

Name : Mr. SATHYANARAYANAN M K
N
PID No. : PRT17587
SID No. : 79645683
Age / Sex : 43 Year(s)/ Male
Type : OP
Ref. Dr : MediWheel

Register On : 14/11/2022 10:03 AM
Collection On : 14/11/2022 11:44 AM
Report On : 17/11/2022 4:12 PM
Printed On : 19/11/2022 8:45 AM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

BLOOD GROUPING AND Rh TYPING


'B' 'Positive'

(EDTA Blood/Agglutination)


INTERPRETATION: Reconfirm the Blood group and Typing before blood transfusion

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	14.8	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood/Derived from Impedance)	44.7	%	42 - 52
RBC Count (EDTA Blood/Impedance Variation)	5.19	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood/Derived from Impedance)	86.2	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood/Derived from Impedance)	28.5	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood/Derived from Impedance)	33.1	g/dL	32 - 36
RDW-CV (EDTA Blood/Derived from Impedance)	14.4	%	11.5 - 16.0
RDW-SD (EDTA Blood/Derived from Impedance)	43.44	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood/Impedance Variation)	7400	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood/Impedance Variation & Flow Cytometry)	73.8	%	40 - 75
Lymphocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	16.5	%	20 - 45
Eosinophils (EDTA Blood/Impedance Variation & Flow Cytometry)	1.9	%	01 - 06


DR GURUPRIYA J
PATHOLOGIST
Reg No : 13-48036

VERIFIED BY


Dr. E. Saravanan M.D(Path)
Consultant Pathologist
Reg No : 73347

APPROVED BY

The results pertain to sample tested.

Page 1 of 7

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.




Name : Mr. SATHYANARAYANAN M K
PID No. : PRT17587
SID No. : 79645683
Age / Sex : 43 Year(s) / Male
Type : OP
Ref. Dr : MediWheel


Register On : 14/11/2022 10:03 AM
Collection On : 14/11/2022 11:44 AM
Report On : 17/11/2022 4:12 PM
Printed On : 19/11/2022 8:45 AM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Monocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	6.7	%	01 - 10
Basophils (EDTA Blood/Impedance Variation & Flow Cytometry)	1.1	%	00 - 02
INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	5.46	10 ³ / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	1.22	10 ³ / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.14	10 ³ / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.50	10 ³ / µl	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.08	10 ³ / µl	< 0.2
Platelet Count (EDTA Blood/Impedance Variation)	195	10 ³ / µl	150 - 450
MPV (EDTA Blood/Derived from Impedance)	7.9	fL	7.9 - 13.7
PCT (EDTA Blood/Automated Blood cell Counter)	0.15	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated - Westergren method)	5	mm/hr	< 15
BUN / Creatinine Ratio	8.03		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	90.0	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126


DR GURUPRIYA J
PATHOLOGIST
 Reg No : 13-48036

VERIFIED BY


Dr. E. Saravanan M.D (Path)
 Consultant Pathologist
 Reg No : 73347

APPROVED BY

The results pertain to sample tested.

Page 2 of 7

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name : Mr. SATHYANARAYANAN M K
 N
 PID No. : PRT17587
 SID No. : 79645683
 Age / Sex : 43 Year(s) / Male
 Type : OP
 Ref. Dr : MediWheel

Register On : 14/11/2022 10:03 AM
 Collection On : 14/11/2022 11:44 AM
 Report On : 17/11/2022 4:12 PM
 Printed On : 19/11/2022 8:45 AM



Investigation

Observed Value Unit

Biological Reference Interval

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	97.6	mg/dL	70 - 140

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

Remark: kindly correlate clinically, suggested repeat testing with a fresh sample, if clinically indicated.


Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	8.6	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	1.07	mg/dL	0.9 - 1.3

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetylcysteine, chemotherapeutic agent such as flucytosine etc.


Uric Acid (Serum/Enzymatic)	5.7	mg/dL	3.5 - 7.2
--------------------------------	-----	-------	-----------

Liver Function Test

Bilirubin(Total) (Serum/DCA with ATCS)	0.77	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.22	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.55	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	26.7	U/L	5 - 40


DR. GURUPRIYA J
PATHOLOGIST
 Reg No : 13-48036

VERIFIED BY


Dr. E. Saravanan M.D(Path)
Consultant Pathologist
 Reg No : 73347

APPROVED BY

The results pertain to sample tested.



