Patient Name	MRS.SANGEETHA K	Requested By	ЕНР
MRN	20150000000047	Procedure DateTime	08-04-2023 10:47
Age/Sex	39Y 1M/Female	Hospital	NH-JAYANAGAR

CHEST RADIOGRAPH (PA VIEW)

CLINICAL DETAILS: For 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.



^{*} This is a digitally signed valid document. Reported Date/Time: 08-04-2023 17:31

DEPARTMENT OF LABORATORY MEDICINE

Method (GOD POD))

Patient Name: Ms Sangeetha K MRN: 20150000000047 Gender/Age: FEMALE, 39y (11/02/1984)

Collected On: 08/04/2023 08:41 AM Received On: 08/04/2023 12:29 PM Reported On: 08/04/2023 04:33 PM

Barcode: 032304080111 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9886033491

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
Urine For Sugar (Fasting) (Enzyme Method (GOD POD))	Not Present	-	-
STOOL ROUTINE EXAMINATION			
PHYSICAL EXAMINATION			
Colour	Brownish	-	-
Consistency	Semi Solid	-	-
Mucus	Absent	-	-
CHEMICAL EXAMINATION			
Stool For Occult Blood (Standard Guaiac Method)	Negative	-	-
Reaction	Alkaline	-	-
MICROSCOPE EXAMINATION			
Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Pus Cells	2-3	/hpf	0-5
Urine For Sugar (Post Prandial) (Enzyme	Not Present	-	-



Dr. Hema S MD, DNB, Pathology Associate Consultant

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)	125	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020
HBA1C			
HbA1c (HPLC NGSP Certified)	5.4	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	108.29	-	-

Interpretation:

SERUM CREATININE

Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.66	mg/dL	0.6-1.0
eGFR (Calculated)	99.8	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodyamically unstable patients eGFR is not applicable for less than 18 years of age.

^{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.

Patient Name: Ms Sangeetha K MRN: 2015000000	00047 Gender/A		·
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	10	mg/dL	7.0-17.0
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	3.6	mg/dL	2.5-6.2
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	181	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	116	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	39 L	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	142.0 H	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	129 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	23.2	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	4.7	-	0.0-5.0
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminesence)	0.993	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminesence)	7.93	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminesence)	3.299	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
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.38	mg/dL	0.2-1.3

Patient Name: Ms Sangeetha K MRN: 2015000000	0047 Gender/Ag	e : FEMALE , 39y (11/02/	(1984)
Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.10	mg/dL	0.0-0.3
Unconjugated Bilirubin (Indirect) (Calculated)	0.28	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.60	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.30	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.3	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.31	-	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))	17	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	135 H	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	18	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

W

Mrs. Latha B S

MSc, Mphil, Biochemistry

Incharge, Consultant Biochemistry

HEMATOLOGY

Test Result Unit Biological Reference Interval

Patient Name: Ms Sangeetha K MRN: 2015000000	00047 Gender/A	ge : FEMALE , 39y (11/02	/1984)
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	12.6	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.57	million/μl	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.2	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	85.6	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	27.5	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.1	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.7	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	375	10 ³ /μL	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	8.7	10 ³ /μL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	70.7	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	22.1	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	5.4	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	1.3	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.5	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	6.16	x10 ³ cells/μl	2.0-7.0
Absolute Lympocyte Count (Calculated)	1.93	x10 ³ cells/μl	1.0-3.0
Absolute Monocyte Count (Calculated)	0.47	x10 ³ cells/μl	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.12	x10 ³ cells/μl	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.

