# CONSULTATION SUMMARY



Unit of Narayana Health

Patient MRN

:10090000366803

Patient Name

:Mr Vikram T B Gender/Age/Dob : Male , 31 Years , 12/03/92

Patient Phone No: 9964963808 Patient Address

:S/O BHIMANAIK, #13, SEVALAL

NAGAR (V) HONNALI (TQ), Davanagere, Karnataka, India

Consultation Date :14/10/2023 12:02 PM Consultant

:Dr. Kiran V H (GENERAL

MEDICINE)

Consultation Type : OP , NEW VISIT

## CHIEF COMPLAINTS & HISTORY OF PRESENT ILLNESS

HEALTH PACKAGE

: FOR A GENERAL HEALTH EVALUATION

NO MAJOR COMPLAINTS:

## PAST MEDICAL HISTORY

No significant past medical history

## VITALS

Blood Pressure: 110/70 mmHg

Heart Rate: 68 bpm SPO2 : 97 % , Room air

Height: 175 cm Weight: 70 kg

BSA: 1.84 m2 Fall Score: Low

Pain Score: 0 (MUSCULAR)

BMI: 22.86 kg/m2



## MEDICATION ORDER

## DRUG NAME

GINSENG EXTRACT+VITAMINS+MINERALS-

CAPSULE -.- ALLRICH GX

## PATIENT INSTRUCTION

Once Daily (1-0-0-0) Capsule After Food For 3 Months I Qty: 90 | Start Date: Oct 14, 2023 | End Date: Jan 11, 2024