Name : Mr. SATHYANARAYANAN M K
 N
 PID No. : PRT17587
 SID No. : 79645683
 Age / Sex : 43 Year(s) / Male
 Type : OP
 Ref. Dr : MediWheel


Register On : 14/11/2022 10:03 AM
 Collection On : 14/11/2022 11:44 AM
 Report On : 17/11/2022 4:12 PM
 Printed On : 19/11/2022 8:45 AM




<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	22.1	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	21.0	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	89.9	U/L	53 - 128
Total Protein (Serum/Biuret)	6.15	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.05	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.10	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.93		1.1 - 2.2
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	164.1	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	65.7	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

HDL Cholesterol
(Serum/Immunoinhibition) **51.9** mg/dL
 Optimal(Negative Risk Factor): >= 60
 Borderline: 40 - 59
 High Risk: < 40


DR GURUPRIYA J
PATHOLOGIST
 Reg No : 13-48036

VERIFIED BY


Dr. E. Saravanan M.D(Path)
 Consultant Pathologist
 Reg No : 73347

APPROVED BY

The results pertain to sample tested.

Page 4 of 7

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name : Mr. SATHYANARAYANAN M K
N
PID No. : PRT17587
SID No. : 79645683
Age / Sex : 43 Year(s) / Male
Type : OP
Ref. Dr : MediWheel

Register On : 14/11/2022 10:03 AM
Collection On : 14/11/2022 11:44 AM
Report On : 17/11/2022 4:12 PM
Printed On : 19/11/2022 8:45 AM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
LDL Cholesterol (Serum/Calculated)	99.1	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	13.1	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	112.2	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220


INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3.2		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	1.3		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	1.9		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0


Glycosylated Haemoglobin (HbA1c)

HbA1C (Whole Blood/HPLC)	5.2	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5
-----------------------------	-----	---	---

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %


DR. GURUPRIYA J
PATHOLOGIST
Reg No : 13-48036

VERIFIED BY


Dr. E. Saravanan M.D (Path)
Consultant Pathologist
Reg No : 75347

APPROVED BY

The results pertain to sample tested.

Page 5 of 7

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name : Mr. SATHYANARAYANAN M K
N
PID No. : PRT17587 Register On : 14/11/2022 10:03 AM
SID No. : 79645683 Collection On : 14/11/2022 11:44 AM
Age / Sex : 43 Year(s) / Male Report On : 17/11/2022 4:12 PM
Type : OP Printed On : 19/11/2022 8:45 AM
Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Estimated Average Glucose (Whole Blood)	102.54	mg/dL	
INTERPRETATION: Comments HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glyemic control as compared to blood and urinary glucose determinations. Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values. Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.			
Prostate specific antigen - Total(PSA) (Serum/Manometric method)	0.49	ng/mL	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0

INTERPRETATION:REMARK : PSA alone should not be used as an absolute indicator of malignancy.

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.23	ng/ml	0.7 - 2.04
--	------	-------	------------

INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.


T4 (Tyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	8.18	µg/dl	4.2 - 12.0
--	------	-------	------------

INTERPRETATION:

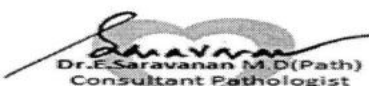
Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.20	µIU/mL	0.35 - 5.50
--	------	--------	-------------


DR GURUPRIYA J
PATHOLOGIST
Reg No : 13-48036

VERIFIED BY


Dr. E. Saravanan M.D (Path)
Consultant Pathologist
Reg No : 73347

APPROVED BY

The results pertain to sample tested.

Page 6 of 7

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name : Mr. SATHYANARAYANAN M K
N
PID No. : PRT17587
SID No. : 79645683
Age / Sex : 43 Year(s) / Male
Type : OP
Ref. Dr : MediWheel

Register On : 14/11/2022 10:03 AM
Collection On : 14/11/2022 11:44 AM
Report On : 17/11/2022 4:12 PM
Printed On : 19/11/2022 8:45 AM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

INTERPRETATION:

Reference range for cord blood - upto 20
1 st trimester: 0.1-2.5
2 nd trimester 0.2-3.0
3 rd trimester : 0.3-3.0
(Indian Thyroid Society Guidelines)


Comment :

- 1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.
- 2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.
- 3.Values&lt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.


