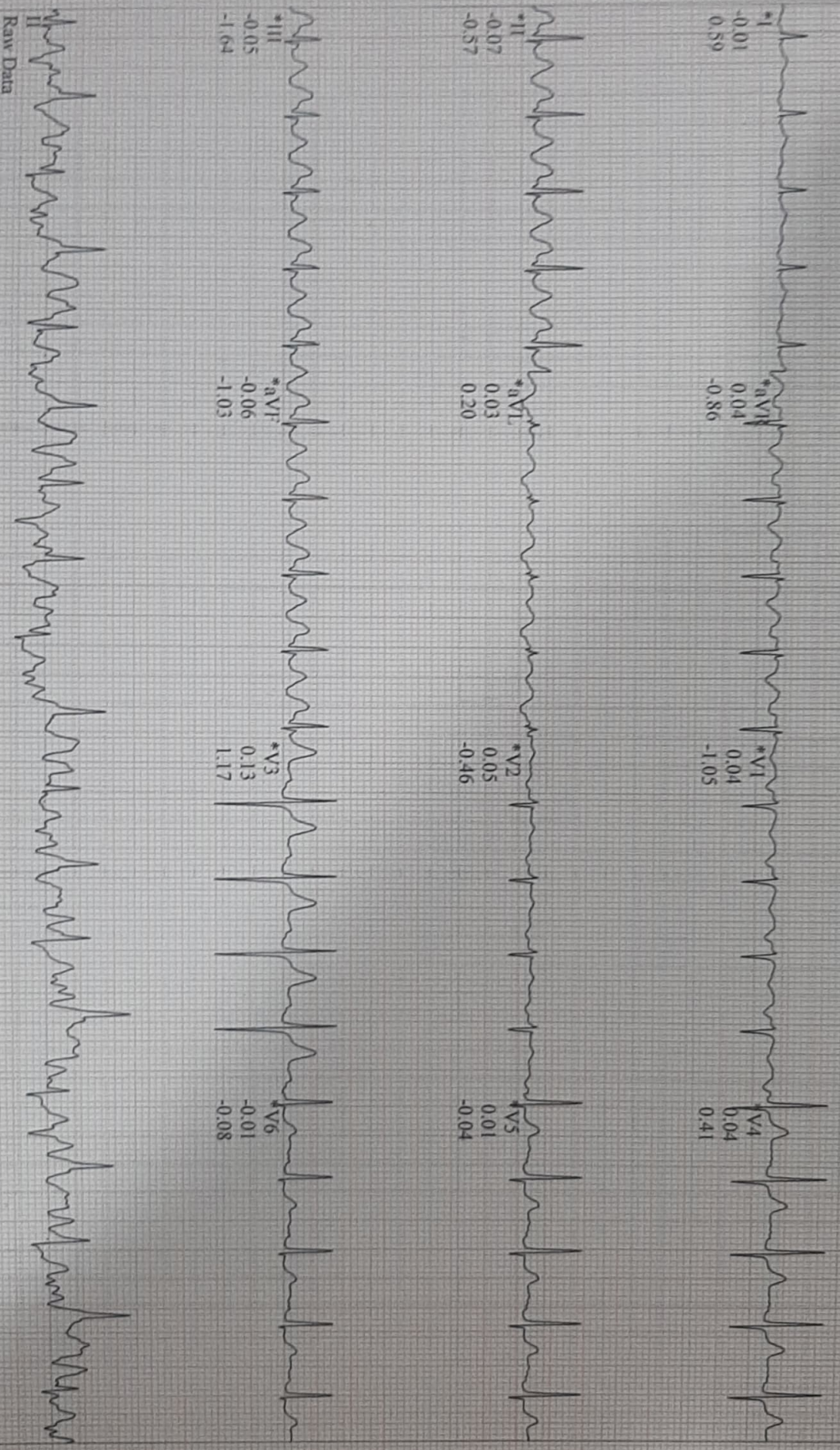
EXERCISE
STAGE 2
05:50

BRUCE
2.5 mph
12.0%

Linked Medians

Narayana Multispecialty Clinic

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



Raw Data

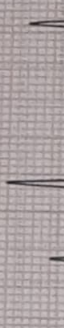