Erythrocyte Sedimentation Rate (ESR)

18 H

mm/1hr

0.0 - 12.0

(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

-- 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)

(, -> 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)





DEPARTMENT OF LABORATORY MEDICINE

Patient Name: Ms Sangeetha K MRN: 20150000000047 Gender/Age: FEMALE, 39y (11/02/1984)

Collected On: 08/04/2023 08:41 AM Received On: 08/04/2023 12:19 PM Reported On: 10/04/2023 03:43 PM

Barcode: 1B2304080014 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9886033491

NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	AB	-
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	Slightly Turbid	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (pH Indicator Method)	5.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.017	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present

Patient Name: Ms Sangeetha K MRN: 2015000000	00047 Gender/A	ge : FEMALE , 39y (11/02)	/1984)
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	2.2	/hpf	0-5
RBC	0.3	/hpf	0-4
Epithelial Cells	4.5	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	7.0	/hpf	0-200
Yeast Cells	0.1	/hpf	0-1
Mucus	Not Present	-	Not Present



Dr. Hema S MD, DNB, Pathology Associate Consultant

CYTOLOGY

PAP SMEAR

LAB No.	P-248223
MATERIAL RECEIVED	Received two unstained slides
CLINICAL DETAILS	LMP 17-03-23 P/S Cervix vagina- healthy. Screening pap smear
SPECIMEN TYPE	Conventional Smear
SMEAR ADEQUACY	Satisfactory for evaluation with presence of endocervical cell / transformation zone component.
GENERAL CATEGORIZATION	CERVICAL CYTOLOGY: PAP SMEAR REPORT - The 2014 Bethesda system. No epithelial cell abnormality seen No evidence of fungal organisms, trichomonas vaginalis, bacterial vaginosis or other epithelial abnormalities.
IMPRESSION	Smear is negative for intraepithelial lesion or malignancy.
REMARKS	Note: Cervical smear test is only a screening test for cervical carcinoma with inherent false negative results.

-- End of Report-

Charle.

Dr. Shaesta Naseem Zaidi MD, Pathology Consultant Histopathology

Note

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





ADULT TRANS-THORACIC ECHO REPORT

NAME : MRS.SANGEETHA

AGE/SEX: 39YRS/FEMALE

MRN NO: 20150000000047

DATE : 08.04.2023

FINAL DIAGNOSIS:

NORMAL CHAMBER DIMENSIONS

NO RWMA

NORMAL VALVES

NORMAL PA PRESSURE

NORMAL RV/LV FUNCTION

LVEF- 60 %

MEASUREMENTS

AO: 29 MM

LVID (d): 42 MM

IVS (d): 10 MM

RA: 33 MM

LA: 29 MM

LVID(s): 25 MM

PW (d): 09 MM

RV: 26 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 - 0.7/0.6M/S, MR-TRIVIAL

AORTIC VALVE : PG- 3 MMHG

TRICUSPID VALVE : TR-TRIVIAL , PASP- 23 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- 71 BPM

GULSUM JAMEEL FATHIMA M CARDIAC SONOGRAPHER



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Narayana Multispeciality Clinic JAYANAGAR BANGALORE

Station
Telephone:

EXERCISE STRESS TEST REPORT

Race:

Patient Name: MS SANGEETHA K,

Patient ID: 2015-00047 Height: 165 cm Weight: 82.9 kg

Study Date: 08.04.2023

Test Type: Treadmill Stress Test

Protocol: BRUCE

Medications:

H

Medical History:

Reason for Exercise Test: Screening for CAD

Exercise Test Summary

DOB: 11.02.1984 Age: 39yrs Gender: Female

Referring Physician: EHP

Attending Physician: DR PRIYA S

Technician: MS GULSUM JAMEEL FATHIMA M

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST EXERCISE RECOVERY	SUPINE STAGE 1 STAGE 2	01:17 03:00 02:14 05:01	1.20 1.70 2.50 0.00	0.00 10.00 12.00 0.00	94 121 134 85	110/80 120/80 130/80 110/70	

The patient exercised according to the BRUCE for 5:13 min:s, achieving a work level of Max. METS: 7.00. The resting heart rate of 78 bpm rose to a maximal heart rate of 137 bpm. This value represents 75 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/80 mmHg, rose to a maximum blood pressure of 136/80 mmHg. The exercise test was stopped due to Fatigue.

Interpretation

Conclusions

MODERATE 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 8-16	my.	Technician	
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