Urine Analysis - Routine

COLOUR (Urine)	Pale yellow		Yellow to Amber
APPEARANCE (Urine)	Clear		Clear
Protein (Urine/Protein error of indicator)	Negative		Negative
Glucose (Urine/GOD - POD)	Negative		Negative
Pus Cells (Urine/Automated – Flow cytometry)	Occasional	/hpf	NIL
Epithelial Cells (Urine/Automated – Flow cytometry)	Occasional	/hpf	NIL
RBCs (Urine/Automated – Flow cytometry)	NIL	/hpf	NIL
Casts (Urine/Automated – Flow cytometry)	NIL	/hpf	NIL
Crystals (Urine/Automated – Flow cytometry)	NIL	/hpf	NIL
Others (Urine)	NIL		

INTERPRETATION:Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.


DR GURUPRIYA J
PATHOLOGIST
Reg No : 13-48036

VERIFIED BY


Dr. E Saravanan M.D(Path)
Consultant Pathologist
Reg No : 73347

APPROVED BY

-- End of Report --

The results pertain to sample tested.

Page 7 of 7

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED,#17,RACE VIEW COLONY,2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name	MR.SATHYANARAYANAN M K N	ID	PRT17587
Age & Gender	43Y/MALE	Visit Date	14/11/2022
Ref Doctor	MediWheel		

ULTRASOUND SCAN

WHOLE ABDOMEN

Liver is normal in size (13.8 cm) and shows homogenously increased parenchymal echoes with no focal abnormality.

There is no intra or extra hepatic biliary ductal dilatation. Portal vein and IVC are normal.

Gall bladder is normal sized and shows a polyp of size 2 mm.

No evidence of calculi. Wall thickness is normal.

Pancreas shows a normal configuration and echotexture. Pancreatic duct is normal.

Spleen is mildly enlarged in size (12.5 cm) and uniform echotexture.

Bilateral kidneys are normal in size, shape and position. Cortical echoes are normal bilaterally. There is no calculus or calyceal dilatation.

Right kidney measures 10.8 x 5.7 cm.

Left kidney measures 11.3 x 7.7 cm.

Ureters are not dilated.

No abnormality is seen in the region of the **adrenal glands**.

No para aortic lymphadenopathy is seen.

Urinary bladder is smooth walled and uniformly transonic. No intravesical mass or calculus.

Pre void urinary bladder volume is 280 ml.

Post void residual urine volume is 84 ml (Significant).

Prostate is normal in size, measures 3.7 x 2.7 x 2.7 cm (vol – 14 cc).
Echotexture is homogenous.

Seminal vesicles is normal.



Name	MR.SATHYANARAYANAN M K N	ID	PRT17587
Age & Gender	43Y/MALE	Visit Date	14/11/2022
Ref Doctor	MediWheel		

Iliac fossae are normal.

There is no free or loculated peritoneal fluid.

IMPRESSION:

- **Fatty liver.**
 - **Gall bladder polyp.**
 - **Mild splenomegaly.**
 - **Significant post void residual urine.**
- Needs clinical correlation.*

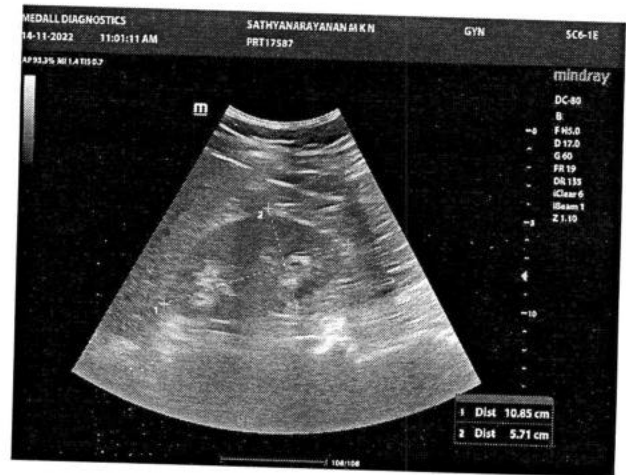
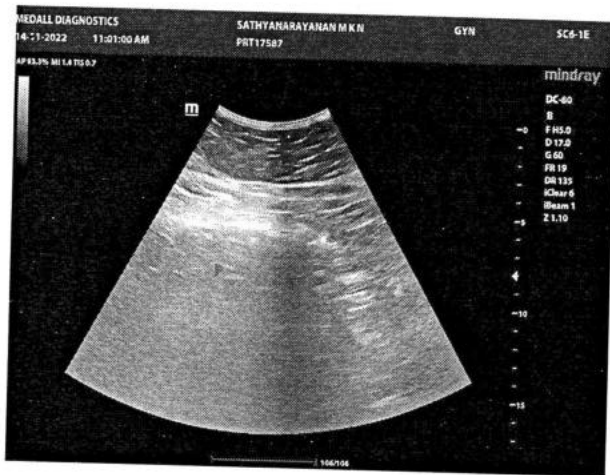


