

MYSORE-BALLAL CIRCLE



--- A MEDALL COMPANY ---

CUSTOMER CHECKLIST

Date 18-Mar-2023 7:36 AM

6:00 PM

Customer Name : MRS.PRIYADARSHINI D

DOB : 16 Mar 1990

Ref Dr Name : MediWheel

Age : 33Y/FEMALE

Customer Id : MED111543141

Visit ID : 712309011



MED111543141

Email Id :

Phone No : 9742166193

Corp Name : MediWheel

Address :

Package Name : Mediwheel Full Body Health Checkup Female Below 40

S.No	Modality	Study	Accession No	Time	Seq	Signature
1	LAB	BLOOD UREA NITROGEN (BUN) ✓				
2	LAB	GLUCOSE - FASTING ✓				
3	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)				
4	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c) ✓				
5	LAB	LIPID PROFILE ✓				
6	LAB	LIVER FUNCTION TEST (LFT) ✓				
7	LAB	URIC ACID ✓				
8	LAB	URINE GLUCOSE - FASTING ✓				
9	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)				
10	LAB	COMPLETE BLOOD COUNT WITH ESR ✓				
11	LAB	THYROID PROFILE/ TFT(T3, T4, TSH) ✓				
12	LAB	STOOL ANALYSIS - ROUTINE				
13	LAB	URINE ROUTINE ✓				
14	LAB	CREATININE ✓				

7:36 AM

Patient Details Print Page

15	LAB	BLOOD GROUP & RH TYPE (Forward Reverse) ✓					
16	LAB	BUN/CREATININE RATIO ✓					
17	OTHERS	physical examination	MYS2774988102651				
18	US	ULTRASOUND ABDOMEN ✓	MYS2774988103462	—	10:30 Am		
19	OTHERS	Treadmill / 2D Echo	MYS2774988127528	—	4:30 pm		
20	OTHERS	EYE CHECKUP	MYS2774988135592	}	I floor		
21	X-RAY	X RAY CHEST ✓	MYS2774988145199				
22	OTHERS	Consultation Physician	MYS2774988148004				
23	ECHO	ELECTROCARDIOGRAM ECG	MYS2774988149333				

done ✓

H - 155 cm
wt - 72 kg
Bp - 110/70
pulse - 75 bpm
temp - 39 °C
Wcvt - 32 g

Registered By
(A.JAYASHREE)

Customer Name	MRS.PRIYADARSHINI D	Customer ID	MED111543141
Age & Gender	33Y/FEMALE	Visit Date	18/03/2023
Ref Doctor	MediWheel		

2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

AORTA	:	2.7cms
LEFT ATRIUM	:	2.7cms
LEFT VENTRICLE (DIASTOLE)	:	4.3cms
(SYSTOLE)	:	2.8cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.8cms
(SYSTOLE)	:	1.0cms
POSTERIOR WALL (DIASTOLE)	:	0.8cms
(SYSTOLE)	:	1.0cms
EDV	:	61ml
ESV	:	24ml
FRACTIONAL SHORTENING	:	36%
EJECTION FRACTION	:	61%
RVID	:	1.3cms

DOPPLER MEASUREMENTS:

MITRAL VALVE	:	'E' - 0.81 m/s	'A' - 0.27m/s	NO MR
AORTIC VALVE	:	0.99m/s		NO AR
TRICUSPID VALVE	:	'E' - 0.80 m/s	'A' - 0.35 m/s	NO TR
PULMONARY VALVE	:	0.79m/s		NO PR



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2D ECHOCARDIOGRAPHY FINDINGS:

Left ventricle : Normal size, Normal systolic function.
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapse.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

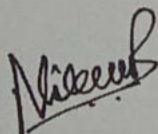
IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

IMPRESSION:

- NORMAL SIZED CARDIAC CHAMBERS.
- NORMAL LV SYSTOLIC FUNCTION. EF: 61%.
- NO REGIONAL WALL MOTION ABNORMALITIES.
- NORMAL VALVES.
- NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.