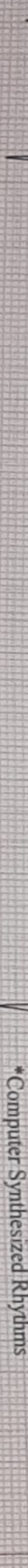
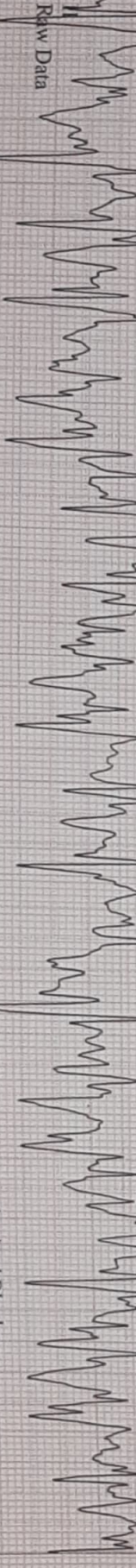
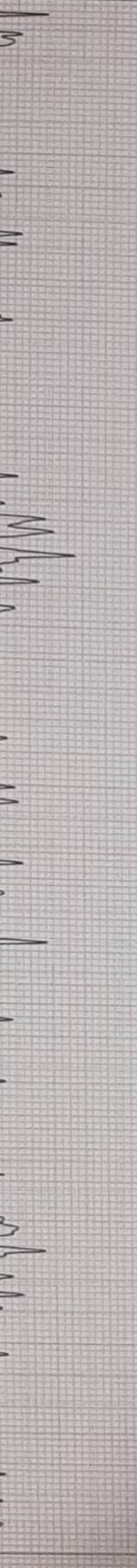
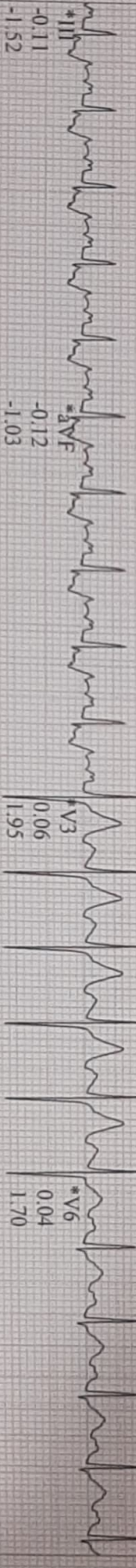
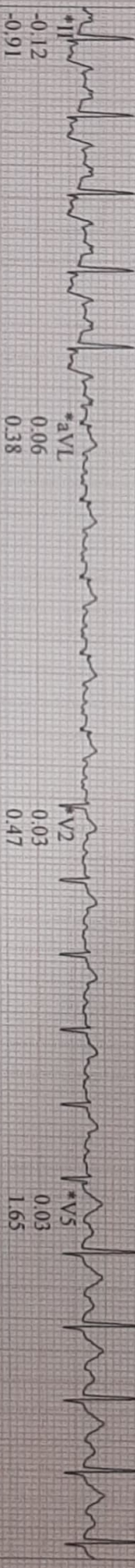
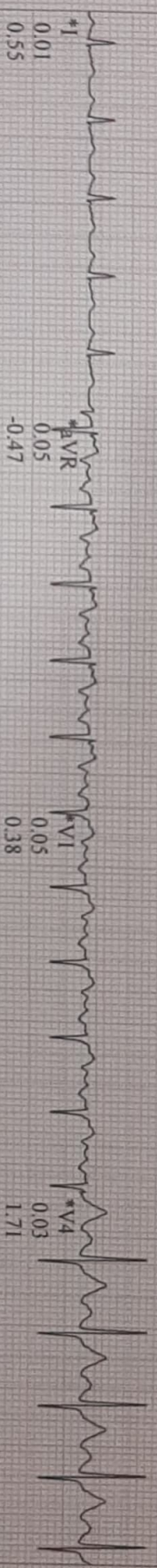
*Computer Synthesized Rhythms