Dr. SUMITHA
SONOLOGIST



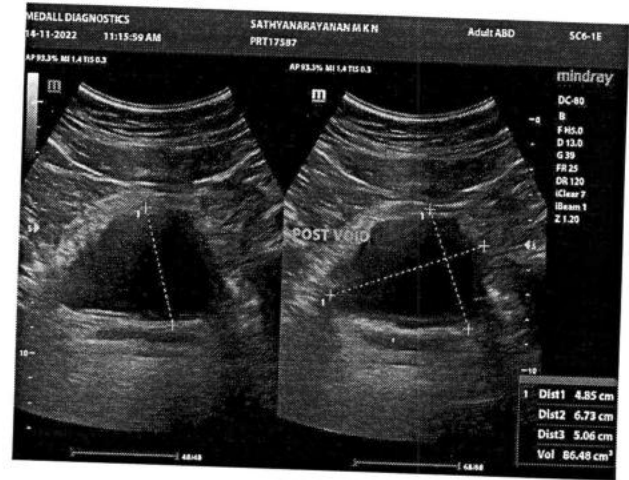
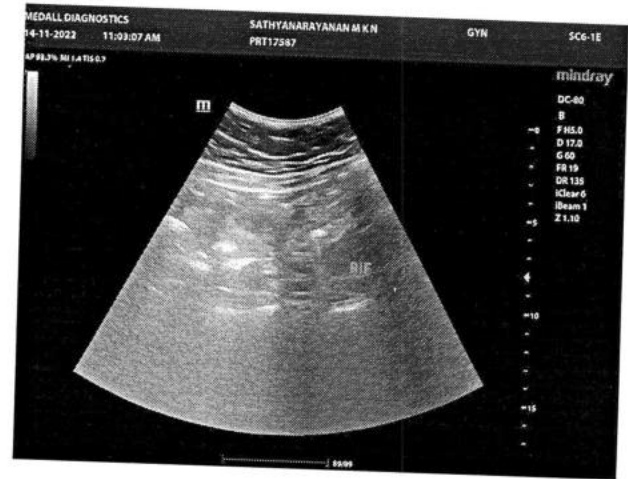
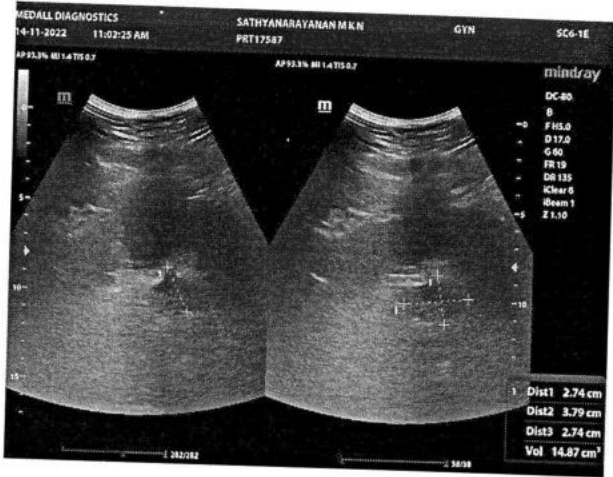
Medall Healthcare Pvt Ltd
 No:191, Poonamalle High Road (Near Taylors Road Signal)