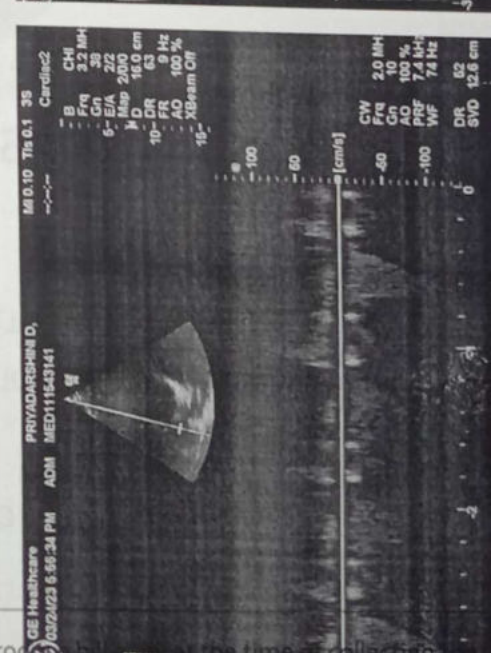
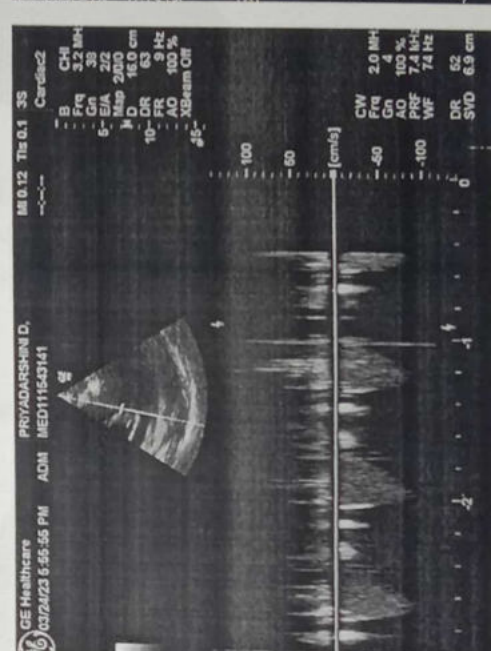
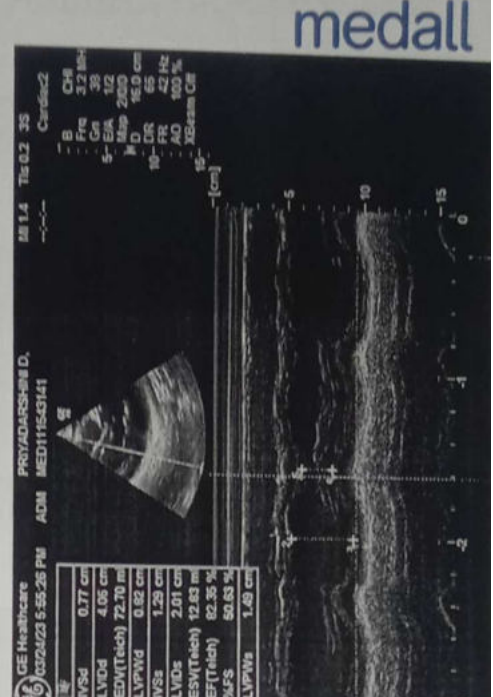
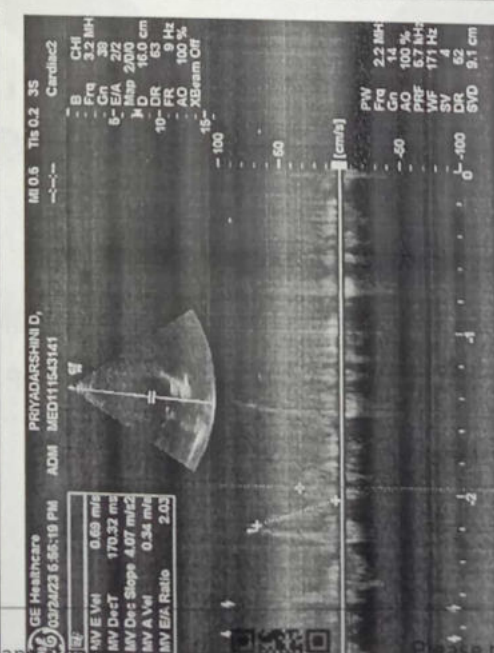
