



Name : MR. VENKATA SRINIVASA RAO
Age /Sex : 57 Y / M
Ref. By : BANK OF BARODA (MW)

Reg. No : 023-372
Registration Date : 08-05-2022
Alt ID : 62108

MEDICAL CHECK UP FORM

Physical Examination :

Height (Cms): 179 Weight (KG) 84
Body Mass Index (BMI): 26
Pulse Rate: 88 /Min Regular / Abnormal
B P : 136/90mmHg
Skin : Normal
Nails : NAD
Oral Hygenic : Healthy

Personal History

Smoking : Yes / No ✓
Alcoholism : Yes / No ✓
Diabetes : Yes / No ✓
Hypertension : Yes / No ✓
Allergy : Yes / No ✓
Accidents if any No
Surgeries if any No

Complaints if any : Constipation.
Family History : Diabetic An of Father

Systemic Examination - Abnormality - If Yes Please explain)

* CVS - Yes / No ✓
* CNS - Yes / No ✓
* GI Tract - Yes / No ✓
* Abdomen - Yes / No ✓
Respiratory Tract - Yes / No ✓

E N T EXAMINATION

Normal

Investigations : (N = Normal; R - See Report)

Lipid profile - R

Any abnormality

Non.

Diagnosis (if any) Healthy.
o Constipation issues.

Recommendations / Impression :

Healthy and fit.

PHYSICIAN SIGNATURE & STAMP

Dr. SHRAVANTHI
M.B.B.S.
Reg. No: 84996



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OPHTHALMIC EXAMINATION

VISUAL ACUITY

	RIGHT EYE	LEFT EYE
Distant Vision		
Without glasses	Normal 6/6	Normal 6/6
With Glasses		
Near Vision		
Without Glasses	Normal N/6	Normal N/6
With Glasses		

- Anterior Segment
- Posterior Segment
- Adnexal
- SLE
- External Exam
- Refraction
- Color Vision

Normal
Normal

Opinion/ Advice:

	Right EYE			Left EYE		
	SPH	CYL	AXIS	SPH	CYL	AXIS
Distant Vision	↖	↖	↖	↖	↖	↖
Near Vision	↖	↖	↖	↖	↖	↖

COLOUR PRECEPTION EXAMINATION : Ishara 32 Plates Pseudo iso-Chromatic Plates test

Type	No of Plates	No of errors	Results *
Ishara Color Vision Type	6	—	NS

**Interpretation : NS : Normal: R : Partial Color Blind: PCB: Totally Color Blind;
PCB-R : Remarks if any**

[Signature]
Optthalmologist/Optician
ADITYA DIAGNOSTICS & RESEARCH LABORATORIES
MIG-256-258, S.R. Towers,
Road No: 4, K.P.H.B. Colony,
Hyderabad-500 072



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Ultrasound Scan Abdomen

Liver Size (149 mm), Shape, contour normal with increased echotexture. No localized or diffused mass lesions are seen. Intrahepatic vascular system. Portal vein, C.B.D. and biliary radicals are normal.

Gall Bladder Contracted.

Spleen Size : 90mm, Shape and echotexture normal, No abnormal calcifications seen.

Pancreas Head, body and tail echotexture are normal. Pancreatic duct normal. No mass or cystic lesions seen. No calcifications are seen.


Kidneys Right kidney Measures : 96 X 47 mm
Left kidney Measures : 111 X 55 mm
Peri renal areas normal, Renal capsule normal, Cortical thickness, Cortical echopattern and corticomedullary differentiation are normal. Pelvicalyceal system normal. No calculus or mass lesions are seen.

Urinary Bladder Well distended, Normal wall thickness. No evidence of calculi. No focal lesions.

Prostate Echotexture normal. No calcification seen.
Volume - 25 cc.

Others Aorta and IVC are normal. No lymphadenopathy. No ascitis.

Impression *GRADE 1 FATTY LIVER.*


DR. AZAM.
Consultant Radiologist



ADITYA
DIAGNOSTICS
Research Laboratories
Results You Trust



K.P.H.B. COLONY : MIG 256-258, S.R. Towers, Road No. 4,
Hyderabad - 500072. Tel : +91-40-4350 0918
ERRAGADDA : Deccan Chambers, Above Punjab National Bank,
Hyderabad - 500018. Tel: +91-40-2381 7362
e-mail: customerservice@adityalabs.com | website: www.adityalabs.com

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X-RAY CHEST PA VIEW

- Hilar regions are normal.
- Both C P angles are free.
- Domes of diaphragms are normal.
- Bony cage is normal
- Cardio thoracic ratio is normal.
- Lung - clear. No Evidence of any Signs of active Tuberculosis

IMPRESSION :

**** NORMAL STUDY**

Consultant Radiologist



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Investigation

Result

Normal Ranges

HAEMOGRAM

Investigation

Result

Normal Range

Haemoglobin

14.0 gm%

Male : 14.0 - 18.0 gm %

Female : 11.5 - 16.0 gm %

Children : 12 - 14 gm%

R B C mil/cmm

4.9 mil/cmm

Male : 4.5 - 6.5 mil/cmm

Female : 4.0 - 5.5 mil/cmm

Packed Cell volume (PCV)

40 %

Male : 40 - 54 %

Female : 36 - 49 %

MCV

81 Cubic microns

76 - 96 Cubic microns

MCH

28 Picograms

27- 32 Picograms

MCHC

35 gm%

30 - 36 gm%

WBC (Total)

9,400 cells/cmm

4,000 - 11,000 cells/cmm

DIFFERENTIAL COUNT

Neutrophils (Polymorphs)

75 %

Adults : 40 - 75 %

Children : 36- 50 %

Lymphocytes

19 %

Adults : 20 - 40 %

Children : 36- 50 %

Eosinophils

04 %

1 - 6 %

Monocytes

02 %

2 - 10 %

Basophils

00 %

00 - 01 %

Platelet count

2,46,000 cells/cmm

1,50,000 - 4,00,000 cells/cmm

ESR 1st Hour

05 mm/hour

Male : 0 - 10 mm / hour

Female : 0 - 14 mm / hour

Reticulocyte count

0.8 %

0.5 - 1.0 %

PERIPHERAL SMEAR EXAMINATION

RBC's Morphology

Normocytic / Normochromic

WBC

With in normal limits

Plateletes

Adequate

Abnormal Cells

Nil

Method : Automated Cellcounter&Microscopy

Dr Rajani Gutha, PhD
Chief Biochemist

Verified By

Dr K Mahesh Kumar MD
Consultant Pathologist



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Department of Biochemistry

Investigation

Result

Reference Range

Fasting Plasma Glucose *
Blood Sugar
Method GOD-POD

101 mg/dl

70 - 110 mg/dl

Post Prandial Glucose *
(Blood Sugar)
Method GOD-POD

124 mg/dl

70 - 160 mg/dl

*End of Report *

Dr Rajini G, PhD
Chief Biochemist

Dr K Mahesh Kumar, MD
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Department of Biochemistry