## **ADVICE**

AVOID RED MEAT AND PROCESSED FOOD

## **ALLERGY**

No known allergies

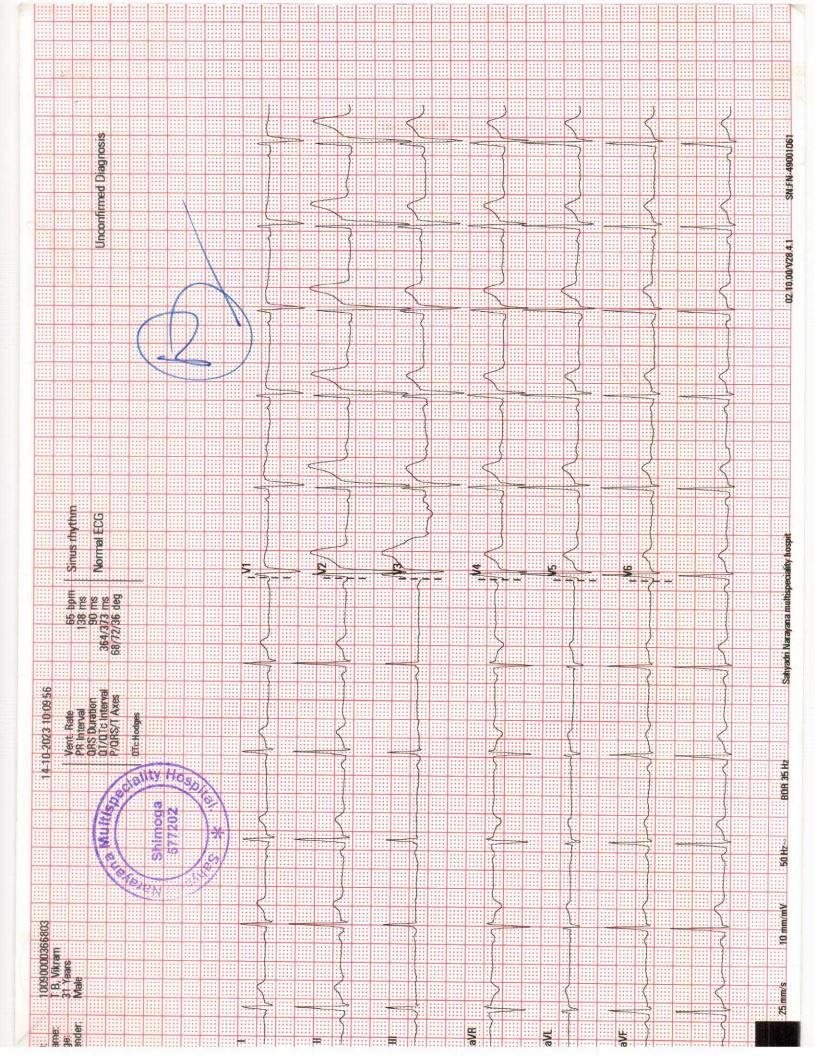
## FOLLOW UP DETAILS

Physical Consultation for Dr. Kiran V H (GENERAL MEDICINE) after 3 Months with below investigation results

Follow-up Investigation









Patient Name :: Mr. Vikram T B	Age :: 31Yrs	Sex :: Male
Ref. Doctor :: Dr. Kiran V H	MRN No :: 366803	Date: 14/10/2023

## **ULTRASOUND ABDOMEN**

- LIVER: is normal in size and shows normal echotexture. No focal mass lesions seen. Intra and extra biliary radicals are normal. Main portal vein and CBD are normal.
- GALL BLADDER: is well distended. No calculi seen. No pericholecystic fluid collection seen.
- SPLEEN: is normal in size and show normal echopattern. No focal lesion.
- PANCREAS: to the extent seen appears normal in echopattern.
- KIDNEYS: Both kidneys are normal in size and shows normal corticomedullary echogenicity. No calculi /Hydronephrosis.

Right kidney measures: 9.7 x 4.4 cms.

Left kidney measures: 10.5 x 4.0 cms.

- URINARY BLADDER: Well distended. No abnormal internal contents.
- PROSTATE: is normal in size ,shape and echotexture. No focal mass lesion seen.
- No free fluid seen in the abdomen.

## IMPRESSION:

NO SIGNIFICANT ABNORMALITY DETECTED.



Associate Consultant Radiologist



## **DEPARTMENT OF LABORATORY MEDICINE**

**Final Report** 

Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Collected On: 14/10/2023 09:32 AM Received On: 14/10/2023 10:18 AM Reported On: 14/10/2023 12:06 PM

Barcode: 712310140061 Specimen: Whole Blood Consultant: Dr. Kiran V H(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9964963808

	HAEMATOLO	GY LAB	
Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)	*		
Haemoglobin (Hb%) (Oxymethemoglobin Method)	14.0	g/dL	13.0-17.0
Red Blood Cell Count (Coulter Principle/Electrical Impedence)	6.25 H	Million/ul	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	43.7	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	69.9 L	fL	77.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	22.4 L	pg	25.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.1	g/L	31.5-34.5
Red Cell Distribution Width (RDW) (Derived From RBC Histogram)	15.0 H	%	11.6-14.0
Platelet Count (Coulter Principle/Electrical Impedence)	266	Thous/µL	150.0-450.0 7.0-11.7 Shimoga
Mean Platelet Volume (MPV)	8.4	fL	7.0-11.7 Shimoga 377202
Total Leucocyte Count(WBC) (Coulter Principle /Electrical Impedence)	7.1	Thous/cumm	4.0-10.0 Shimoga 577202 F
DIFFERENTIAL COUNT (DC)			71,05 11,00
Neutrophils (VCSn Technology)	56.9	%	40.0-75.0
Lymphocytes (VCSn Technology)	32.3	%	20.0-40.0
Monocytes (VCSn Technology)	6.4	%	2.0-10.0





Patient Name : Mr Vikram T B	MRN: 10090000366803	Gender/Age : MALE , 31y (12/	(03/1992)
Eosinophils (VCSn Technology)	3.9	%	0.0-6.0
Basophils (Calculated)	0.5	%	0.0-4.0
NRBC	0.1		
Absolute Neutrophil Count	4.0	Thous/cumm	2.0-7.0
Absolute Lymphocyte Count	2.3	Thous/cumm	1.0-3.0
Absolute Monocyte Count	0.5	Thous/cumm	0.2-1.0
Absolute Eosinophil Count	0.3	Thous/cumm	0.02-0.5