EXERCISE BRUCE
 STAGE 3 3.4 mph
 08:08 14.0%

Linked Medians (PEAK EXERCISE)

Narayana Multispecialty Clinic

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



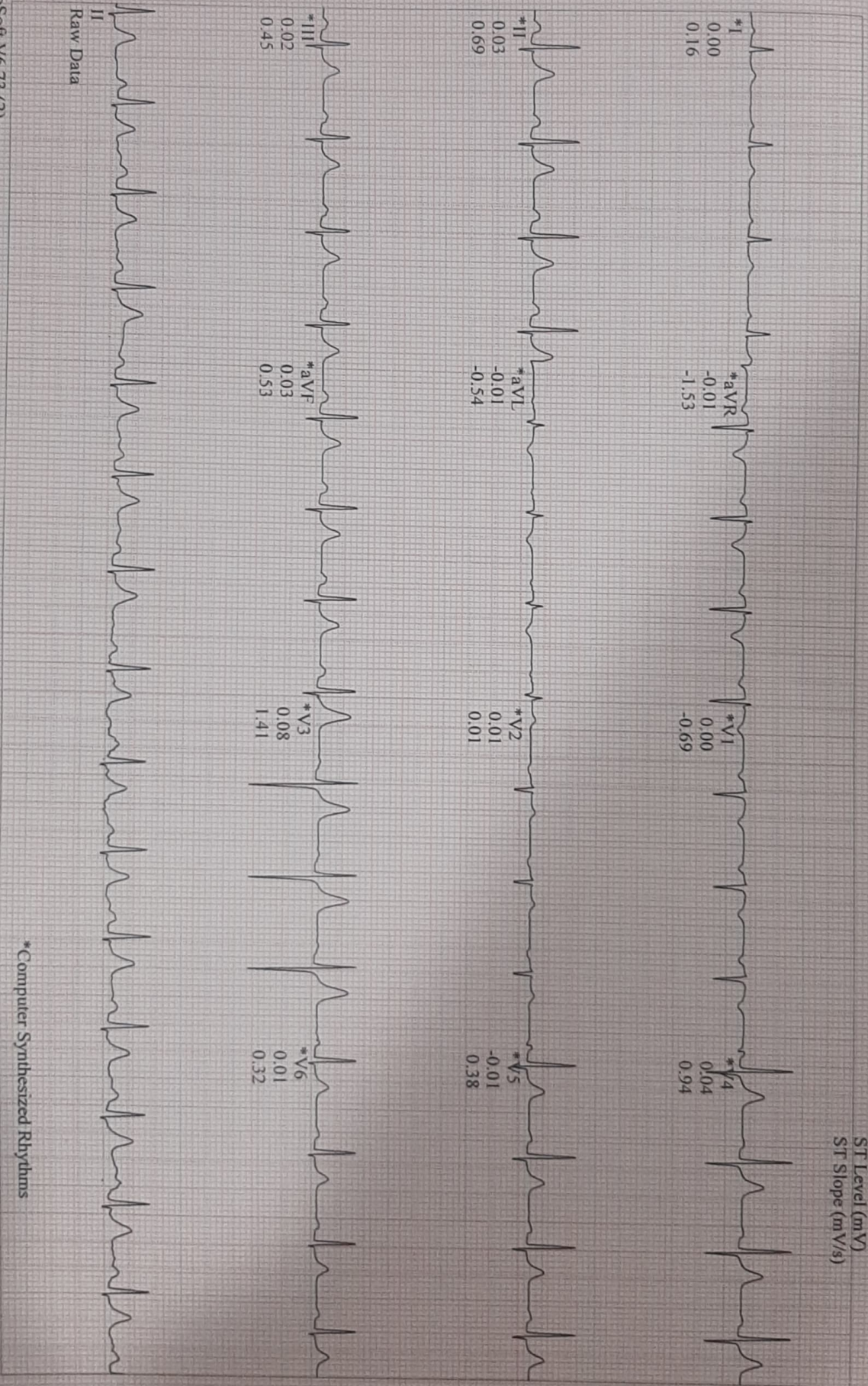
*Computer Synthesized Rhythms

89 bpm

RECOVERY #1
01:00

BRUCE
0.0 mph
0.0%

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(V4,V3)