Investigation	Result	Reference Range
Blood Urea * Method GLDH	28 mg/dl	10 - 50 mg/dl
Blood Urea Nitrogen * Calculated	13.0 mg/dl	6 - 25.5 mg/dl
Serum Creatinine * Method Enzymatic	1.0 mg/dl	Male : 0.7 - 1.3 Female : 0.6 - 1.1 New Born 1 - 4 days : 0.3 - 1.0 Infant (upto 1year) : 0.2 - 0.4 Children : 0.3 - 0.7
Serum Uric Acid * Method:Uricase POD	6.5 mg/dl	Male : 3.5 - 7.2 mg/dl Female : 2.6 - 6.0 mg/dl

*End of Report *

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Chief Biochemist

Dr K. Mahesh Kumar, MD
Consultant Pathologist



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Department of Biochemistry

Investigation	Result	Reference Range
Lipid Profile		
Total Cholesterol * Method CHOD-POD	254 mg/dL	Normal : < 200 mg/dL Borderline High : 200 - 239 mg/dL High : > 240 mg/dL
Serum Triglycerides * Method GPO - POD	175 mg/dL	Normal : < 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL Very High : => 500 mg/dL
H D L Cholesterol * Method Direct CHOD-PAD	40 mg/dL	Low : < 40 High : > 60
L D L Cholesterol * Method Calculated	179 mg/dL	Optimal : < 100 Near Optimal : 100 - 129 Borderline High : 130 - 159 High : 160 - 189 Very High : => 190
V L D L Cholesterol * Method Calculated	35 mg/dL	10 - 30 mg/dL
TC / HDL Cholesterol Ratio * Method Calculated	6.3 Ratio	3.0 - 5.0 Ratio
LDL / HDL Ratio * Method Calculated	4.4 Ratio	1.5 - 3.5 Ratio

*End of Report *

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Department of Biochemistry

Investigation

Result

Reference Range

Liver Function Tests

Total Bilirubin (Method: Walter &Gerarde)	0.53 mg/dl	0.3 - 1.2 mg/dl
Direct Bilirubin (Conjugated) (Method: Walter &Gerarde)	0.11 mg/dl	0.0 - 0.2 mg/dl
Indirect Bilirubin (Unconjugated)	0.42 mg/dl	
Alkaline Phosphatase (Method: GSCC)	54 U/L	Male : 53 - 128 U/L Female : 42 - 98 U/L Children : 54 - 369 U/L
S G P T (Method: IFCC)	28 IU/L	UP TO 55 IU/L
S G O T (Method: IFCC)	30 IU/L	UP TO 55 IU/L
Total Proteins (Method: Biuret)	7.2 gm/dl	6.0 - 8.3 gm/dl
Albumin (Method: BCG)	4.3 gm/dl	3.5 - 5.2 gm/dl
Globulin (Method: Calculated)	2.9 gm/dl	
A/G Ratio	1.48	
Gamma GT IFCC Method	29 U/L	Male : 10 - 50 U/L Female : 7 - 35 U/L
Lab Incharge		

*End of Report *

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Department of Biochemistry

Investigation	Result	Reference Range
% HbA1c (Glycosylated Haemoglobin) (Method: HPLC-NGSP Certified)	5.6 %	< 6.0 : Pre Diabetic 6-7 : Good Control 7-8 : Weak Control > 8.0 : Poor Control

Intrepretation :

HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but within this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.

Mean Plasma Glucose mg/dl = (HbA1c x 35.6) - 77.3)

Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only .81 (1.0 would be a straight line, which has "perfect" correlation...) This means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control.

*End of Report *

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<u>Investigation</u>	<u>Result</u>	<u>Normal Ranges</u>
Trilodothyronine Total (TT3)	0.92 ng/mL	0.60 - 1.81 ng/mL
Thyroxine - Total (TT4)	6.28 mg/dL	3.5 - 12.6 mg/dL
Thyroid Stimulating Hormone(TSH) Method: C.L.I.A	3.24 μ IU/ml	0.35 - 5.50 μ IU/ml

Interpretation

Primary malfunction of the thyroid gland may result in excessive (hyper) or below normal (hypo) release of T3 or T4. In addition, as thyroid function is directly affected by TSH. Diagnostically, T3 concentration is more sensitive to certain thyroid conditions than T4. While T4 levels are a sensitive (and superior) indicator of hypothyroidism, T3 blood levels better define hyperthyroidism. Because T3 concentration in serum changes faster and more markedly than T4, the T3 level is also an excellent indicator of the ability of the thyroid to respond to both stimulatory and suppressive tests. Under conditions of strong thyroid stimulation, the T3 level offers a good.

It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.


Dr Rajani Gutha, PhD
Chief Biochemist


Verified By


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Investigation

Result

Complete Urine Examination

Investigation

Result

PHYSICAL EXAMINATION

Colour : Pale Yellow
Appearance : Clear
Reaction : Acidic
Specific Gravity : 1.030

CHEMICAL EXAMINATION

Albumin : Nil
Glucose : Nil

MICROSCOPIC EXAMINATION

Pus Cells : 1 - 2 /HPF
Epithelial Cells : 1 - 2 /HPF
RBC : Nil /HPF
Crystals : Nil
Casts : Nil
Bacteria : Nil
Others : Nil

End of report

Dr K Mahesh Kumar, MD
Consultant Pathologist

Verified by

Dr Rajani Gutha
Chief Biochemist

Protocol : BRUCE
 History :

Medication :-
 Objective :

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	103	120/80	123	-	
Standing					1.0	103	120/80	123	-	
HV					1.0	102	120/80	122	-	
EXStart					1.0	108	120/80	129	-	
Stage-1	3:01	3:02	1.7	10.0	4.7	129	130/90	167	-	
PeakEX	3:00	5:59	2.5	12.0	7.1	155	130/90	201	-	
Recovery	1:00		0.0	0.0	1.0	125	130/90	162	-	
Recovery	2:00		0.0	0.0	1.0	115	120/80	138	-	
Recovery	3:00		0.0	0.0	1.0	112	120/80	134	-	

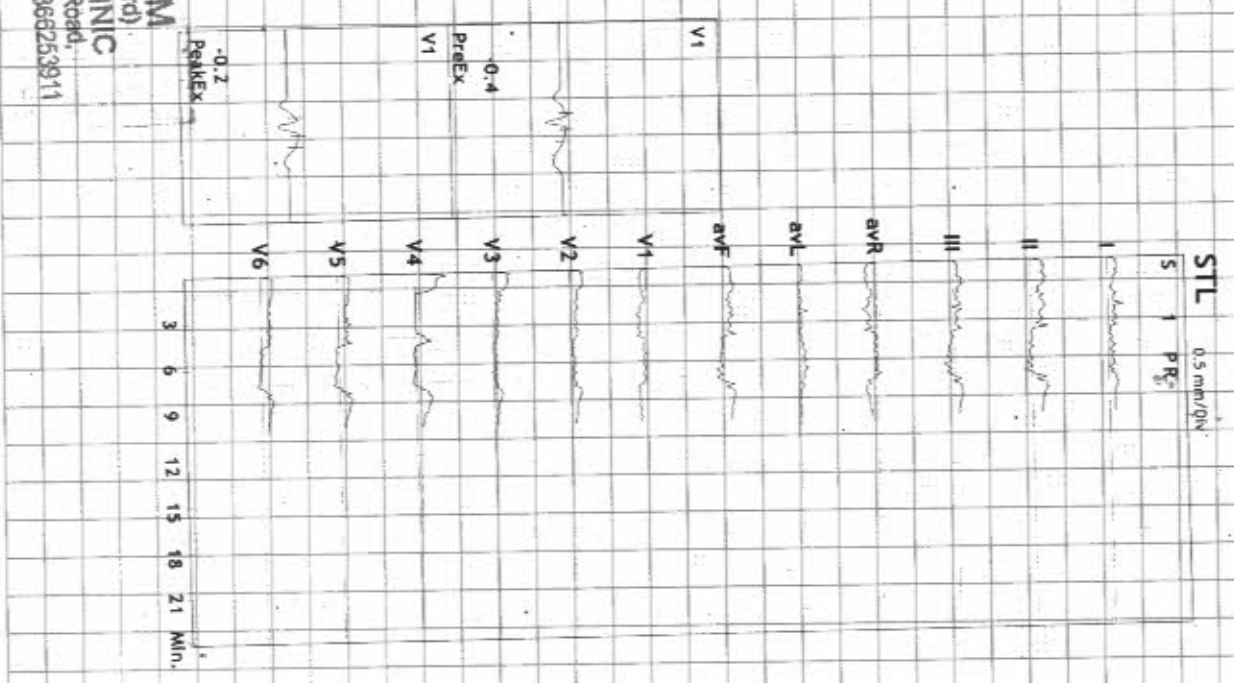
Findings :