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

-- End of Report-

X1000/cumm

0.02-0.1

Dr. Sujata N MBBS, DCP, MD

Absolute Basophil Count

CONSULTANT

	HAEMATO	LOGY LAB
Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Slide Technique And Tube Technique)	"0"	
RH Typing (Slide Technique And Tube Technique)	Positive	

Page 2 of 3



Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Dr. Rashmi Vaidya MBBS, MD CONSULTANT

### Note

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





Page 3 of 3







Diabetic: >200

## **DEPARTMENT OF LABORATORY MEDICINE**

**Final Report** 

Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Collected On: 14/10/2023 12:05 PM Received On: 14/10/2023 12:38 PM Reported On: 14/10/2023 01:04 PM

Barcode: 702310140249 Specimen: Plasma Consultant: Dr. Kiran V H(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9964963808

## **CLINICAL BIOCHEMISTRY**

Test Result Unit **Biological Reference Interval** POST PRANDIAL BLOOD GLUCOSE (PPBG) 75 mg/dl Normal: 70-139 Prediabetic: 140-199

(Glucose Oxidase, Peroxidase)

Interpretations:

(ADA Standards Jan 2017)

FBS can be less than PPBS in certain conditions like post prandial reactive hypoglycaemia, exaggerated response to insulin, subclinical hypothyroidism, very lean/anxious individuals. In non-diabetic individuals, such patients can be followed up with GTT.

-- End of Report-

Dr. Rashmi Vaidya

MBBS, MD CONSULTANT

#### Note

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







## DEPARTMENT OF LABORATORY MEDICINE

**Final Report** 

Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Collected On: 14/10/2023 09:32 AM Received On: 14/10/2023 10:15 AM Reported On: 14/10/2023 11:29 AM

Barcode: 702310140128 Specimen: Serum Consultant: Dr. Kiran V H(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9964963808

		CLINICAL BIO	CHEMISTRY		
Test		Result	Unit	Biological Referen	ce Interval
LIPID PROFILE (CHOL,TR	IG,HDL,LDL,VLDL)				
Cholesterol Total (Enzyma	etic Method)	267 H	mg/dL	Normal High Borderline	<200 >240 200 - 239
Triglycerides (Enzymatic M Oxidase And Peroxidase))	lethod (lipase, Kinase,	142	mg/dL	Very High Borderline High High	=>500 150 - 199 200 - 499
HDL Cholesterol (HDLC) Enzymatic Method)	Precipitation Followed By	64 H	mg/dL	40.0-60.0	
Non-HDL Cholesterol		203.0			
LDL Cholesterol (Enzymati Oxidase, Peroxidase))	c Method (esterase,	143.72 H	mg/dL	0.0-100.0	
LDL value interpretation:					
Optimal Value: Near to above Optimal: Borderline High: High: Very High:	<100 mg/dL 100-129 mg/dL 130-159 mg/dL 160-189 mg/dL >189 mg/dL				
VLDL Cholesterol (Calculat	ted)	28	mg/dL	0.0-40.0	
Cholesterol /HDL Ratio (C	Calculated)	4.2		0.0-5.0	
THYROID PROFILE (T3, T4	4, TSH)				
Tri Iodo Thyronine (T3) (C Immuno Assay (CLIA))	Chemiluminescence	1.46	ng/ml	0.97-1.69	

Thyroid hormone binding protein can profoundly affect total T3 and total T4 levels especially in pregnancy and in patients on steroid

Unbound fractions of T3 and T4(FT3, FT4) of thyroid hormones are biologically active forms and correlate more closely with clinical status of the patient.







Patient Name: Mr Vikram T B	MRN: 10090000366803	Gender/Age: MALE, 31y (12/03/1992)
-----------------------------	---------------------	------------------------------------

Thyroxine (T4) (Chemiluminescence Immuno Assay (CLIA))	7.53	mcg/dl	3.2-12.6
TSH (Thyroid Stimulating Hormone) (Chemiluminescence Immuno Assay (CLIA))	1.018	mIU/L	0.4-4.04

## Interpretations:

TSH levels are subject to circadian variation, reaching peak levels between 2-4 a.m. and minimum between 6-10 p.m. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentration.