Start of Test: 12:43:17

73 bpm
140/80 mmHg

RECOVERY #1
03:00

BRUCE
0.0 mph
0.0%

Narayana Multispecialty Clinic

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



75 bpm
120/80 mmHg
RECOVERY #1
05:00

BRUCE
0.0 mph
0.0%

Narayana Multispecialty Clinic

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



Raw Data

*Computer Synthesized Rhythm

GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V4,V3)

Start of Test: 12:43:17

Patient Name : Mr.P GUNASHEELA

Age : 50 Years

Sex : Male

Referring Doctor : EHP

Date : 27.06.2023

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and shows mild increase echopattern. No intra or extra hepatic biliary duct dilatation.

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

Gall bladder 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 echogenicity. No evidence of mass or focal lesions

Right Kidney is normal in size (measures 9.3cm in length & 1.5cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size (measures 9.7cm in length & 1.5cm 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.

Pre Void-105cc Post Void-22 cc

Prostate is normal in echopattern and mildly enlarged in size, measures 3.9X3.9X4.1cm Volume - 33cc.

Fluid - There is no ascites or pleural effusion.

IMPRESSION:

- Grade I Fatty Liver.
- Grade I Prostatomegaly.

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

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

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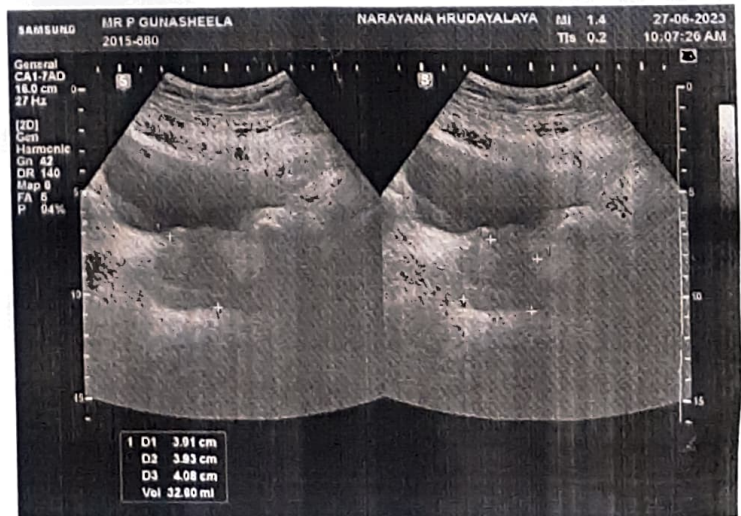
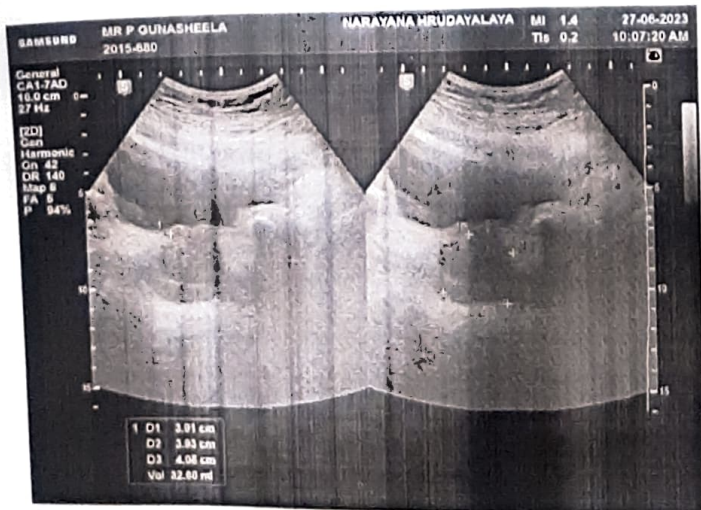
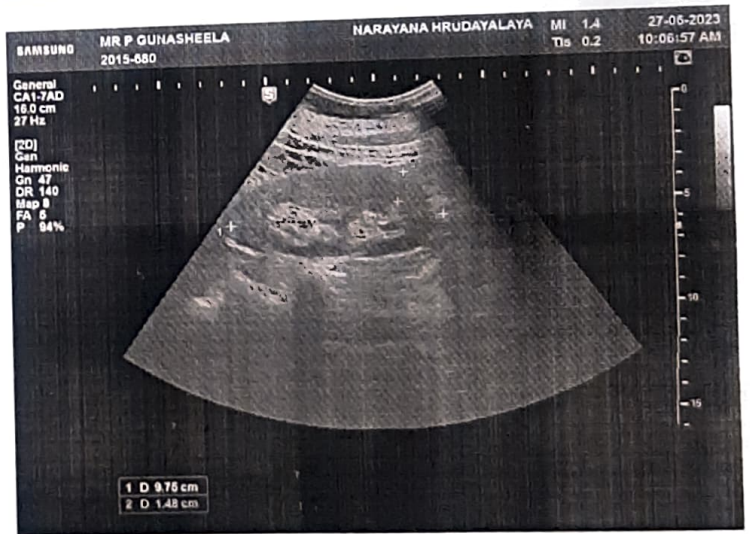
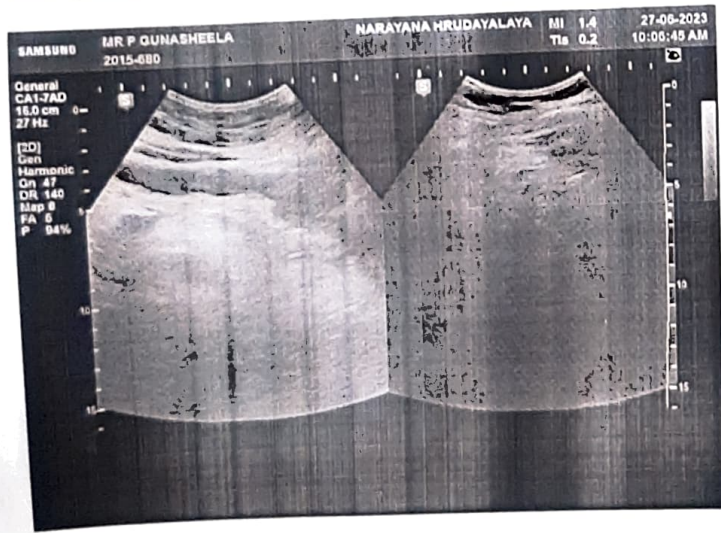
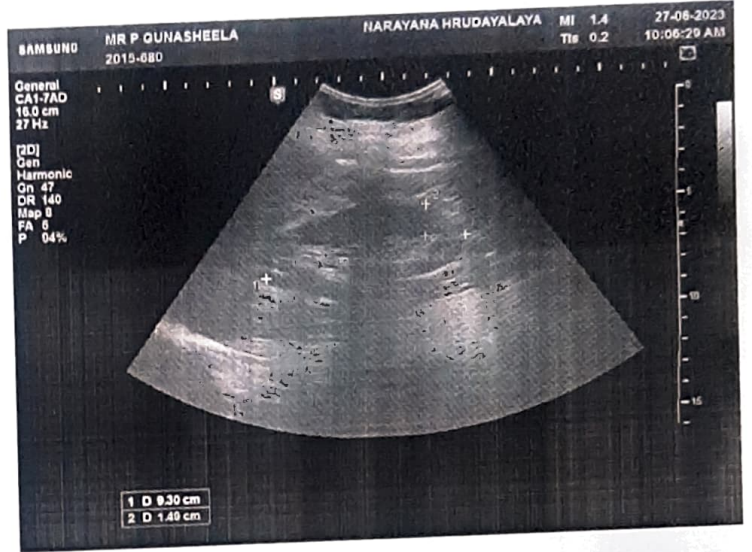
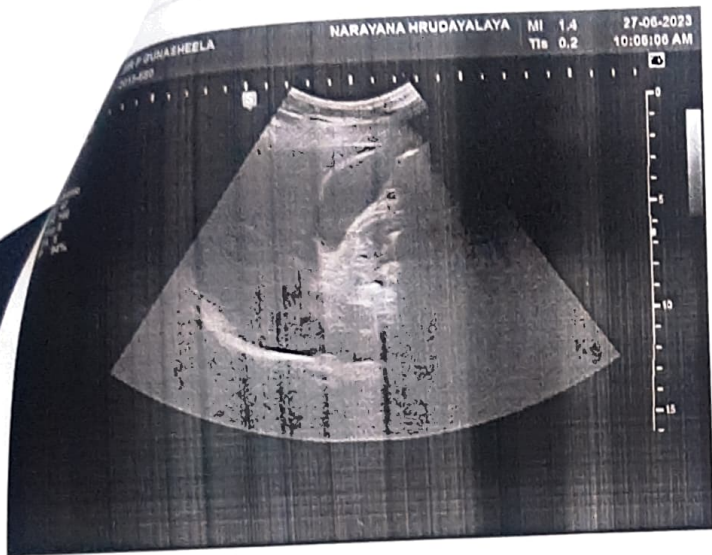
Report