Name	MR.SATHYANARAYANA N M K N	ID	PRT17587
Age & Gender	43Y/MALE	Visit Date	14/11/2022
Ref Doctor	MediWheel		



Medall Healthcare Pvt Ltd
 No:191, Poonamalle High Road (Near Taylors Road Signal)

Name	MR.SATHYANARAYANA N M K N	ID	PRT17587
Age & Gender	43Y/MALE	Visit Date	14/11/2022
Ref Doctor	MediWheel		



Name	SATHYANARAYANAN M K N	ID	PRT17587
Age & Gender	43Y/M	Visit Date	Nov 14 2022 1:43PM
Ref Doctor	MediWheel		

X-RAY CHEST (PA VIEW)

The cardio thoracic ratio is normal.

The heart size and configuration are within normal limits.

The aortic arch is normal.

The lung fields show normal broncho-vascular markings.

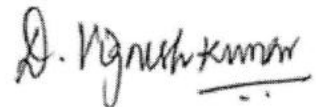
Both the pulmonary hila are normal in size.

The costophrenic and cardiophrenic recesses and the domes of diaphragm are normal.

The bones and soft tissues of the chest wall show no abnormality.

IMPRESSION :

- **No significant abnormality detected.**



Dr. D. Vignesh Kumar MBBS, DNB(RD)
Consultant Radiologist



Name	MR.SATHYANARAYANAN M K N	ID	PRT17587
Age & Gender	43Y/MALE	Visit Date	14/11/2022
Ref Doctor	MediWheel		

DEPARTMENT OF CARDIOLOGY

TRANSTHORACIC RESTING ECHO CARDIOGRAPHY REPORT

**ECHO INDICATION: Assessment
M MODE & 2-D PARAMETERS:**

ACOUSTIC WINDOW : GOOD

LV STUDY

IVS(d)	cm	0.7
IVS(s)	cm	1.3
LPW(d)	cm	0.7
LPW(s)	cm	1.1
LVID(d)	cm	3.8
LVID(s)	cm	2.6
EDV ml		56
ESV ml		17
SV ml		38
EF %		68
FS %		31

DOPPLER PARAMETERS

Parameters	Patient Value
LA cm	2.8
AO cm	3.8

Valves	Velocity max(m/sec mm/Hg)
AV	0.6 / 2
PV	0.8 / 3
MV (E)	0.7
(A)	0.5
TV	1.1 / 5

FINDINGS:

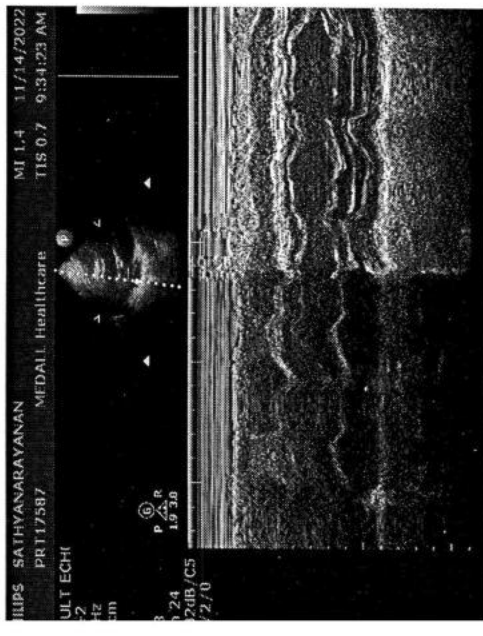
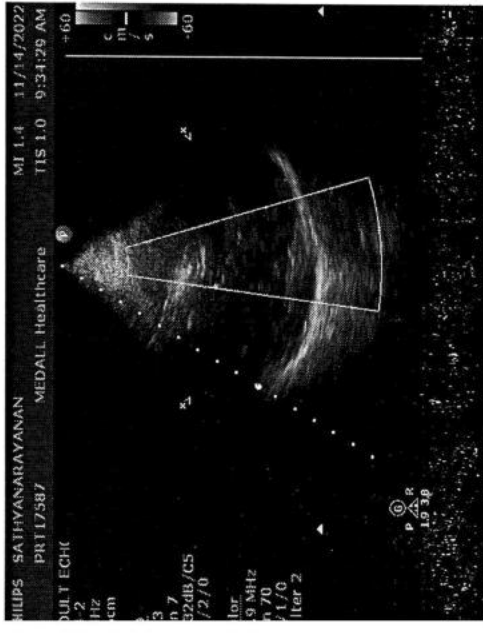
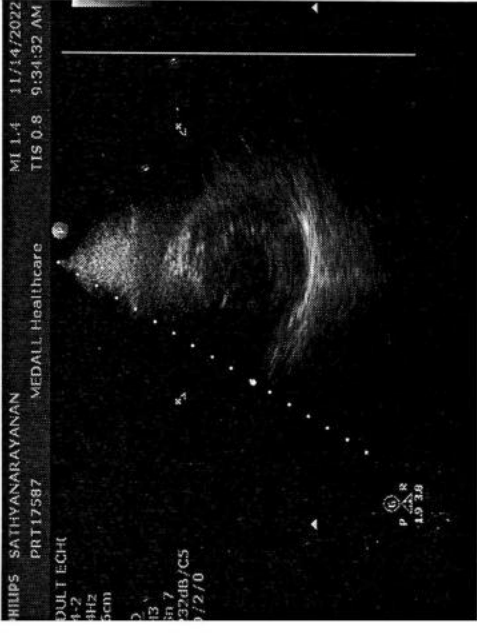
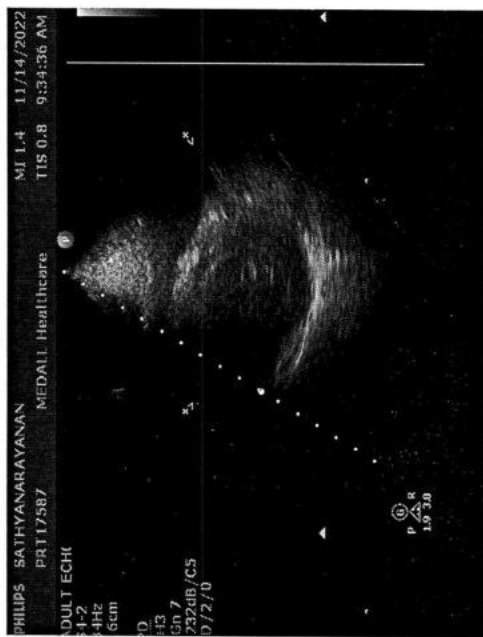
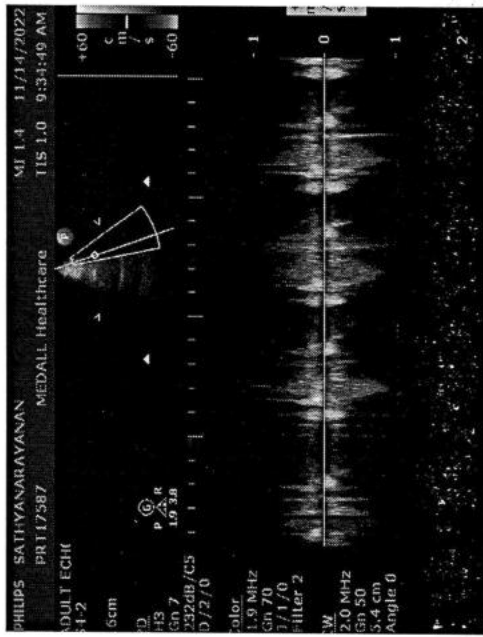
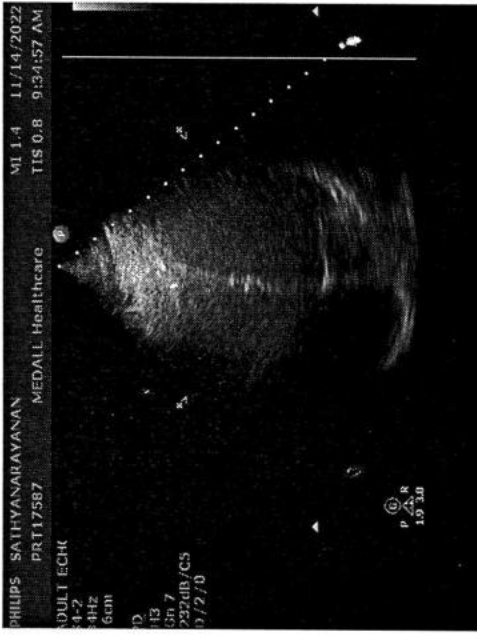
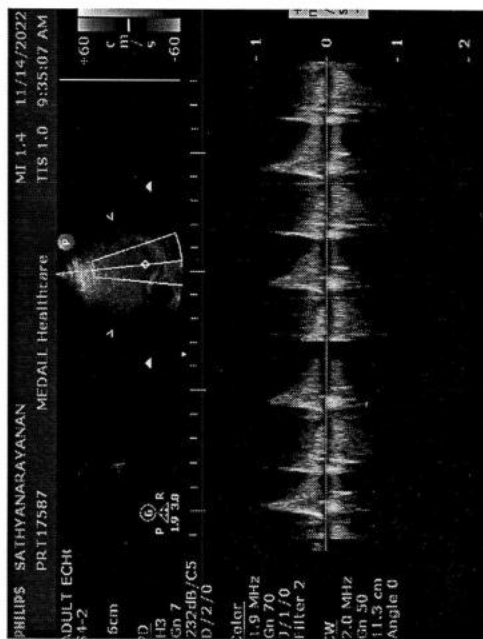
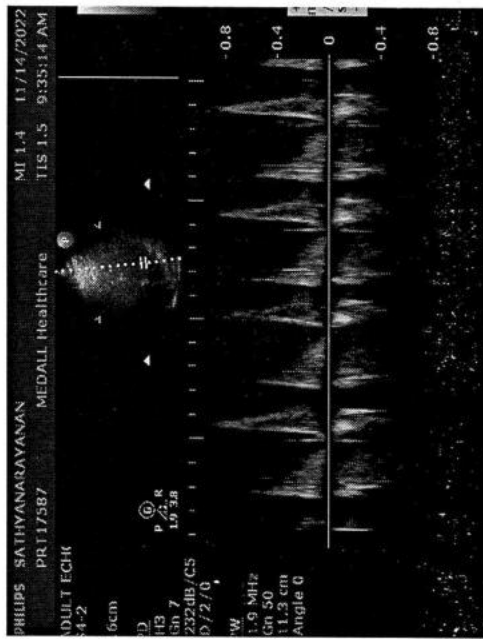