Exercise Time : 5:58 minutes
 Max HR attained : 155 bpm 95% of Max Predictable HR 163
 Max BP : 130/90(mmHg)
 Workload attained : 7.1 (Fair Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression :
 Maximum Depression: 5:58

Tmt is Negative for inducible ischemia

Advice/Comments:

D.V. HARIRAM
 MD/DM(Card)
HARI'S HEART CLINIC
 1st Floor, M/G-321, 4th Road,
 KPHB, Hyderabad-72. Ph.: 9868253911



23257/MR VENKATA SRINIVASA RAO
57 Yrs/Male
84 Kg/180 Cms
Date: 08-May-2022 11:16:43 AM

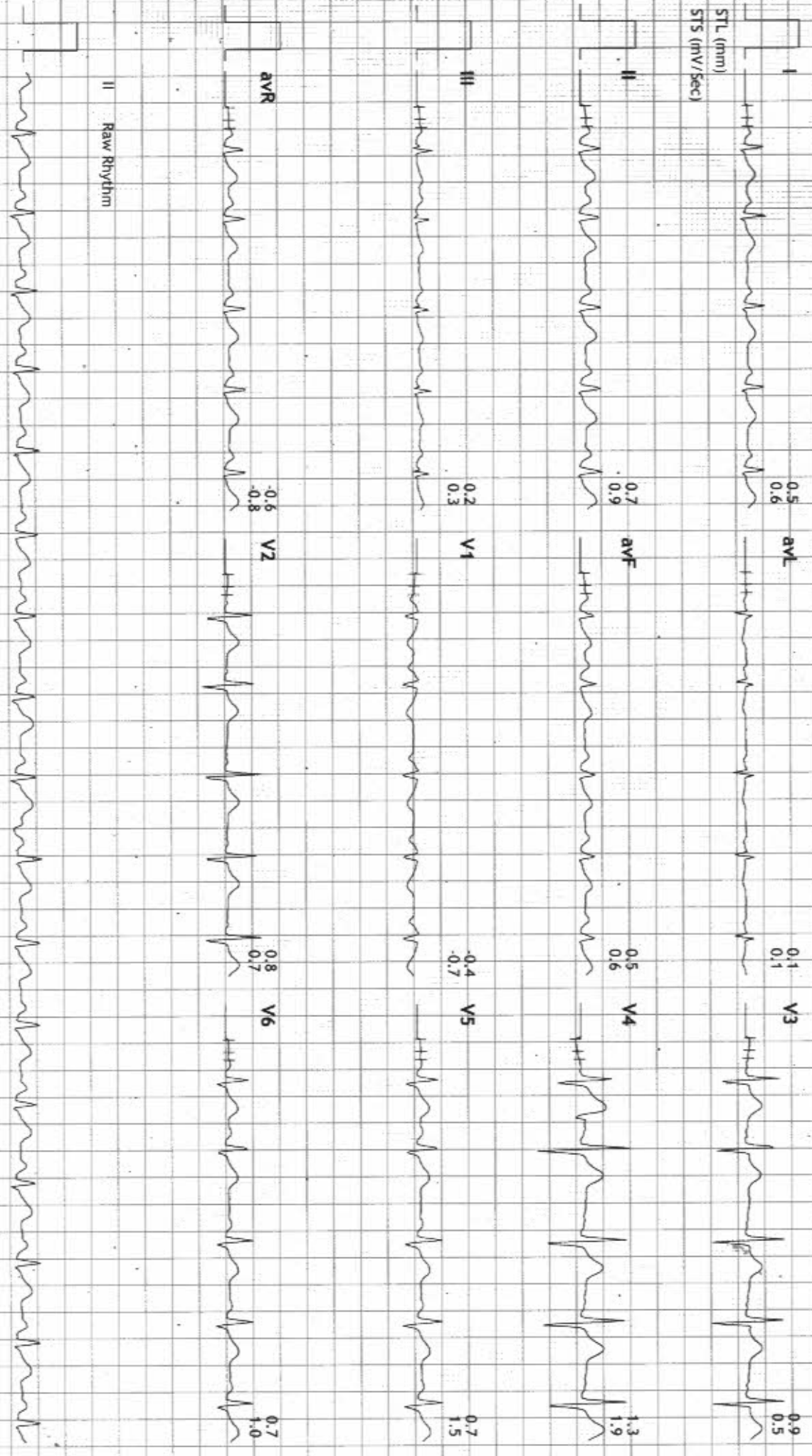
HR: 103 bpm
METS: 1.0
BP: 120/80

MPHR: 63% of 163
Speed: 1.1 mph
Grade: 0.0%

BRUCE
(1.0-100)Hz

Ex Time 00:54
BLC : On
Notch : On

SUPINE
10.0 mm/mv
25 mm/Sec.