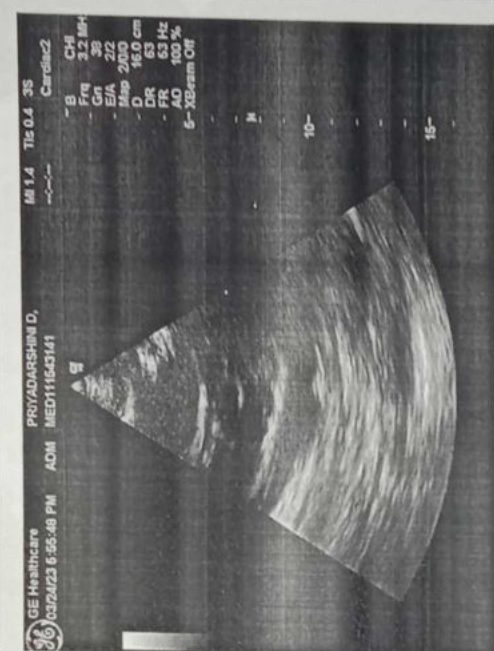
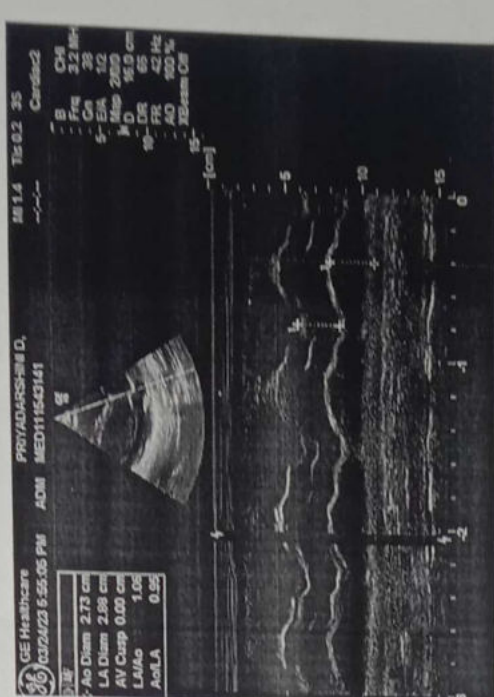
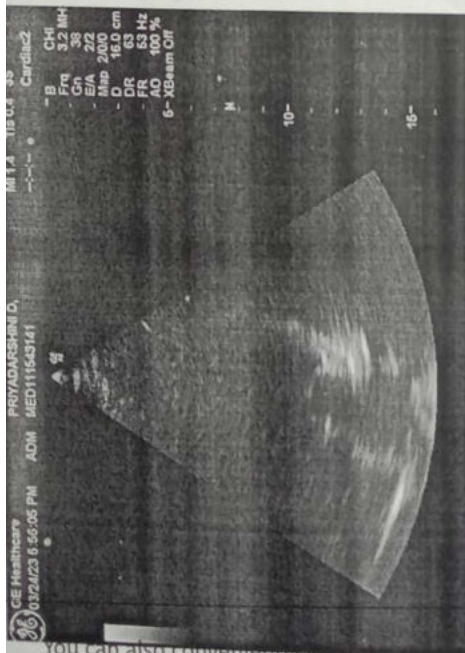


