

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Varun Bhatia MRN : 10200000011742 Gender/Age : MALE , 41y (04/10/1981)

Collected On : 28/01/2023 09:26 AM Received On : 28/01/2023 09:49 AM Reported On : 28/01/2023 10:28 AM

Barcode : 012301280826 Specimen : Plasma Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Colorimetric - Glucose Oxidase Peroxidase)	103 H	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020

--End of Report--



Dr. Anushre Prasad
MBBS,MD, Biochemistry
Consultant Biochemistry



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

Note

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



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Varun Bhatia MRN : 10200000011742 Gender/Age : MALE , 41y (04/10/1981)

Collected On : 28/01/2023 09:26 AM Received On : 28/01/2023 09:48 AM Reported On : 28/01/2023 10:59 AM

Barcode : 012301280827 Specimen : Serum Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	1.01	mg/dL	0.66-1.25
eGFR (Calculated)	81.5	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.
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	13	mg/dL	9.0-20.0
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	7.82	mg/dL	3.5-8.5
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	205 H	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	150 H	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	46	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	159.0 H	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	130	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	30.0	mg/dL	0.0-40.0

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Cholesterol /HDL Ratio (Calculated) 4.5 - 0.0-5.0

Prostate Specific Antigen (PSA) (Enhanced Chemiluminescence) 0.704 ng/mL 0.0-2.5

THYROID PROFILE (T3, T4, TSH)

Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence) 1.27 ng/mL 0.97-1.69

Thyroxine (T4) (Enhanced Chemiluminescence) 7.81 µg/dl 5.53-11.0

TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence) 2.452 µIU/mL 0.4-4.049

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method) 0.60 mg/dL 0.2-1.3

Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry) 0.10 mg/dL 0.0-0.4

Unconjugated Bilirubin (Indirect) (Calculated) 0.5 mg/dL 0.0-1.1

Total Protein (Colorimetric - Biuret Method) 7.30 gm/dL 6.3-8.2

Serum Albumin (Colorimetric - Bromo-Cresol Green) 4.60 gm/dL 3.5-5.0

Serum Globulin (Calculated) 2.7 gm/dL 2.0-3.5

Albumin To Globulin (A/G)Ratio (Calculated) 1.71 - 1.0-2.1

SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate)) 35 U/L 17.0-59.0

SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate)) 37 U/L <50.0

Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer) 111 U/L 38.0-126.0

Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method)) 29 U/L 15.0-73.0

Interpretation Notes

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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.

--End of Report--



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Incharge, Consultant Biochemistry



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(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)



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Barcode : 012301280828 Specimen : Whole Blood Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
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HbA1C

HbA1c (HPLC NGSP Certified)	6.0 H	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
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Estimated Average Glucose (Calculated)	125.5	-	-
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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.

--End of Report--

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Collected On : 28/01/2023 09:26 AM Received On : 28/01/2023 09:49 AM Reported On : 28/01/2023 10:37 AM

Barcode : 022301280456 Specimen : Whole Blood - ESR Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Westergren Method)	3	mm/1hr	0.0-10.0

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

--End of Report--

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

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Varun Bhatia MRN : 10200000011742 Gender/Age : MALE , 41y (04/10/1981)

Collected On : 28/01/2023 10:09 AM Received On : 28/01/2023 10:26 AM Reported On : 28/01/2023 11:52 AM

Barcode : 032301280192 Specimen : Stool Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

CLINICAL PATHOLOGY

Test Result Unit Biological Reference Interval

STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Colour	Yellowish	-	-
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	3-4/hpf	/hpf	0-5

--End of Report--

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Consultant & Head - Hematology & Flow Cytometry

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Collected On : 28/01/2023 09:26 AM Received On : 28/01/2023 09:49 AM Reported On : 28/01/2023 10:00 AM

Barcode : 022301280457 Specimen : Whole Blood Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	14.6	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	5.55 H	million/ μ l	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	44.8	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	80.7 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	26.2 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.5	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.9	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	267	$10^3/\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	8.2	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	58.1	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	30.1	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	7.1	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	3.7	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	1.0	%	0.0-2.0

Patient Name : Mr Varun Bhatia MRN : 10200000011742 Gender/Age : MALE , 41y (04/10/1981)

Absolute Neutrophil Count (Calculated)	4.77	$\times 10^3$ cells/ μ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	2.47	$\times 10^3$ cells/ μ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.59	$\times 10^3$ cells/ μ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.31	$\times 10^3$ cells/ μ 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.
DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.