www.micromed.com

Print Date: 08 May 2022

MICRO MED CHARTS

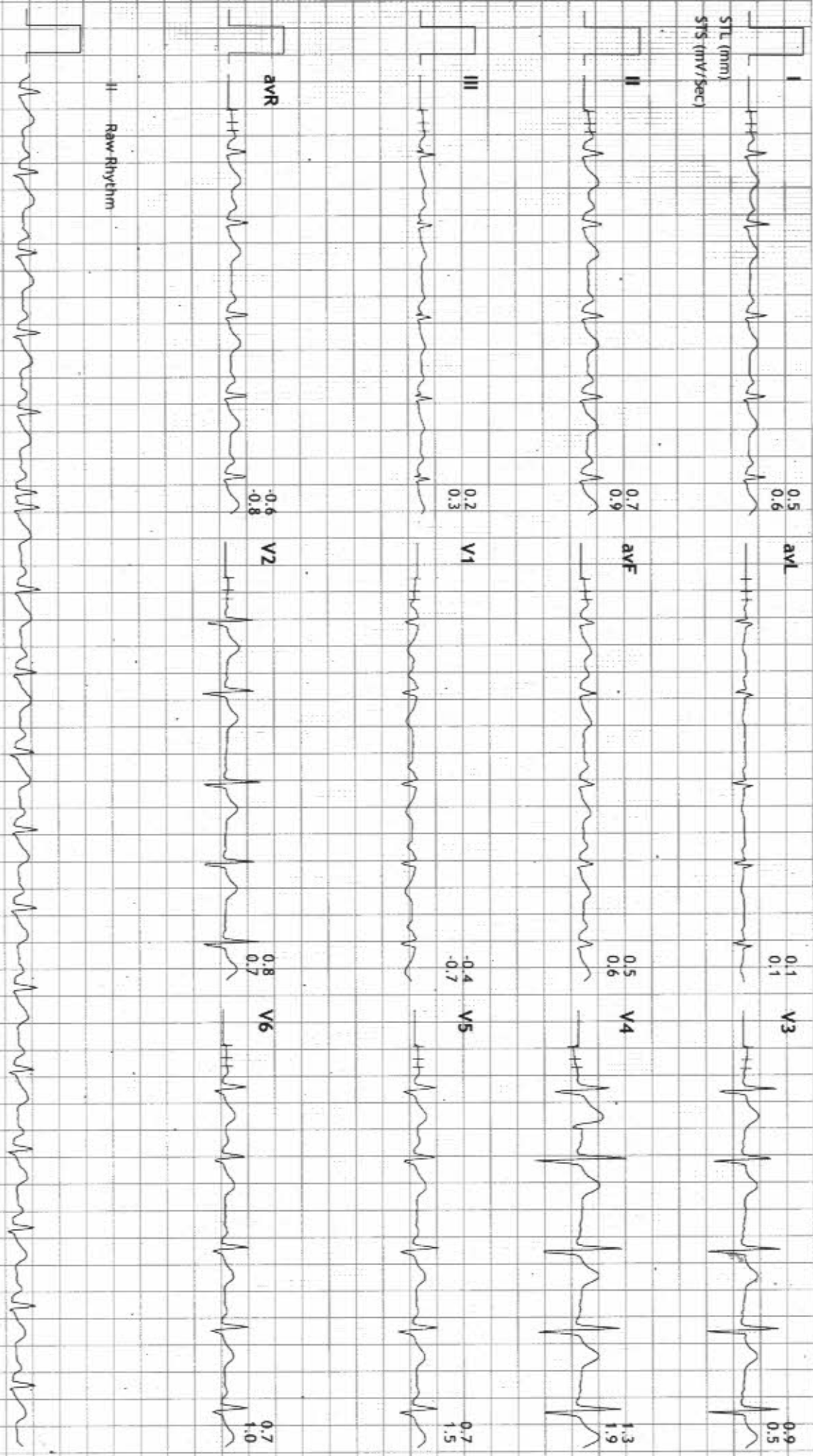
2323777000 VETINOMIA SINIVASA MAU
 57 Yrs/Male
 84 Kg/180 Cms
 Date: 08-May-2022 11:16:43 AM

HR: 103 bpm
 METS: 1.0
 BP: 120/80

MPHR: 63% of 163
 Speed: 1.1 mph
 Grade: 0.0%

BRUCE
 (1.0-100)Hz
 Ex Time 00:57
 BLC: On
 Notch: On

STANDING
 10.0 mm/mv
 25 mm/Sec.



PDF GENERATED BY THE SYSTEM

Print Date: 08-May-2022

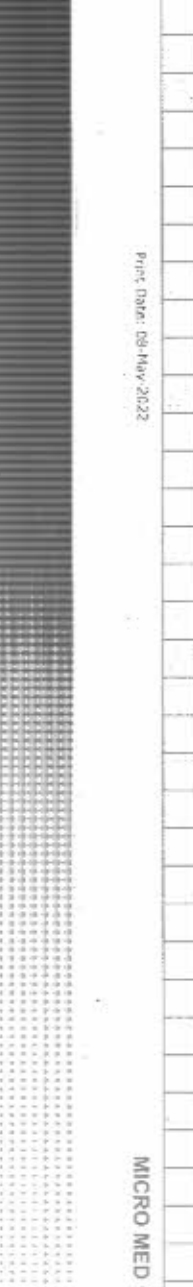
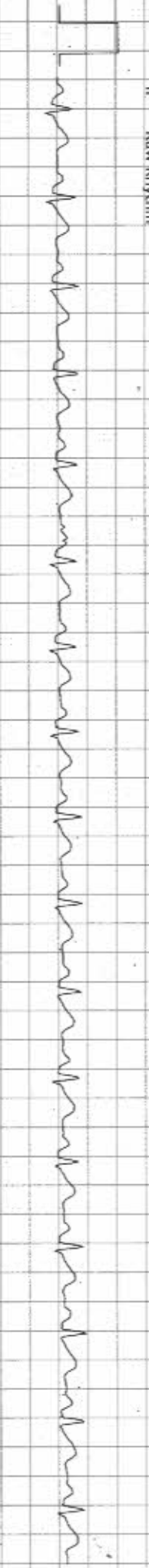
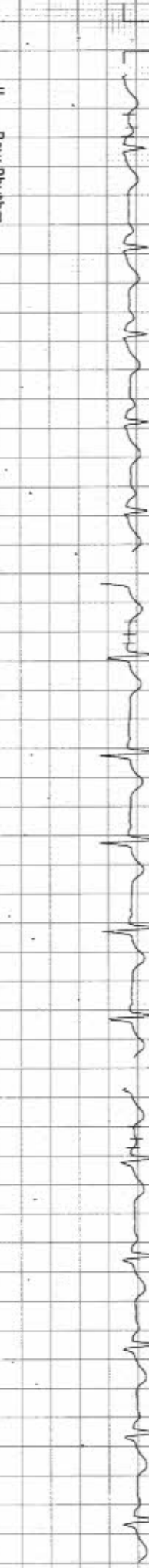
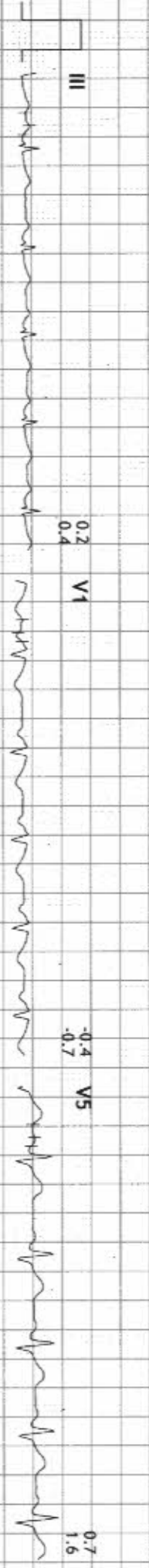
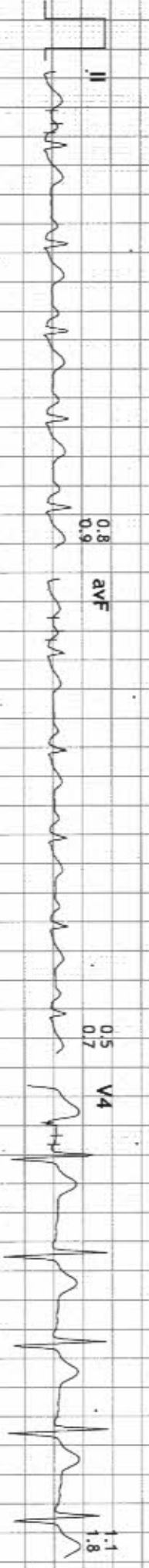
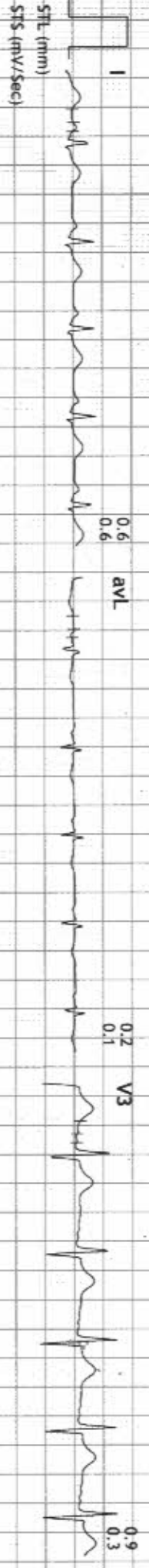
MICRO MED CHARTS

