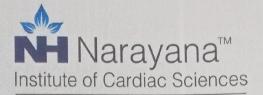
ADULT TRANS-THORACIC ECHO REPORT



Unit of Narayana Health

: 10200000271972

GENDER/AGE : Mal	Harish D K e, 38 Years A (R-1)	PATIENT MRN PROCEDURE DATE REQUESTED BY	: 10200000271972 : 25/03/2023 02:51 PM : Dr. Santosh K M
INDICATIONS	: ASYMPTOMATIC		
CLINICAL DIAGNOSIS	: HEALTH CHECK		
PREVIOUS ECHO REPORT	: NO REPORTS AVAILABLE		
VITAL PARAMETERS	: HR (BPM) :98, SINUS RHYTH	HM, BP (MMHG) : 11	1/76, SO2 (%) : 98
IMPRESSION	 NORMAL CHAMBER DIM NO RWMA NORMAL VALVES NORMAL PA PRESSURE NORMAL RV AND LV FUI LVEF - 55 TO 60% 		
FINDINGS			
CHAMBERS			
LEFT ATRIUM	: NORMAL SIZED AP DIAMETER(MM): 28		
RIGHT ATRIUM	: NORMAL SIZED MINOR AXIS A4CV(MM) : 3		
LEFT VENTRICLE	: NORMAL SIZED, NORMAL I LVIDD(MM) : 38 LVIDS(MM) : 27 E/A RATIO : 1.2	IVSD(MM)	: 11 EDV(ML) : 61 : 10 ESV(ML) : 26
RIGHT VENTRICLE	: NORMAL SIZE AND THICKN MINOR AXIS A4CV(MM): 2		UNCTION
LVOT/RVOT RWMA	: NORMAL : NO RWMA		
VALVES MITRAL AORTIC TRICUSPID PULMONARY	: NORMAL, MR - TRIVIAL : NORMAL, PG - 6 MMHG : NORMAL,TR - TRIVIAL,TR P : NORMAL, PG - 4 MMHG	PV - 2.0 M/S.	
SEPTAE IAS IVS	: INTACT : INTACT		
ARTERIES AND VEINS AORTA	: NORMAL, LEFT AORTIC AR	CH. AORTIC ANNULU	JS - 21 MM, ASCENDING AORTA - 25 M





WR HARISH D K (10200000271972)

PA IVC	 NORMAL SIZED, PAT - 126 MS, PASP - 21 MMHG, NORMAL PA PRESSURE IVC - 16 MM, NORMAL SIZED & COLLAPSIBILITY > 50 %. RAP - 3 MMHG, NORMAL.
SVC & CS PULMONARY VEINS	: NORMAL : NORMAL
PERICARDIUM	NORMAL PERICARDIAL THICKNESS. NO EFFUSION
INTRACARDIAC MASS	: NO TUMOUR, THROMBUS OR VEGETATION SEEN
OTHERS	

JAYALAKSHMI S CARDIAC SONOGRAPHER

DR. SATISH C GOVIND SENIOR CONSULTANT

25/03/2023 02:51 PM

GENERATED BY

F

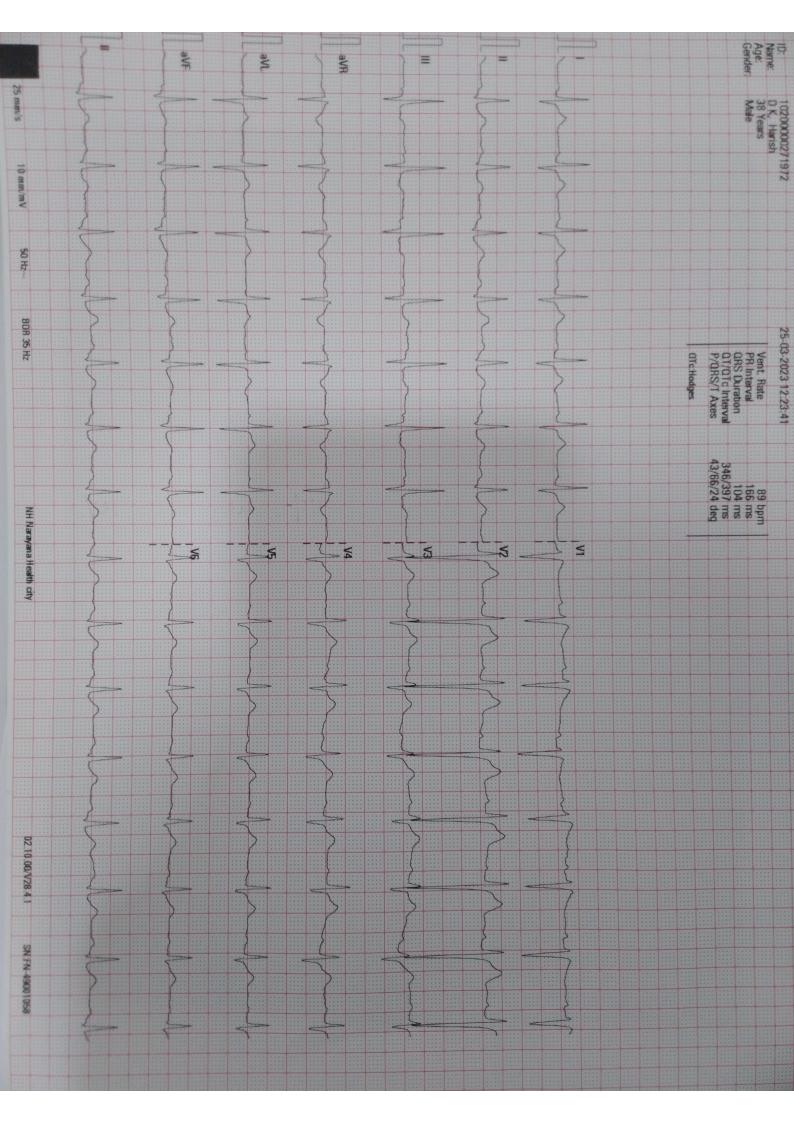
PREPARED BY : GUNASUNDARI VENKATESAN (368180) : GUNASUNDARI VENKATESAN (368180)