--End of Report--



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MBBS, MD, Pathology
Consultant & Head - Hematology & Flow Cytometry

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Patient Name : Mr Varun Bhatia MRN : 10200000011742 Gender/Age : MALE , 41y (04/10/1981)

Collected On : 28/01/2023 09:26 AM Received On : 28/01/2023 09:57 AM Reported On : 28/01/2023 10:39 AM

Barcode : 032301280153 Specimen : Urine Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

CLINICAL PATHOLOGY

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

--End of Report--



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MBBS, MD, Pathology
Consultant & Head - Hematology & Flow Cytometry

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Final Report

Patient Name : Mr Varun Bhatia MRN : 10200000011742 Gender/Age : MALE , 41y (04/10/1981)

Collected On : 28/01/2023 09:26 AM Received On : 28/01/2023 09:57 AM Reported On : 28/01/2023 10:38 AM

Barcode : 032301280153 Specimen : Urine Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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URINE ROUTINE & MICROSCOPY**PHYSICAL EXAMINATION**

Colour	STRAW	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction) (pH Indicator Method)	5.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.011	-	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)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present

MICROSCOPIC EXAMINATION

Pus Cells	0.2	/hpf	0-5
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Patient Name : Mr Varun Bhatia MRN : 10200000011742 Gender/Age : MALE , 41y (04/10/1981)

RBC	0.5	/hpf	0-4
Epithelial Cells	0.2	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	2.5	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

--End of Report--



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

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Varun Bhatia MRN : 1020000011742 Gender/Age : MALE , 41y (04/10/1981)

Collected On : 28/01/2023 09:26 AM Received On : 28/01/2023 09:47 AM Reported On : 28/01/2023 10:24 AM

Barcode : 1B2301280025 Specimen : Whole Blood Consultant : Dr. Santosh K M(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9686192444

NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
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BLOOD GROUP & RH TYPING

Blood Group (Column Agglutination Technology)	B	-
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RH Typing (Column Agglutination Technology)	Positive	-
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--End of Report--

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

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CONSULTATION SUMMARY

Patient MRN : 10200000011742
Patient Name : Mr Varun Bhatia
Gender/Age/Dob : Male , 41 Years , 04/10/81
Patient Phone No : 9686192444
Patient Address : C/O Vijaya Bank (Bank of Baroda) , A-303, Smondo 3 New town Electronic city , Bangalore,Karnataka,IN, -560100

Consultation Date: 28/01/2023 01:58 PM
Consultant : Dr. Santosh K M (FAMILY MEDICINE)
Consultation Type : OP , NEW VISIT



VITALS

Blood Pressure: 126/80 mmHg

SPO2 : 98 % , Room air

Height: 174 cm

Weight: 75 kg

BMI: 24.77 kg/m²

BSA: 1.90 m²

CLINICAL IMPRESSION

- GERD
Hyperlipidemia
Prediabetes

MEDICATION ORDER

DRUG NAME

1) PANTOPRAZOLE+ITOPRIDE-CAPSULE-40MG+150MG-PANTOCID IT

PATIENT INSTRUCTION

Patient Instruction: Once Daily (1 - 0 - 0 - 0) Capsule For 15 Days , Qty: 15 , Start Date: Jan 28, 2023 , End Date: Feb 11, 2023

ADVICE

- Hydration atleast 4 litres per day
Food in time .
Food Quality (as discussed in outpatient department)
Exercise- atleast 30 min brisk walk daily
Sleep Hygiene
Home BP monitoring and charting