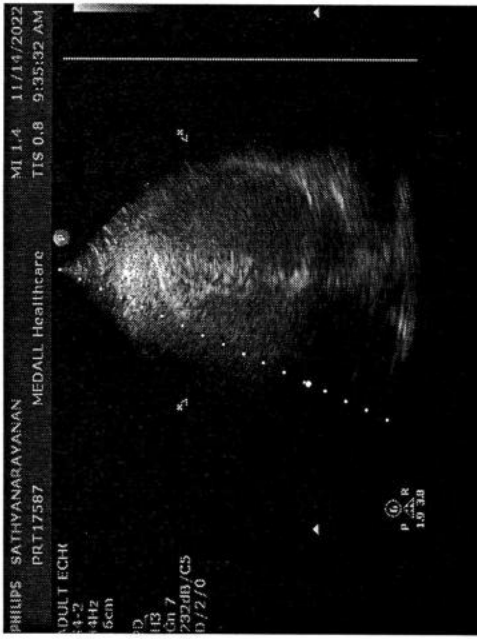
- ❖ Normal left ventricle systolic function (LVEF 68 %).
- ❖ No regional wall motion abnormality.
- ❖ Normal chambers dimension.
- ❖ Trivial mitral regurgitation.
- ❖ No pulmonary hypertension.
- ❖ Normal right ventricle systolic function.
- ❖ Normal pericardium / Intact septae.
- ❖ No clot/aneurysm.