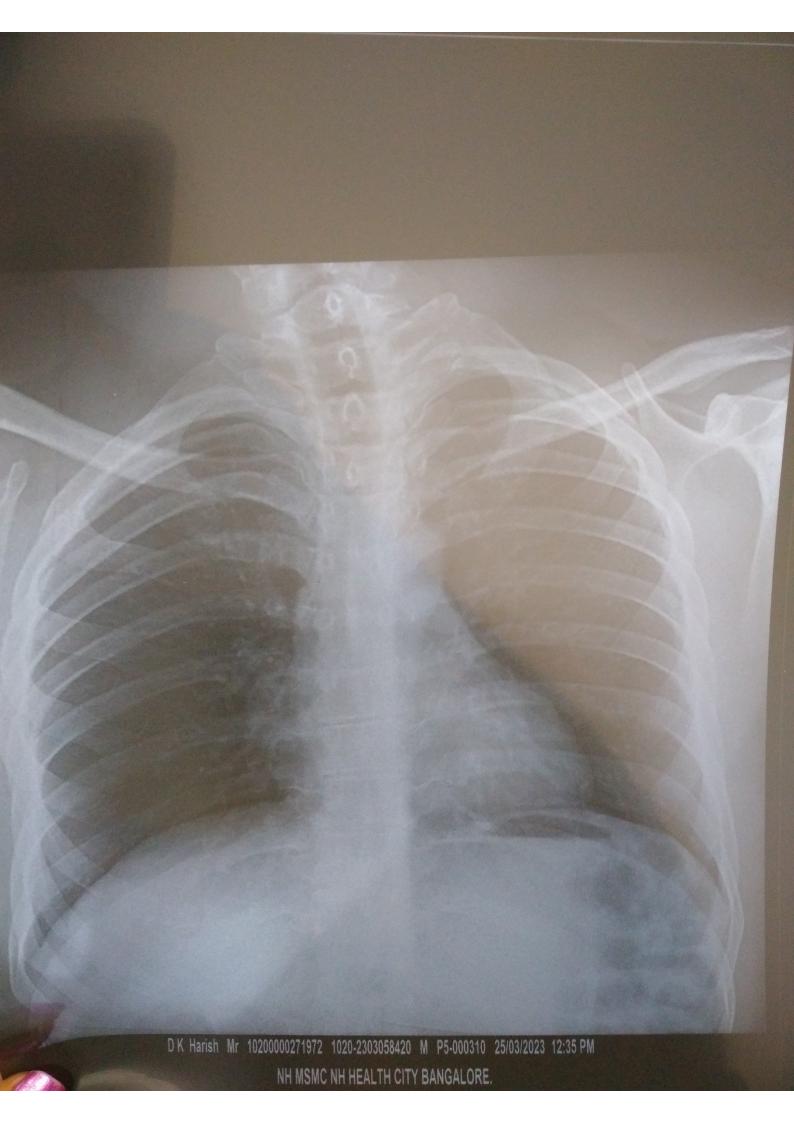
PREPARED ON

: 27/03/2023 12:10 PM : 27/03/2023 12;10 PM

GENERATED ON

NHNarayana OP CASESHEET 0014100 Institute of Cardiac Sciences Unit of Narayana Health : 10200000271972 Date : Mr Harish D K : 25/03/2023 06:15 PM patient MRN Department patient Name : FAMILY MEDICINE : Male , 38y 9m Consultant ; Doddaharave , Periyapatna, Mysuru, : Dr. Santosh K M · vx/Age Ref. Hospital Karnataka, India, 571104 : -Ref. Doctor tress : OP-001 : -Sponsor Name Number : OP, New Visit : ARCOFEMI HEALTHCARE LIMITED ultation Type : 7795779663 le Number LS nmHg) ht (cm) iratory Rate(brpm) : FCOMPLAINTS AND HPI Patho USG-Na-EZ-ERAL EXAMINATION : Known/Unknown gies (Habitus: : Cachectic/ Thin Built/ Average Built/ Obese/ Normal inent Family History : Negative/ Unknown hological Assessment: : Normal/Any Psychological Problem EMIC EXAMINATION RTIONAL ASSESSMENT STIGATIONS MENT SUGGESTED nÉVIEW ON Generated By : 25/03/2023 09:33 AM Generated On : Navitha N(320679) One free consultation with the same doctor within next 6 days Page 1 of 1





~			NH Mazumdar S Medical Cent Unit of Narayana Health
Patient Name	: Mr. Harish D K	MRN	: 10200000271972
Age	: 38 Years	Sex	: Male
Referring Doctor	: EHC	Date	: 25.03.2023

ULTRASOUND ABDOMEN AND PELVIS

CLINICAL DETAILS: Health check-up.

FINDINGS:

Liver is normal in size and echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesio

Portal vein is normal in course, caliber and shows hepatopetal flow. Hepatic veins and their conflue draining into the IVC appear normal. **CBD** is not dilated.

Gallbladder is partially distended without evidence of calculi or pericholecystic fluid.

Pancreas to the extent visualized (head only), 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, position, shape and echopattern. Corticomedullary differentiatio maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size, position, shape and echopattern. Corticomedullary differentiation 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 m lesion.

Prostate is normal in size (Volume = 20 cc).

There is no ascites.

IMPRESSION:

No significant abnormality detected.

Dr. Ann Mary Jose Resident

TYPED BY SHANTHA P

 Patient Name : Mr Harish D K
 MRN : 10200000271972
 Gender/Age : MALE , 38y (06/06/1984)

 Collected On : 25/03/2023 10:46 AM
 Received On : 25/03/2023 11:12 AM
 Reported On : 25/03/2023 11:27 AM

 Barcode : 022303250667
 Specimen : Whole Blood
 Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

	HEMATOL	OGY	
Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	16.9	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	6.04 H	million/µl	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	50.2 H	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	83.0	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	27.9	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.6	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.8	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	208	$10^3/\mu L$	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	8.9	$10^3/\mu L$	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	55.3	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	35.1	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	8.3	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	1.0	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.3	%	0.0-2.0

Final Report

Patient Name: Mr Harish D K MRN: 10200000271972 Gender/Age: MALE, 38y (06/06/1984)					
Absolute Neutrophil Count (Calculated)	4.93	x10 ³ cells/µl	2.0-7.0		
Absolute Lympocyte Count (Calculated)	3.13 H	x10 ³ cells/µl	1.0-3.0		
Absolute Monocyte Count (Calculated)	0.74	x10 ³ cells/µl	0.2-1.0		
Absolute Eosinophil Count (Calculated)	0.09	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.
 - If above reference range- Infection*
 - If very high in lakhs-Leukemia
 - Neutrophils -If above reference range-acute infection, mostly bacterial
 - $\label{eq:lymphocytes-lf} \mbox{Lymphocytes-lf} \mbox{ above reference range-chronic infection/viral infection}$
 - 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.

--End of Report-

Dupun M

Dr. Deepak M B MD, PDF, Hematopathology Consultant

Patient Name : Mr Harish D K MRN : 10200000271972 Gender/Age : MALE , 38y (06/06/1984)

Note

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





Patient Name : Mr Harish D K MRN : 10200000271972 Gender/Age : MALE , 38y (06/06/1984)

Collected On: 25/03/2023 10:46 AM Received On: 25/03/2023 11:40 AM Reported On: 25/03/2023 12:07 PM

Barcode : 032303250242 Specimen : Urine Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

	CLINICAL PAT	HOLOGY
Test	Result	Unit
Urine For Sugar (Fasting) (Enzyme Method (GOD	Not Present	-
POD))		

--End of Report-

Henra S

Dr. Hema S MD, DNB, Pathology Associate Consultant

Note

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- Kindly correlate clinically.