# LIVER FUNCTION TEST(LFT)

Bilirubin Total (Modified Diazo Method)	0.9	mg/dl	0.2-1.0	
Conjugated Bilirubin (Direct) (Differential Spectrophotometry)	0.4 H	mg/dL	0.0-0.3	
Unconjugated Bilirubin (Indirect) (Calculated)	0.6			
Total Protein (Biuret Method)	8.0	g/dL	6.4-8.2	
Serum Albumin (BCG Dye Binding Method)	4.7	g/dL	3.5-5.0	
Serum Globulin (Calculated)	3.3	g/dL	2.0-3.5	
Albumin To Globulin (A/G)Ratio (Calculated)	1.5		1.0-2.1	
SGOT (AST) (UV With P5P)	21	U/L	17.0-59.0	
SGPT (ALT) (UV With PSP)	19	U/L	<50.0	
Alkaline Phosphatase (ALP) (PNPP With AMP Buffer)	70	IU/L	38.0-126.0	
Gamma Glutamyl Transferase (GGT) (Enzymatic (Gamma Glutamyl Nitranilide))	25	U/L	15.0-73.0	
RENAL PACKAGE - 2 (RFT FASTING)				
FASTING BLOOD GLUCOSE (FBG) (Glucose Oxidase, Peroxidase)	95	mg/dL	High Normal Prediabetic	>126 70 - 100 100 - 125
Blood Urea Nitrogen (BUN) (Urease, UV)	9	mg/dL	9.0-20.0	

Page 2 of 3





SERUM CREATININE



Patient Name: Mr Vikram T B MRN: 10090000366	803 Gender/Age	: MALE , 31y (12/03/19	92)
Serum Creatinine (Enzymatic Method (hydrolase, Oxidase, Peroxidase))	0.8	mg/dl	0.66-1.25
eGFR (Calculated By MDRD Formula)	112.8	mL/min/1.73m <sup>2</sup>	Inductive of Renal Impairment:<60 Note:eGFR is inaccurate for Hemodynamically unstable patients. eGFR is not applicable for less than 18 years of age.
Serum Sodium (ISE Potentiometry)	138	mmol/L	137.0-145.0
Serum Potassium (ISE Potentiometry)	5.2 H	mmol/L	3.5-5.0
Serum Chloride (ISE Direct )	102	mmol/L	98.0-107.0
Serum Bicarbonate Level (Enzymatic Endpoint By Reflectance Spectrophotometry)	22	mmol/L	22.0-30.0
Serum Calcium (Arsezano III Dye Binding Method)	9.8	mg/dL	8.4-10.2
Serum Magnesium (Dye Binding)	1.9	mg/dl	1.6-2.3
Serum Uric Acid (Enzymatic Method (Uricase))	5.0	mg/dL	3.5-7.2
Serum Phosphorus (Phosphomolybdate Reduction)	4.4	mg/dL	2.5-4.5

-- End of Report-

Dr. Rashmi Vaidya MBBS, MD

CONSULTANT

## Note

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





Page 3 of 3









# DEPARTMENT OF LABORATORY MEDICINE

**Final Report** 

Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Collected On: 14/10/2023 09:32 AM Received On: 14/10/2023 10:11 AM Reported On: 14/10/2023 10:55 AM

Barcode: 722310140010 Specimen: Urine Consultant: Dr. Kiran V H(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9964963808