2015-680
MR P GUNASHEELA

Exam

Accession #
Exam Date
Description
Operator

27-06-2023



Patient Name: [Redacted]
 Age: 27 years
 Gender: Male

23.06.2023 10:48:24 AM

Heart Rate	72 bpm
PR Interval	168 ms
QRS Duration	84 ms
QT/QTc Interval	346/367 ms
PQRST Axes	57.5/31.6/0 deg
Diagnosis	



25 mm/s
 10 mm/mV
 50 Hz

BDH 35 Hz

MARUVANNA HEALTH JAYANAGAR

02.06.00.V28.4.1

SN.FM.7300.176



MILESTONES

VISUAL DEVELOPMENT CENTER

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

WWW.MILESTONESINSTITUTIONS.ORG | Ph: 080 2664 4448

Evaluation

27/6/23

Name : P Guneshkula.
 Age : 58
 Gender : male
 MRD No : 20150000000680
 Chief Complaint : Routine check up.

Ocular History

H/o Spectacle : 40 years
 Last check up done : 3 years ago

General History

H/o HTN : 10 years } under medicine.
 Dm : 10 years } under control.

VISION

Distance:

OD
6/6(m)

OS
6/6(m)

Pinhole:

6/6

6/6

Near:

N12

N18

PGP < +0.75D / -1.75DCX 65

E [-1.25DCX 75

Add +2.25DS

Objective Refraction:

EYE	Sph	Cyl	Axis
OD	-0.50	-0.75	80° 90
OS	-0.50	-0.50	95°

Subjective Refraction:

EYE	Sph	Cyl	Axis
OD	-0.25	-0.75	90°
OS	-0.25	-0.25	90°


Add +2.50 B.E.N. @ 40 cm

Slit lamp Examination :

OU early N.S.

Diagnosis and Advise :

Refractive error continue same glasses
advised for retinal examination


Milestones
Visual Development Center
No. 105, 7th Main,
Near Maiyas Restaurant, 4th Block
Jayanagar, Bangalore-560 011