 Patient Name :
 Mr Harish D K
 MRN : 10200000271972
 Gender/Age : MALE , 38y (06/06/1984)

 Collected On :
 25/03/2023 10:46 AM
 Received On : 25/03/2023 11:40 AM
 Reported On : 25/03/2023 12:30 PM

 Barcode :
 032303250242
 Specimen :
 Urine
 Consultant :
 Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

	CLINICAL PAT	HOLOGY	
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	Yellow	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (pH Indicator Method)	6.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.003	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	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	0.0	/hpf	0-5
RBC	0.0	/hpf	0-4

Patient Name: Mr Harish D K MRN: 1020000271	972 Gender/Age	: MALE , 38y (06/06/198	4)
Epithelial Cells	0.0	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	0.4	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

--End of Report-

Churgh

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

Note

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- Kindly correlate clinically.



 Patient Name :
 Mr Harish D K
 MRN : 10200000271972
 Gender/Age : MALE , 38y (06/06/1984)

 Collected On :
 25/03/2023 10:46 AM
 Received On : 25/03/2023 11:49 AM
 Reported On : 25/03/2023 12:46 PM

 Barcode :
 1B2303250045
 Specimen :
 Whole Blood
 Consultant :
 Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	0	-
RH Typing (Column Agglutination Technology)	Positive	-

--End of Report-

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

Note

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- Kindly correlate clinically.



 Patient Name : Mr Harish D K
 MRN : 10200000271972
 Gender/Age : MALE , 38y (06/06/1984)

 Collected On : 25/03/2023 10:46 AM
 Received On : 25/03/2023 11:11 AM
 Reported On : 25/03/2023 12:39 PM

 Barcode : 022303250668
 Specimen : Whole Blood - ESR
 Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

HEMATOLOGY				
Test	Biological Reference Interval			
Erythrocyte Sedimentation Rate (ESR)	1	mm/1hr	0.0-10.0	

(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

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- Kindly correlate clinically.





Final Report

 Patient Name :
 Mr Harish D K
 MRN : 10200000271972
 Gender/Age : MALE , 38y (06/06/1984)

 Collected On :
 25/03/2023 10:46 AM
 Received On : 25/03/2023 11:11 AM
 Reported On : 25/03/2023 12:45 PM

Barcode : 012303251287 Specimen : Serum Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

	BIOCHEMIS	STRY	
Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.98	mg/dL	0.66-1.25
eGFR (Calculated)	85.6	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.
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	8 L	mg/dL	9.0-20.0
Serum Uric Acid (Colorimetric - Uricase, Peroxidase)	5.1	mg/dL	3.5-8.5
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	141	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	109	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	35 L	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	106.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	89 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	21.8	mg/dL	0.0-40.0

Final Report

Patient Name : Mr Harish D K MRN : 102000002719	72 Gender/Age	: MALE , 38y (06/06/1984	1)
Cholesterol /HDL Ratio (Calculated)	4.1	-	0.0-5.0
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	1.15	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)	1.05	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.50	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.70	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.8	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.68	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal- 5-phosphate))	26	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	18	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	61	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	26	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.

THYROID PROFILE (T3, T4, TSH)

Tri lodo Thyronine (T3) (Enhanced Chemiluminesence)	1.22	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminesence)	6.59	μg/dl	5.53-11.0

Patient Name : Mr Harish D K MRN : 10200000271972 Gender/Age : MALE , 38y (06/06/1984)

TSH (Thyroid Stimulating Hormone) (Enhanced 2.500 Chemiluminesence)

μlU/mL

Mrs. Latha B S

MSc, Mphil, Biochemistry

0.4-4.049

--End of Report-

Inushee

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

Note

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



MC-2688

Incharge, Consultant Biochemistry



Patient Name : Mr Harish D K MRN : 10200000271972 Gender/Age : MALE , 38y (06/06/1984)

Collected On : 25/03/2023 10:46 AM Received On : 25/03/2023 11:11 AM Reported On : 25/03/2023 01:14 PM

Barcode : 012303251286 Specimen : Whole Blood Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

BIOCHEMISTRY					
Test	Result	Unit	Biological Reference Interval		
HBA1C					
HbA1c (HPLC NGSP Certified)	5.2	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020		
Estimated Average Glucose (Calculated)	102.54	-	-		

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-

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

Note

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

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry





Final Report

Patient Name : Mr Harish D K MRN : 10200000271972 Gender/Age : MALE , 38y (06/06/1984)

Collected On: 25/03/2023 10:46 AM Received On: 25/03/2023 11:11 AM Reported On: 25/03/2023 12:01 PM

Barcode : 012303251285 Specimen : Plasma Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Colorimetric - Glucose Oxidase Peroxidase)	90	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020

--End of Report-

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

Note

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

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





Patient Name : Mr Harish D K MRN : 10200000271972 Gender/Age : MALE , 38y (06/06/1984)

Collected On: 25/03/2023 02:09 PM Received On: 25/03/2023 02:35 PM Reported On: 25/03/2023 03:15 PM

Barcode : 012303252038 Specimen : Plasma Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7795779663

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Colorimetric - Glucose Oxidase Peroxidase)	79	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

--End of Report-

Anushre

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)



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