DR. NIKHIL B
INTERVENTIONAL CARDIOLOGIST
NB/MM

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Please provide your mobile number and customer id during your subsequent visits.

Customer Name	MRS.PRIYADARSHINI D	Customer ID	MED111543141
Age & Gender	33Y/FEMALE	Visit Date	24/03/2023
Ref Doctor	MediWheel		

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has uniform echopattern.
No evidence of focal lesion or intrahepatic biliary ductal dilatation.
Hepatic and portal vein radicals are normal.

GALL BLADDER contracted. No obvious calculus however seen. CBD is of normal calibre.

PANCREAS has normal shape, size and uniform echopattern.
No evidence of ductal dilatation or calcification.

SPLEEN show normal shape, size and echopattern.
No demonstrable Para-aortic lymphadenopathy.

KIDNEYS move well with respiration and have normal shape, size and echopattern.
Cortico- medullary differentiations are well madeout.
No evidence of calculus or hydronephrosis.

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	10.4	1.3
Left Kidney	10.8	1.4

URINARY BLADDER show normal shape and wall thickness.
It has clear contents. No evidence of diverticula.

UTERUS is anteverted and has normal shape and size. It has uniform myometrial echopattern.
Endometrial echo is of normal thickness 7mms.
Uterus measures as follows: LS: 7.0cms AP: 3.5cms TS: 4.0cms.

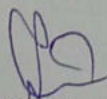
OVARIES are normal size, shape and echotexture.
Right ovary measures: 3.1x1.6cms Left ovary measures: 2.9x2.0cms
POD & adnexa are free.

No evidence of ascites.

IMPRESSION:

➤ **NO SIGNIFICANT ABNORMALITY DETECTED.**

CONSULTANT RADIOLOGISTS

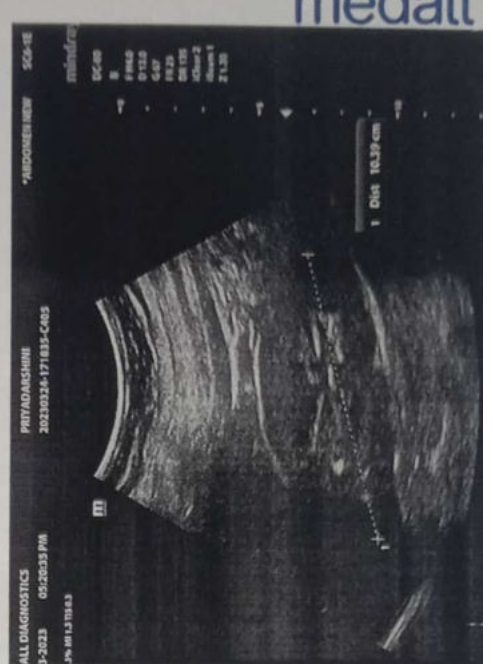
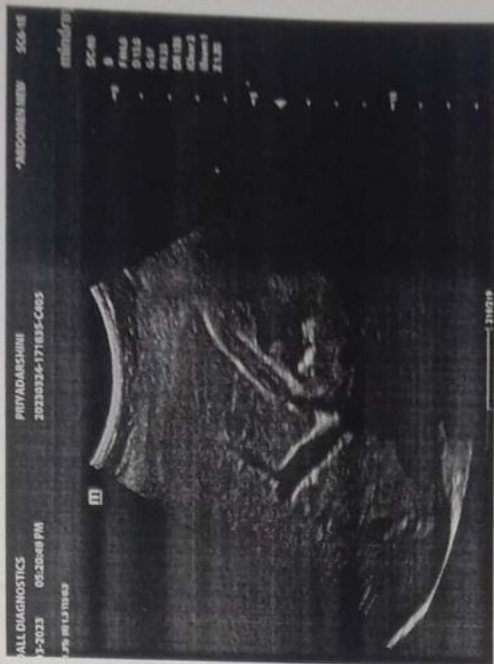
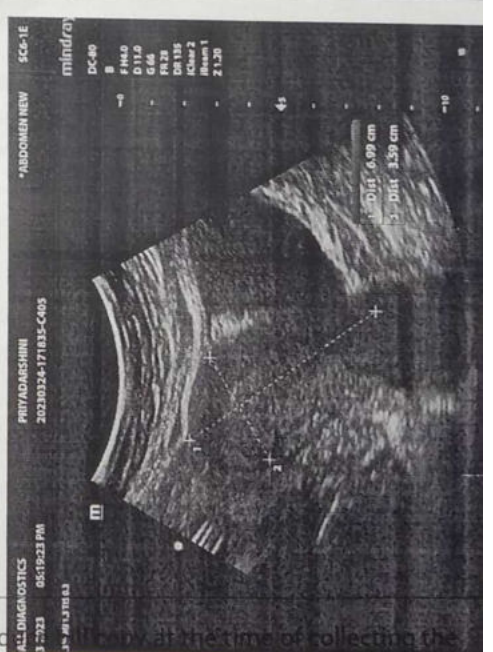
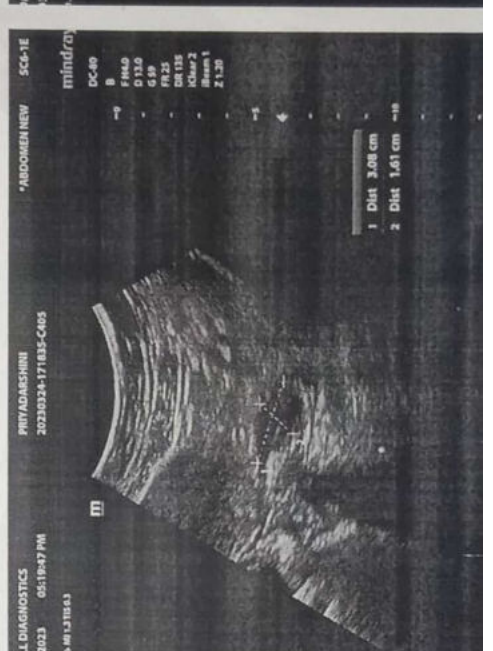
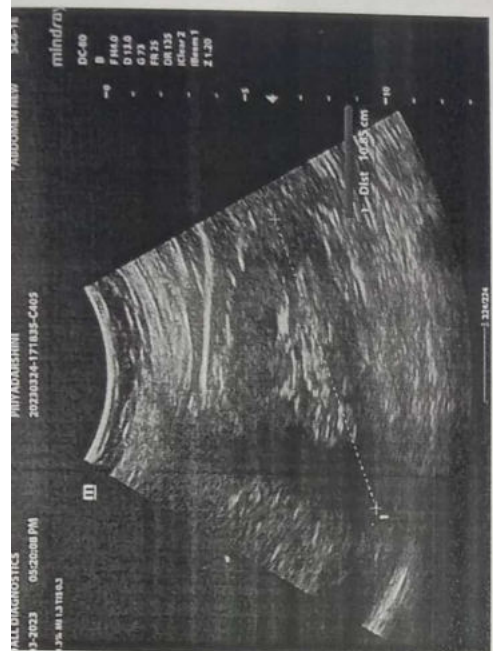


DR. ANITHA ADARSH
AA/SV

DR. MOHAN B



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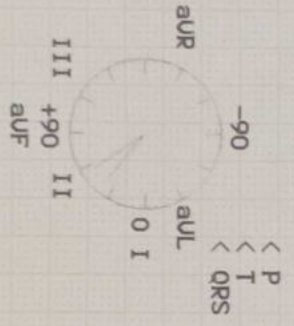