FOLLOW UP DETAILS

- Physical Consultation after 3 Months with below investigation results

Follow-up Investigation

URINE FOR MICROALBUMIN TO CREATININE RATIO | HBA1C | POST PRANDIAL BLOOD SUGAR (PPBS) | FASTING BLOOD SUGAR (FBS) | LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)



Patient Name : Mr. Varun Bhatia
Age : 41 Years
Referring Doctor : EHC

MRN : 1020000011742
Sex : Male
Date : 28.01.2023

ULTRASOUND ABDOMEN AND PELVIS

CLINICAL DETAILS: Health Check-up.

FINDINGS:

Liver is enlarged in size (16.7 cm) and shows diffuse increase in parenchymal echogenicity, suggestive of mild fatty infiltration. No intra or extra hepatic biliary duct dilatation. No focal lesions.

Portal vein is normal in course and caliber. Hepatic veins and their confluence 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), appears normal in size, contour and echogenicity. Tail is obscured by bowel gas.

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 differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Retroperitoneum – Obscured by bowel gas.


Urinary Bladder is partially distended. No evidence of calculi, mass or mural lesion.

Prostate is normal in size, (volume – 22 cc).

There is no ascites.

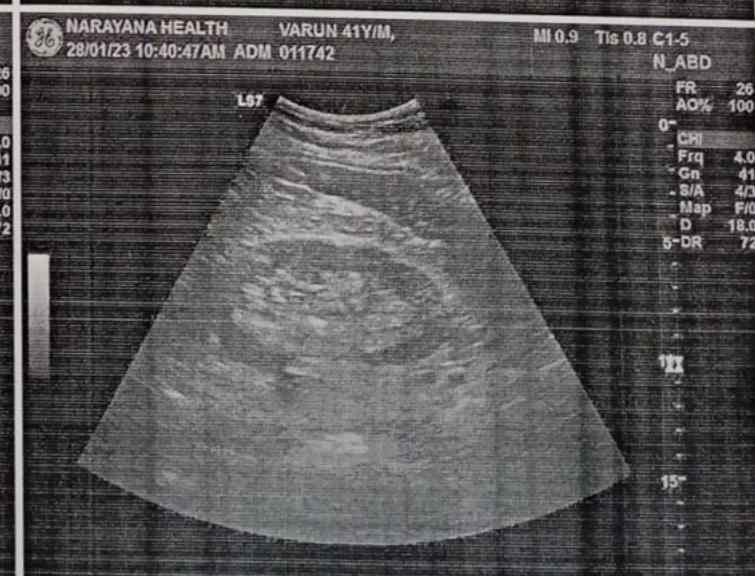
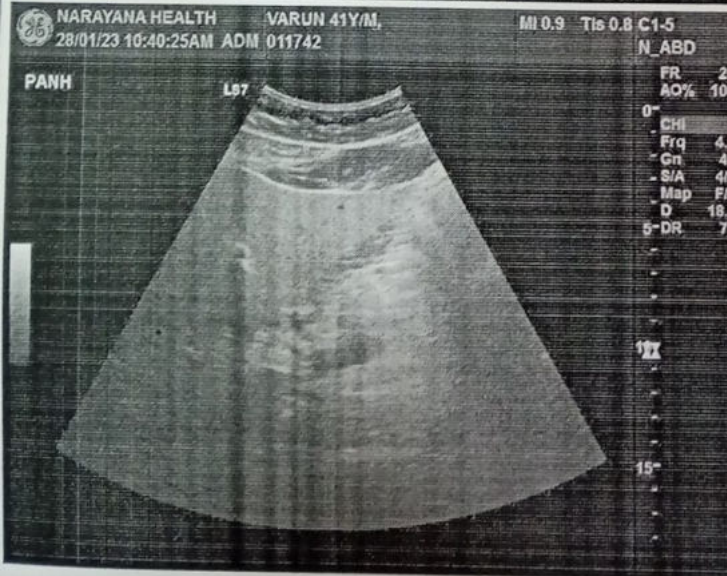
IMPRESSION:

- **Hepatomegaly with mild fatty infiltration.**


Dr. Sahana
Resident

Typed by: Mrs Shobha. G

Patient name	VARUN 41Y/M	Age/Sex	
Patient ID	011742	Visit No	1
Referred by		Visit Date	28/01/2023



ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Mr Varun Bhatia
GENDER/AGE : Male, 41 Years
LOCATION : ASPA (R-1)

PATIENT MRN : 10200000011742
PROCEDURE DATE : 28/01/2023 11:27 AM
REQUESTED BY : Dr. Santosh K M



INDICATIONS : ASYMPTOMATIC
CLINICAL DIAGNOSIS : HEALTH CHECK
PREVIOUS ECHO REPORT : NO REPORTS AVAILABLE
VITAL PARAMETERS : HR (BPM) :81, SINUS RHYTHM, BP (MMHG) : 121/91, SO2 - 98 %

IMPRESSION

- NORMAL CHAMBER DIMENSIONS
- NO RWMA
- NORMAL VALVES
- NORMAL PA PRESSURE
- NORMAL RV AND LV FUNCTION
- LVEF - 60 %

FINDINGS

CHAMBERS

LEFT ATRIUM : NORMAL SIZED
AP DIAMETER(MM): 30

RIGHT ATRIUM : NORMAL SIZED
MINOR AXIS A4CV(MM) : 31

LEFT VENTRICLE : NORMAL SIZED, NORMAL LV FILLING PRESSURE, NORMAL LV FUNCTION.
LVIDD(MM) : 41 IVSD(MM) : 10 EDV(ML) : 74
LVIDS(MM) : 29 LVPWD(MM) : 1 ESV(ML) : 32
E/A RATIO : 1.3 E/E'(AVERAGE) : 6 LVEF(%) : 60

RIGHT VENTRICLE : NORMAL SIZE AND THICKNESS WITH NORMAL FUNCTION
MINOR AXIS A4CV(MM): 27, TAPSE(MM): 19

LVOT/RVOT : NORMAL
RWMA : NO RWMA

VALVES

MITRAL : NORMAL, MR - TRIVIAL
AORTIC : NORMAL, PG - 3 MMHG
TRICUSPID : NORMAL, TR - TRIVIAL, TR PV - 2.4 M/S
PULMONARY : NORMAL, PG - 3 MMHG

SEPTAE

IAS : INTACT
IVS : INTACT

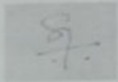
ARTERIES AND VEINS

AORTA : NORMAL, LEFT AORTIC ARCH. AORTIC ANNULUS - 16 MM, ASCENDING AORTA - 27 MM.

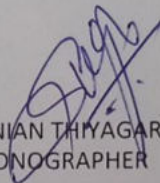


MR VARUN BHATIA (10200000011742)

PA : NORMAL SIZED, PAT - 139 MS, PASP - 27 MMHG, NORMAL PA PRESSURE.
IVC : IVC - 13 MM, NORMAL SIZED & COLLAPSIBILITY > 50 %. RAP - 3 MMHG, NORMAL.
SVC & CS : NORMAL
PULMONARY VEINS : NORMAL
PERICARDIUM : NORMAL PERICARDIAL THICKNESS. NO EFFUSION
INTRACARDIAC MASS : NO TUMOUR, THROMBUS OR VEGETATION SEEN
OTHERS : -