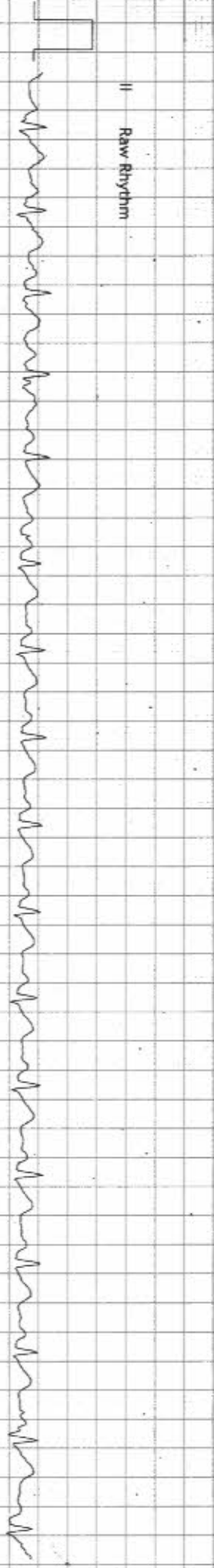
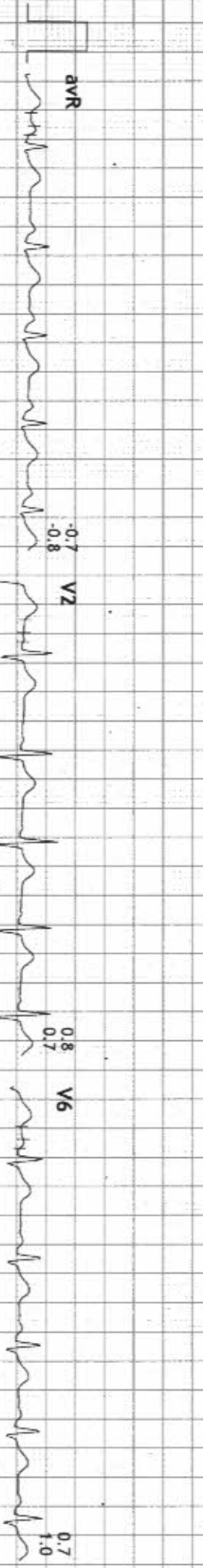
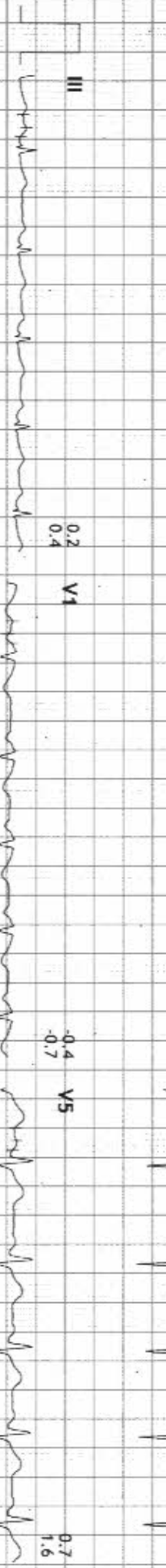
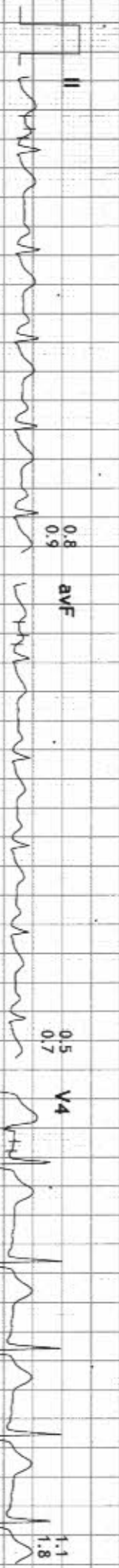
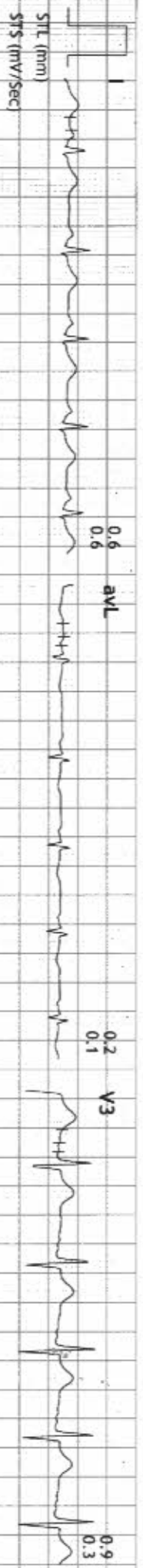
23257/MR VENKATA SRINIVASA RAO
57 Yrs/Male
84 Kg/180 Cms
Date: 08-May-2022 11:16:43 AM

HR: 102 bpm
METS: 1.0
BP: 120/80
MPHR: 62% of 163
Speed: 1.1 mph
Grade: 0.0%

BRUCE
(1.0-100)Hz
Ex Time 01:01
BLC :On
Notch :On

HV
10.0 mm/mv
25 mm/Sec.