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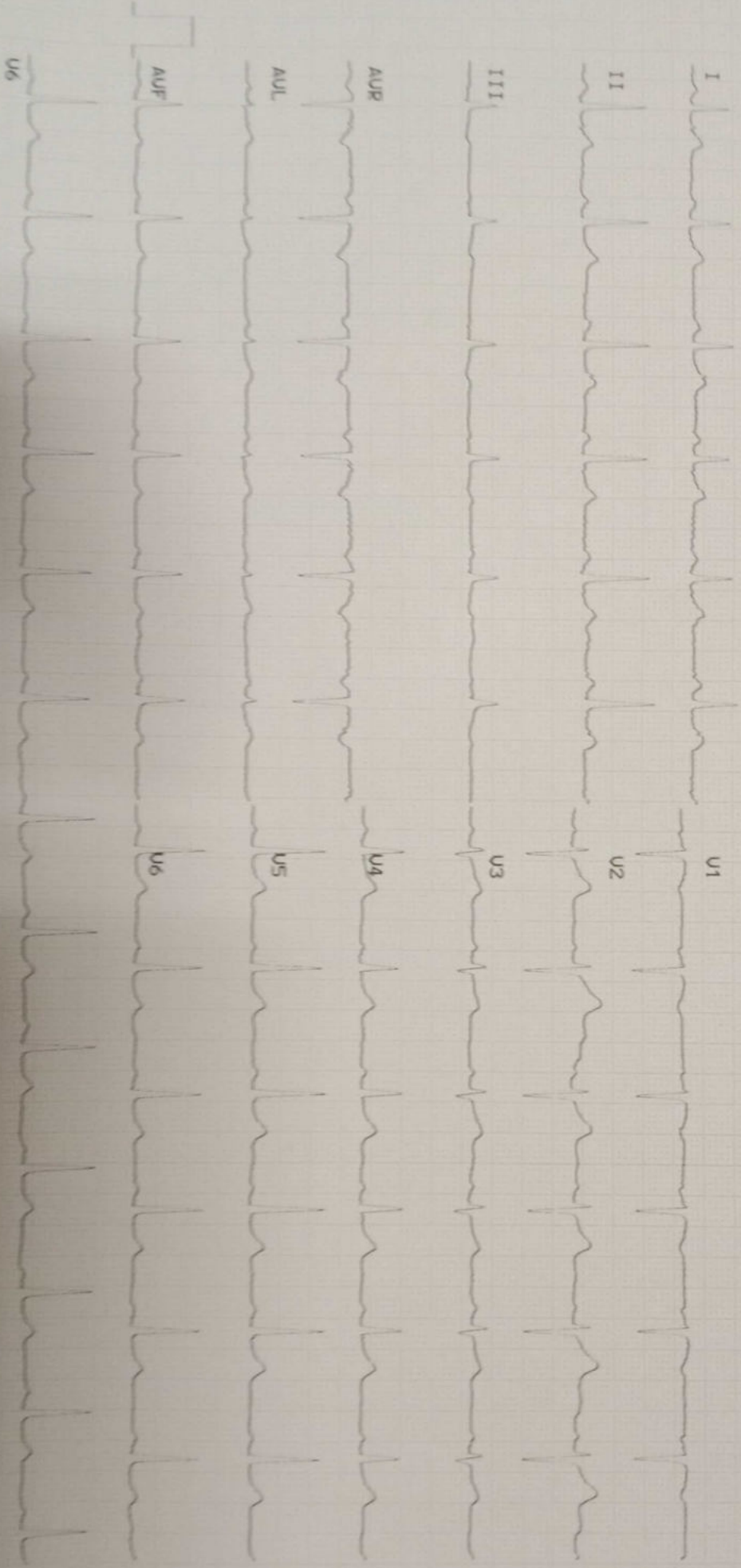
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AGE: 33
Measurement Results:
QRS : 86 ms
QT/QTcB : 378 / 425 ms
PR : 138 ms
P : 104 ms
RR/PP : 790 / 790 ms
P/QRS/T : 40 / 55 / 40 degrees
QTd/QTcBD : 48 / 54 ms
Sokolow : 2.0 mV
NK : 11



Normal sinus rhythm
[Signature]

Unconfirmed report.



MEDALL



NETHRADHAMA SUPER SPECIALITY EYE HOSPITAL

(A Unit of Nethradhama Hospitals Pvt. Ltd.)