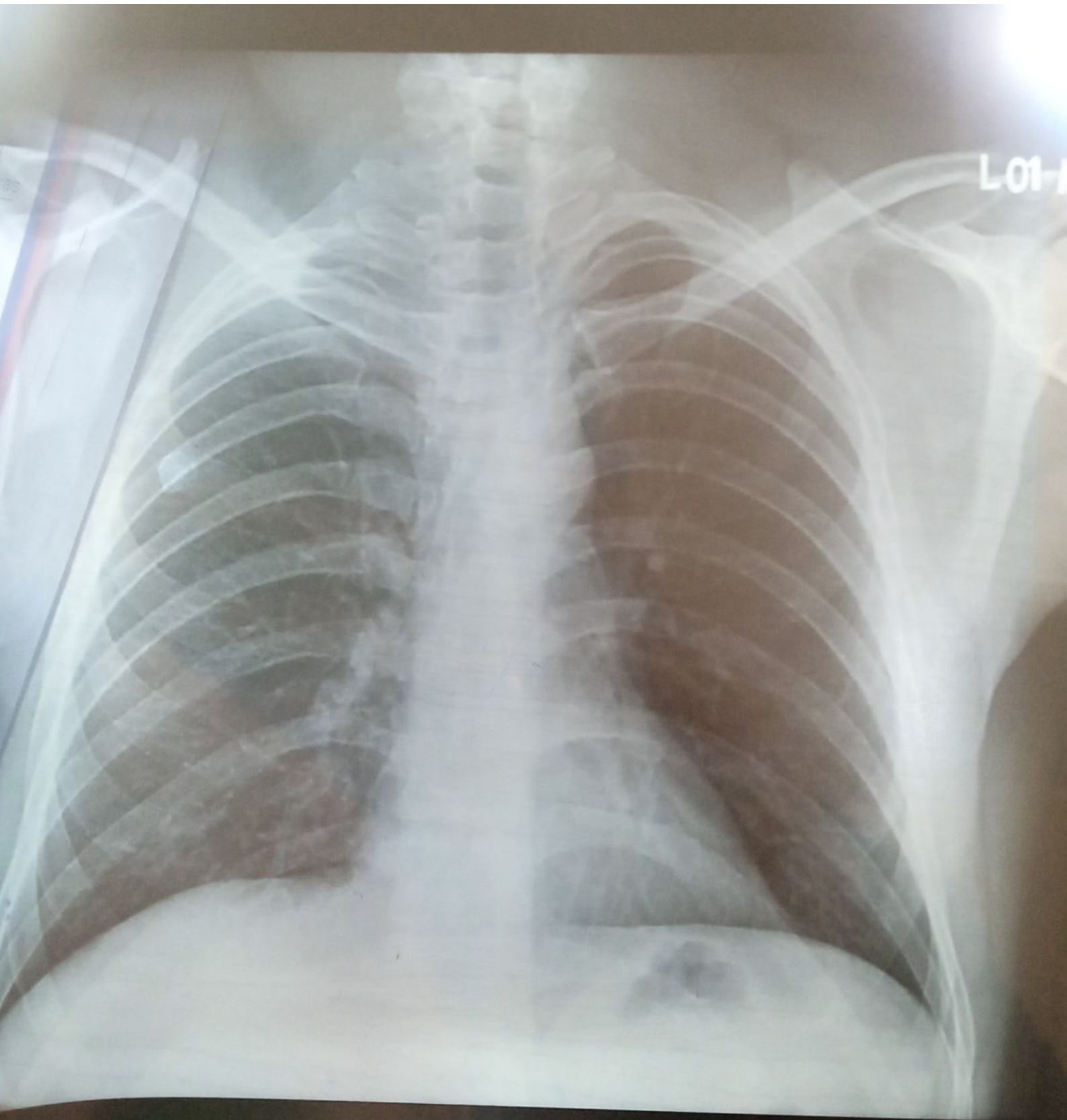
DR. SATISH C GOVIND
SENIOR CONSULTANT


SUBRAMANIAN THIYAGARAJAN
CARDIAC SONOGRAPHER

28/01/2023 11:27 AM

PREPARED BY : GUNASUNDARI V(915675)
GENERATED BY : GUNASUNDARI V(915675)

PREPARED ON : 28/01/2023 11:31 AM
GENERATED ON : 28/01/2023 11:31 AM



L01

VARUN 11742 10202301003540 M Table 1/28/2023

NH HEALTHCITY BANGALORE