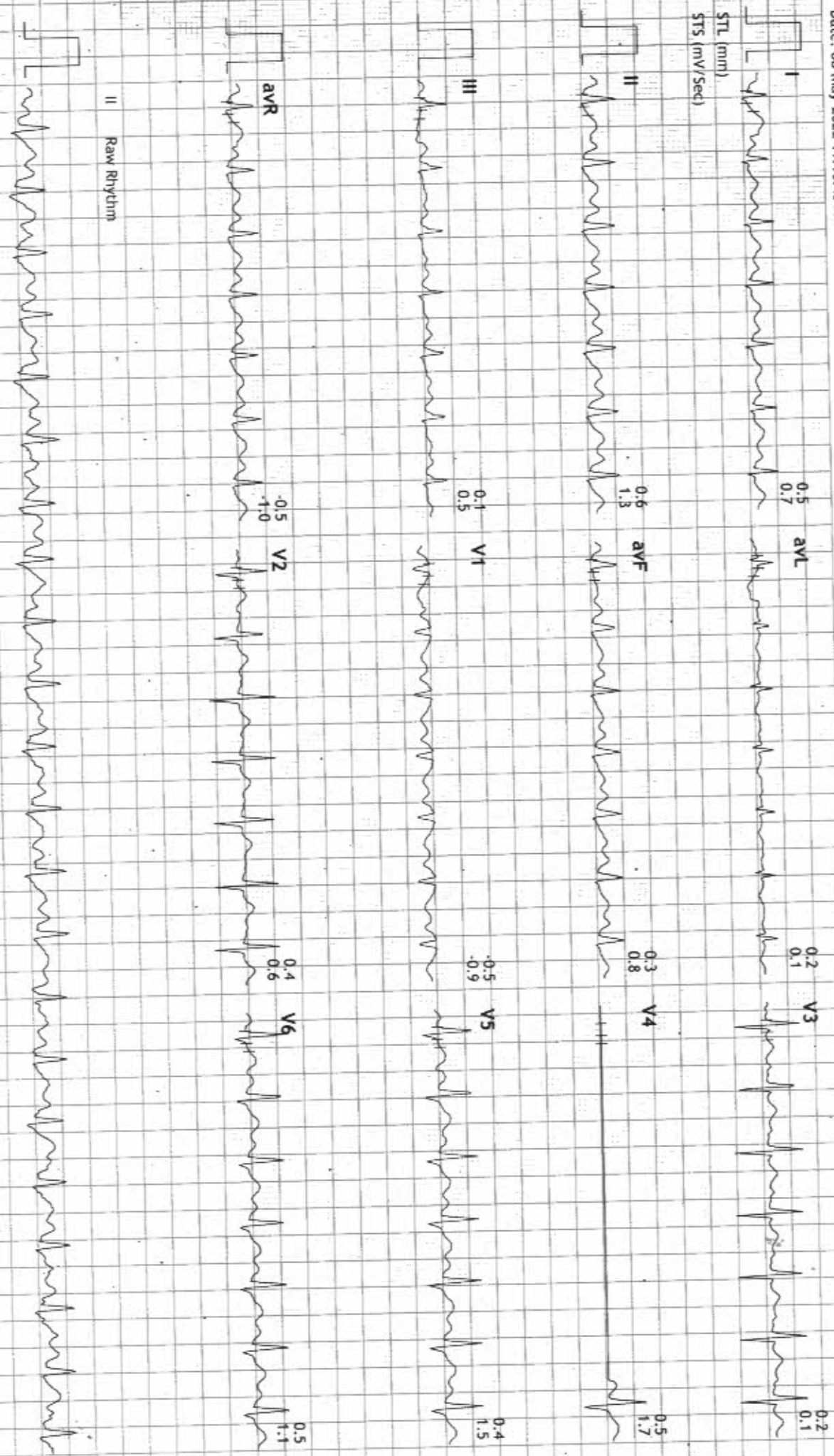
MIG 256-258 SR TOWERS, ROAD NO4, KPHB COLONY, HYD, JELANGANA
 23257/MR VENKATA SRINIVASA RAO
 57 Yrs/Male
 84 Kg/180 Cms
 Date: 08-May-2022 11:16:43 AM

HR: 129 bpm
 METS: 4.7
 BP: 130/90

MPHR: 79% of 163
 Speed: 1.7 mph
 Grade: 10.0%

BRUCE
 (1.0-100)HZ
 Ex Time 03:00
 BLC : On
 Notch : On

Stage 1 (03:00)
 10.0 mm/mV
 25 mm/Sec.



84 Kg / 180 Cms
Date: 08-May-2022 11:16:43 AM

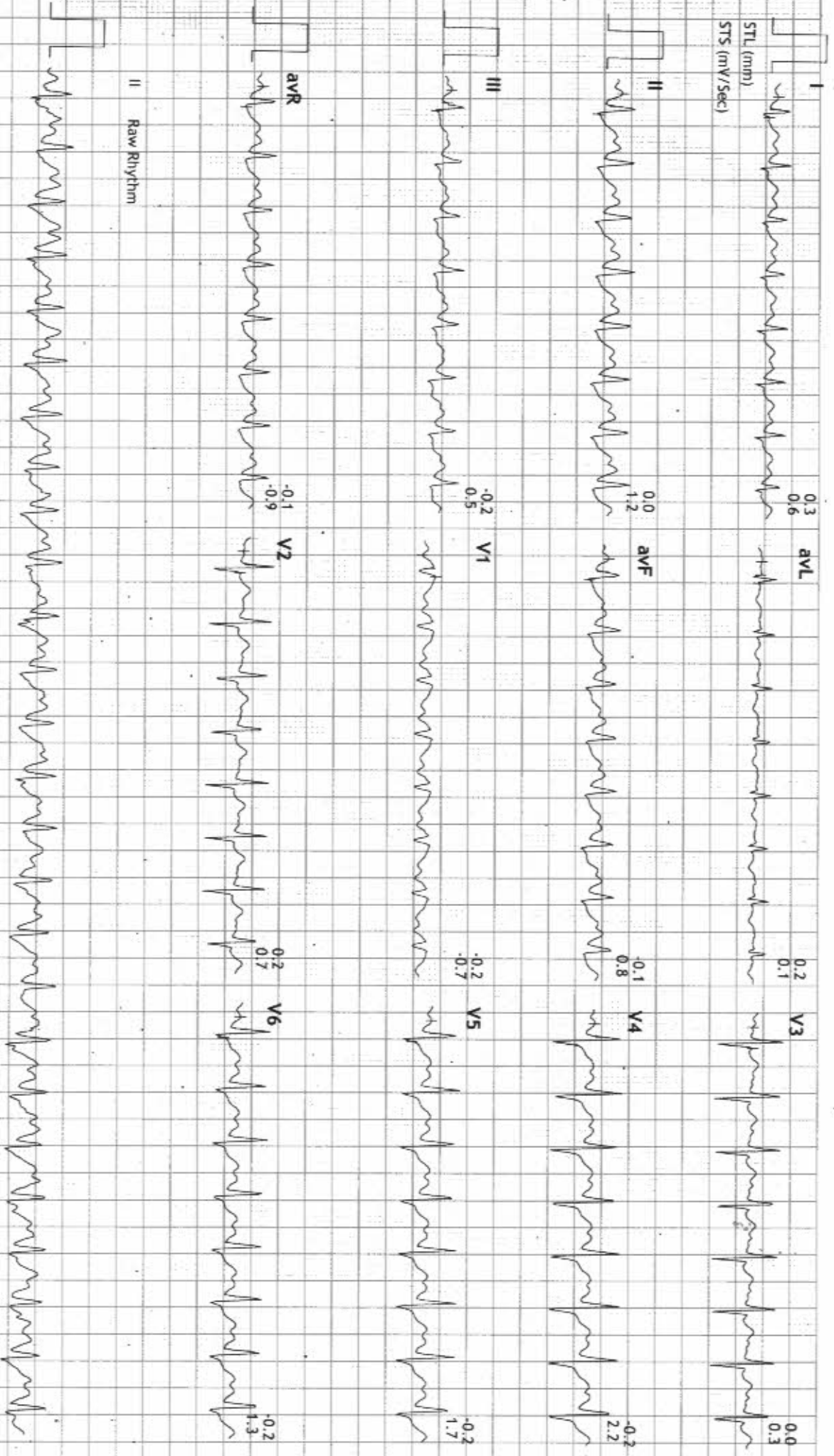
METS: 7.1
BP: 130/90

Speed: 2.5 mph
Grade: 12.0%

(1.0-100)Hz

EX Time 05:57
BLC: On
Notch: On

PeakEx
10.0 mm/mv
25 mm/Sec.