OPD SHEET

Date: 25/03/2023

Patient's Name: Mrs. Parvadarshini A

OP No. 1238878

33/F

12:40 PM

Dr. Uvasha Uday K

IOP < $\frac{9}{12}$ mmHg

For medical certificate.

No specific complaints.

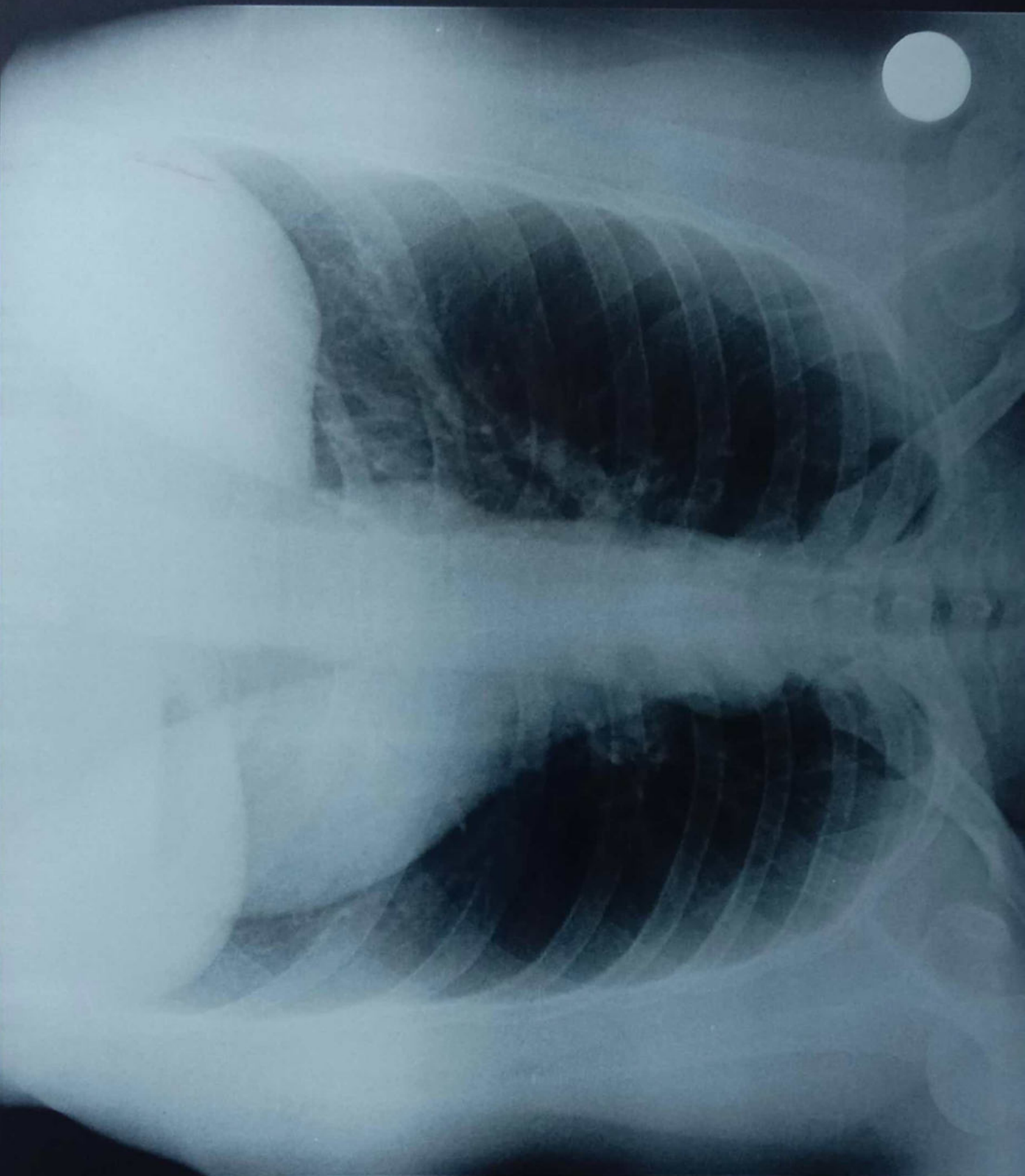
BCVA < $\frac{6}{6}$, No.
 $\frac{6}{6}$, No.