	CLINICAL PAT	HOLOGY	
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	29	ml	
Colour	Pale Yellow		
Appearance	Clear		
CHEMICAL EXAMINATION			
pH(Reaction) (Semiquantitative Strip Method- Double Indicator Principle)	5.5		4.8-7.5
Sp. Gravity (Semiquantitative Strip Method- chromatographic Reaction)	1.015		1.002 - 1.03
Protein (Semiquantitative Strip Method- Protein Error Of Indicator)	Negative		Negative
Urine Glucose (Semiquantitative Strip Method- Glucose Oxidase Technique)	Negative		Negative
Ketone Bodies (Semiquantitative Strip Method- Sodium Nitroprusside Chromatography)	Negative		Negative
Bile Salts (Semiquantitative Strip Method)	Negative		Negative
Bile Pigment (Bilirubin) (Semiquantitative Strip Method- Azodyes)	Negative		Negative
<b>Urobilinogen</b> (Semiquantitative Strip Method-Fast B Blue)	Normal		Negative
Urine Leucocyte Esterase (Semiquantitative Strip Method-diazonium Compounds)	Negative		Negative





Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Blood Urine (Semiquantitative Strip Method-

Peroxidase)

Negative

Negative

Nitrite (Semiquantitative Strip Method-diazonium

Compounds)

Negative

Negative

MICROSCOPIC EXAMINATION

Pus Cells

2-4/hpf

0-2

RBC

Not Seen

Nil

**Epithelial Cells** 

2-3/hpf

2-3

Grit.N.

Dr. Sujata N MBBS, DCP, MD CONSULTANT

**CLINICAL PATHOLOGY** 

Test

Result

Unit

Urine For Sugar (Fasting) (Semiquantitative Strip

Method-Glucose Oxidase Technique)

NILL

-- End of Report-

Dr. Rashmi Vaidya MBBS, MD

CONSULTANT



Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

#### Note

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





Page 3 of 3

(A Unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497

Registered Office: 258/A. Bommasandra Industrial Area Anekal Taluk Bangalora 560000







# **DEPARTMENT OF LABORATORY MEDICINE**

**Final Report** 

Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Collected On: 14/10/2023 09:32 AM Received On: 14/10/2023 10:16 AM Reported On: 14/10/2023 12:23 PM

Barcode: 702310140127 Specimen: Plasma Consultant: Dr. Kiran V H(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9964963808

**CLINICAL BIOCHEMISTRY** 

Test Result Unit

FASTING BLOOD GLUCOSE (FBG) (Glucose 94 mg/dL

Oxidase, Peroxidase)

**Biological Reference Interval** 

High Normal Prediabetic

>126 70 - 100 100 - 125

-- End of Report-

Lehlholle

Dr. Rashmi Vaidya MBBS, MD CONSULTANT

#### Note

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











## **DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Collected On: 14/10/2023 12:05 PM Received On: 14/10/2023 12:29 PM Reported On: 14/10/2023 12:44 PM

Barcode: 722310140023 Specimen: Urine Consultant: Dr. Kiran V H(GENERAL MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9964963808

CLINICAL PATHOLOGY

Unit

Test Result

NILL **Urine For Sugar (Post Prandial)** 

(Semiquantitative Strip Method-Glucose Oxidase

Technique)

-- End of Report-

Dr. Sujata N MBBS, DCP, MD CONSULTANT

#### Note

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









## **DEPARTMENT OF LABORATORY MEDICINE**

**Final Report** 

Patient Name: Mr Vikram T B MRN: 10090000366803 Gender/Age: MALE, 31y (12/03/1992)

Collected On: 14/10/2023 09:32 AM Received On: 14/10/2023 10:14 AM Reported On: 14/10/2023 12:08 PM

Barcode: 702310140129 Specimen: Whole Blood Consultant: Dr. Kiran V H(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9964963808

Result	Unit	Biological Reference Interval
5.6	%	Un to-Normal: < 6

Good Control: 6.01-7.00 Fair Control: 7.01-8.00 Poor Control: > 8.01

Estimated Average Glucose 114.02

Test

HBA1C HbA1c

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.

CLINICAL BIOCHEMISTRY

- 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-

Dr. Rashmi Vaidya MBBS, MD CONSULTANT

#### Note

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













R Vikram T B Mr 10090000366803 031Y CHEST, FRN P->A 14-10-2023
SAHYADRI NARAYANA HRUDAYALAYA, SHIMOGA