HighSpeed, DataLab.com © RMS Sheep Skin OVERSAMPLING V6.015

Print Date: 08-May-2022

MICRO MED CHARTS

MIG 256-258 SR TOWERS, ROAD NO4, KPHB COLONY, HYD, TELANGANA
 23257/MR VENKATA SRINIVASA RAO
 57 Yrs/Male
 84 Kg/180 Cms
 Date: 08-May-2022 11:16:43 AM

HR: 125 bpm
 METS: 1.0
 BP: 130/90

MPH: 76% of 163
 Speed: 0.0 mph
 Grade: 0.0%

BRUCE
 (1.0-100)Hz
 Ex Time 05:57
 BLC: On
 Notch: On

Recovery : (00:59)
 10.0 mm/mV
 25 mm/Sec.



MIG 256-258 SR TOWERS, ROAD NO4, KPHB COLONY, HYD, TELANGANA

23257/MR VENKATA SRINIVASA RAO
57 Yrs/Male
84 Kg/180 Cms

HR: 115 bpm
METs: 1.0
BP: 120/80

MPHR: 70% of 163
Speed: 0.0 mph
Grade: 0.0%

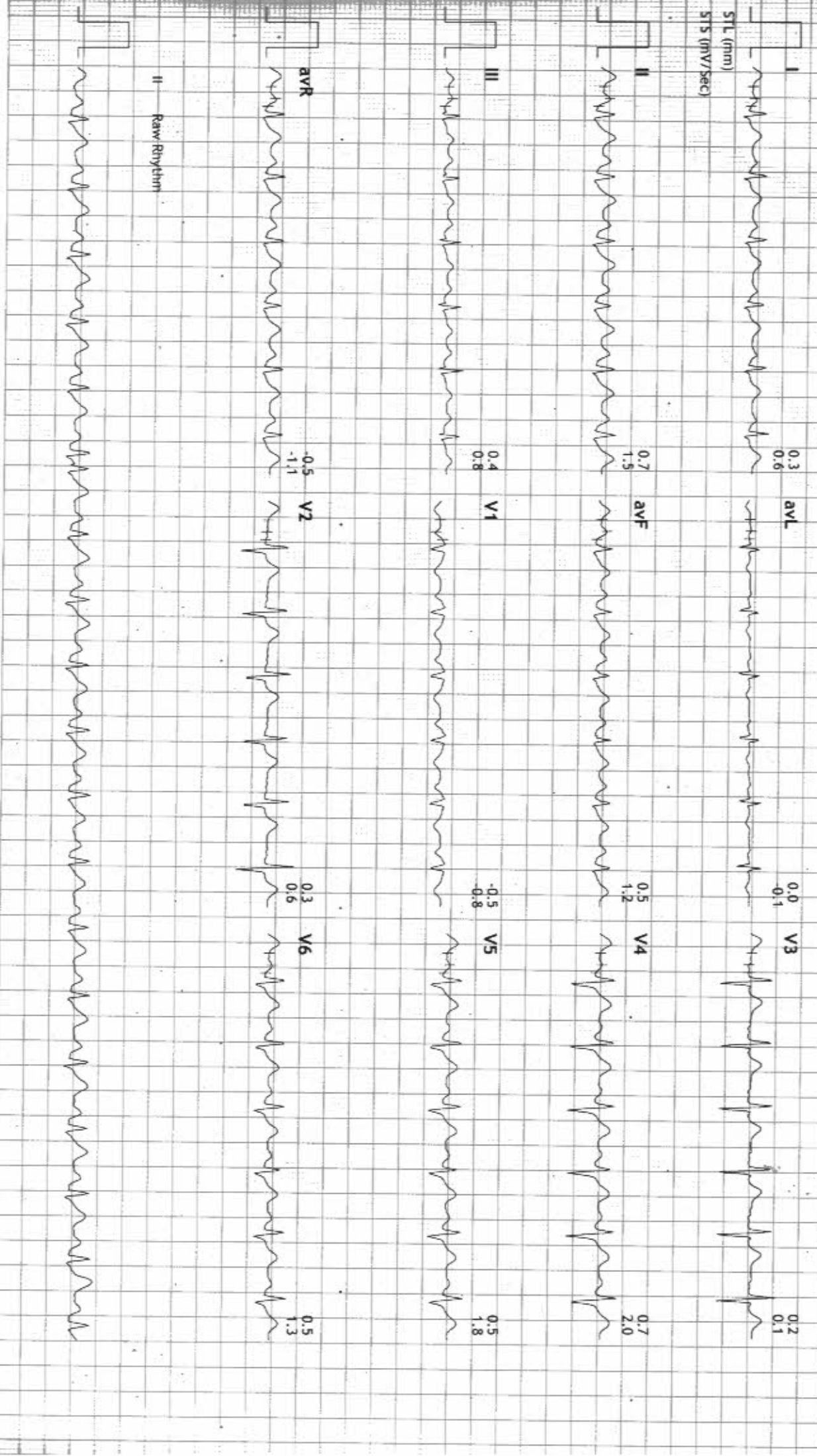
BRUCE
(1.0-100)Hz

Ex Time 05:57
BLC : On
Notch : On

Recovery : (01:59)
10.0 min/mv
25 mm/Sec.