IMPRESSION:

- ▶ **NORMAL LV SYSTOLIC FUNCTION.**
- ▶ **NO REGIONAL WALL MOTION ABNORMALITY.**
- ▶ **TRIVIAL MR.**
- ▶ **NO PHT.**

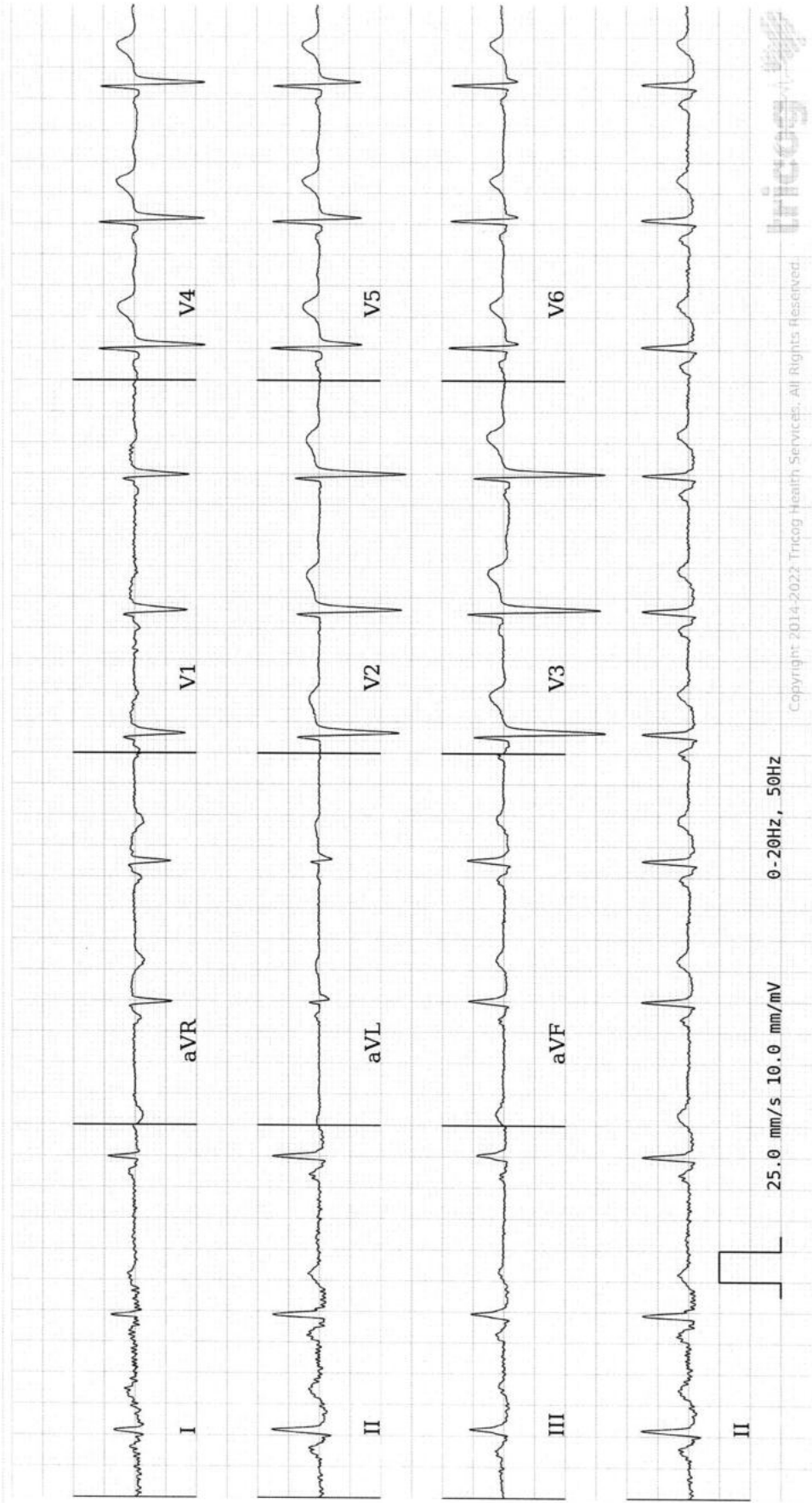
Viji

**P. VIJAYA LAKSHMI
ECHO TECHNICIAN**



Age / Gender: 43/Male
Patient ID: Prt17587
Patient Name: Sathanarayanan

Date and Time: 14th Nov 22 10:33 AM



Copyright 2014-2022 Tricog Health Services. All Rights Reserved.

AR: 70.0bpm VR: 69.0bpm QRSD: 94.0ms QT: 380.0ms QTc: 408.0ms PRI: 144.0ms P-R-T: 57.0° 64.0° 45.0°

ECG Within Normal Limits: Sinus Rhythm, Normal Axis, with Sinus Arrhythmia. Please correlate clinically.

REPORTED BY



Dr. Ponnambalam

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.