A/s: BE K clear, Ac VH₃, pupil RRR,
lens clear.

Colour V_n - BE, WNL.

Fundus: BE LDR 0.4 - 0.5, MNRF,
Macula PR (+).

Adv. R/A 1 year/SOS.



PRIYADARSHINI D 33 MED111543141 F CHEST PA 3/18/2023 10:37 AM

MEDALL CLUMAX DIAGNOSTIC

Name : Mrs. PRIYADARSHINI D
PID No. : MED111543141
SID No. : 712309011
Age / Sex : 33 Year(s) / Female
Type : OP
Ref. Dr : MediWheel

Register On : 18/03/2023 7:37 AM
Collection On : 18/03/2023 8:54 AM
Report On : 18/03/2023 6:27 PM
Printed On : 25/03/2023 4:25 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Monocytes (Blood/Impedance Variation & Flow Cytometry)	05	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	5.51	10 ³ / μ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.84	10 ³ / μ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.09	10 ³ / μ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.44	10 ³ / μ l	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10 ³ / μ l	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	233	10 ³ / μ l	150 - 450
MPV (Blood/Derived)	13.8	fL	8.0 - 13.3
PCT	0.32	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	10	mm/hr	< 20



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Lipid Profile</u>			
Cholesterol Total (Serum/Oxidase / Peroxidase method)	111	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	43	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)	32	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	70.4	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	8.6	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	79.0	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.



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Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3.5		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)	2.2		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	5.7	%	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 %

Remark: Kindly correlate clinically.

Estimated Average Glucose (Whole Blood)	116.89	mg/dL
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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 glycemic 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.



Dr. KIRAN.H.S
MD PATHOLOGY
KMC 86542

APPROVED BY

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CLINICAL PATHOLOGY

PHYSICAL EXAMINATION

Colour (Urine/Physical examination)	Pale yellow		Yellow to Amber
Volume (Urine/Physical examination)	25		ml
Appearance (Urine)	Clear		

CHEMICAL EXAMINATION

pH (Urine)	6.0		4.5 - 8.0
Specific Gravity (Urine/Dip Stick ~ Reagent strip method)	1.020		1.002 - 1.035
Protein (Urine/Dip Stick ~ Reagent strip method)	Positive(+)		Negative
Glucose (Urine)	Nil		Nil
Ketone (Urine/Dip Stick ~ Reagent strip method)	Nil		Nil
Leukocytes (Urine)	Negative	leuco/uL	Negative
Nitrite (Urine/Dip Stick ~ Reagent strip method)	Nil		Nil
Bilirubin (Urine)	Negative	mg/dL	Negative
Blood (Urine)	Nil		Nil
Urobilinogen (Urine/Dip Stick ~ Reagent strip method)	Normal		Within normal limits



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<u><i>Urine Microscopy Pictures</i></u>			
RBCs (Urine/Microscopy)	Nil	/hpf	NIL
Pus Cells (Urine/Microscopy)	2-4	/hpf	< 5
Epithelial Cells (Urine/Microscopy)	1-2	/hpf	No ranges
Others (Urine)	Nil		Nil



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Investigation

Observed
Value

Unit

Biological
Reference Interval

IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING
(EDTA Blood Agglutination)

'O' 'Positive'

Remark: Test to be confirmed by Gel method.



APPROVED BY

Name	PRIYADARSHINI D	ID	MED111543141
Age & Gender	33Y/F	Visit Date	Mar 18 2023 7:36AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: No significant abnormality detected.



DR. MOHAN. B
(DMRD, DNB, EDIR, FELLOW IN CARDIAC
MRI)
CONSULTANT RADIOLOGIST

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Age & Gender	33Y/F	Visit Date	Mar 18 2023 7:36AM
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