Date: 08-May-2022 11:16:43 AM

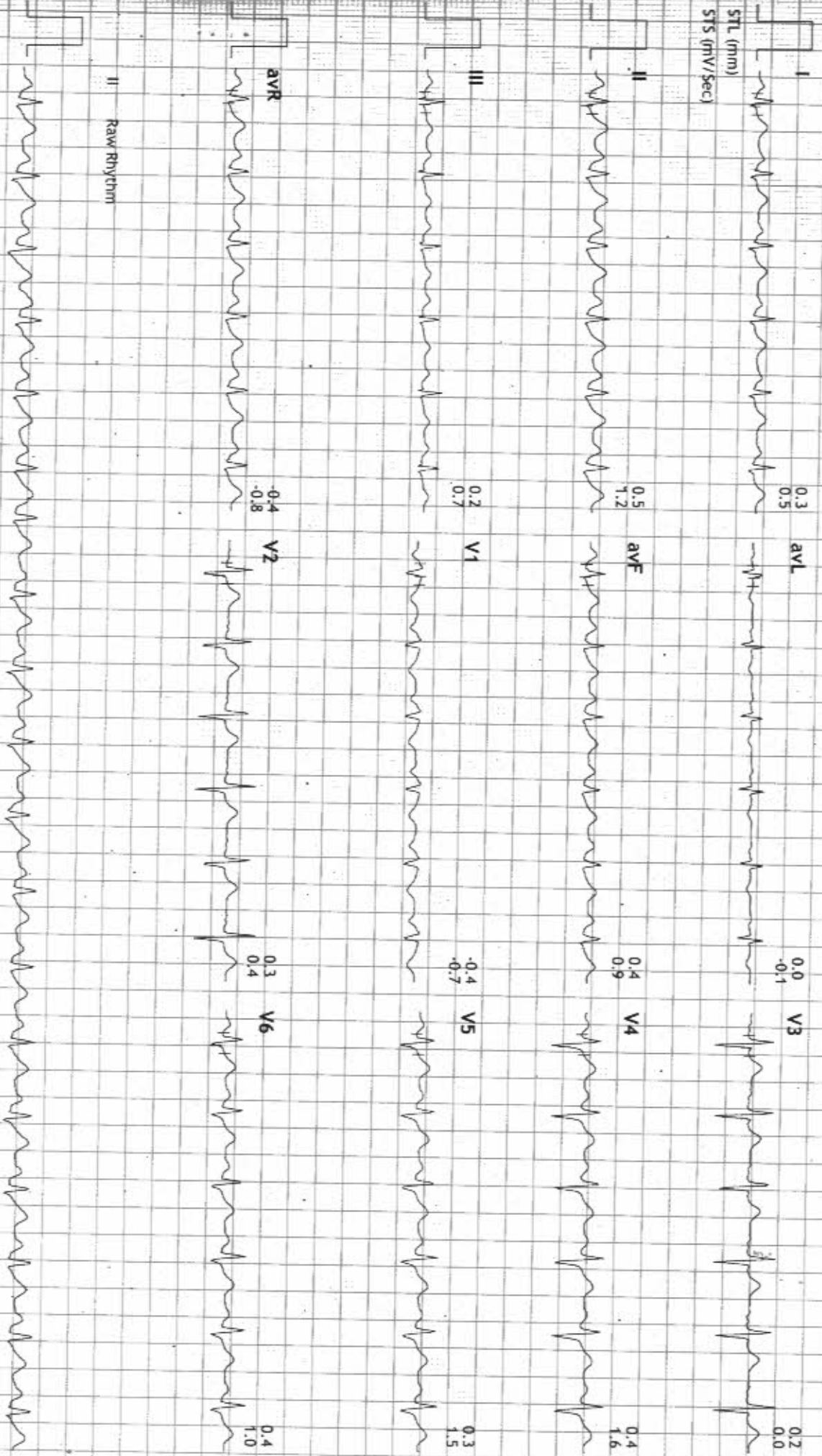


23257/MR VENKATA SRINIVASA RAO
57 Yrs/Male
84 Kg/180 Cms
Date: 08-May-2022 11:16:43 AM

HR: 112 bpm
METs: 1.0
BP: 120/80

MPPHR: 68% of 163
Speed: 0.0 mph
Grade: 0.0%

BRUCE
(1.0-100)/Hz
Ex Time 05:57
BLC : On
Notch : On
Recovery : (02:59)
10.0 mm/mV
25 mm/Sec.



HR : 96 bpm
 P : 96 ms
 PR : 136 ms
 QRS : 81 ms
 QT/QTc : 337/427 ms
 PQRS/T : 45/60/36 °
 RV5/SV1 : 0.750/1.237 mV

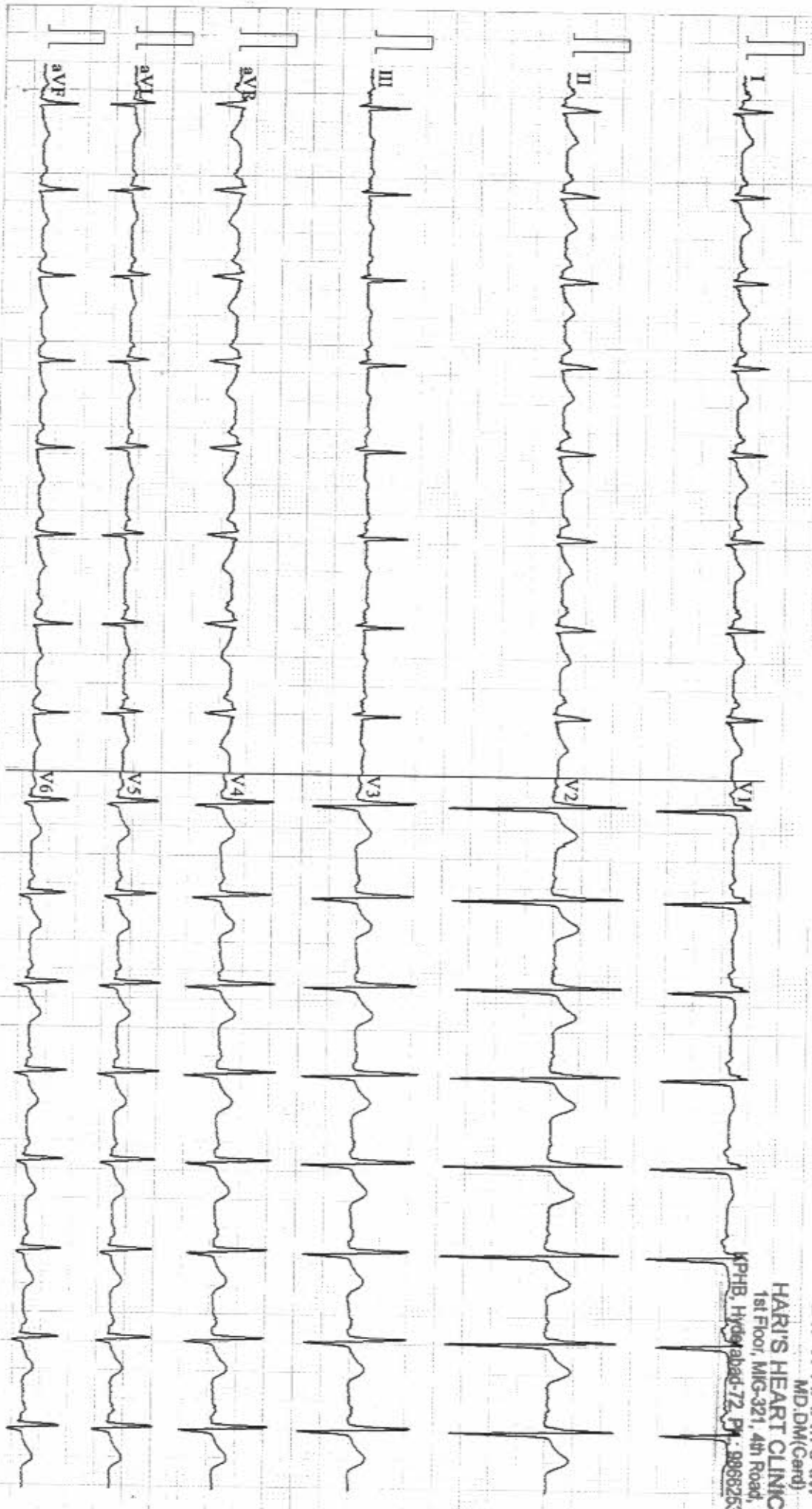
Diagnosis Information:
 Sinus Rhythm
 Normal ECG

O23-372 M / 57 Y
 MR VENKATA SRINIVASA RAO
 Aditya Diagnostics 08-05-2022

Technician :
 Ref-Phys. :
 Report Confirmed by:

Dr. V. HARIRAM
 MD,DM(Card)

HARI'S HEART CLINIC
 1st Floor, MG-321, 4th Road,
 KPHB, Hyderabad-72. Ph : 9988253911



0.67~100Hz AC50 25mm/s 10mm/mV 2*5s 96 SE-301 V1.05 SEMIP V1.81

08-05-2022 10:39:01 AM

NRE

HP