

MYSORE-BALLAL CIRCLE



--- A MEDALL COMPANY ---

Date 26-Nov-2022 10:30 AM

Customer Name : MRS.MANASA K S

Ref Dr Name : MediWheel

Customer Id : MED111394052

Email Id :

Corp Name : MediWheel

Address :

DOB : 17 Jun 1995

Age : 27Y/FEMALE

Visit ID : 712235840

Phone No : 9972919049

H - 156 cm
 W - 55 kg
 BP - 120/10
 Pulse - 86 bpm
 H/P - 34
 Weight - 30

Package Name : Mediwheel Full Body Health Checkup Female Below 40

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

<https://uwinlite7.medallcorp.in/Blruwin/UwinLite/FrmPrintPatintDetails.aspx?Appld=2742819>

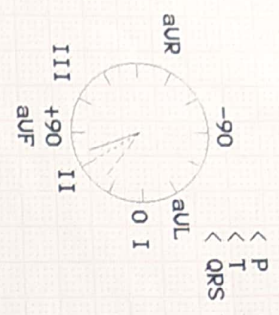
		BUN/CREATININE RATIO			
	OTHERS	physical examination	MYS2742819102651		
		ULTRASOUND ABDOMEN ✓	MYS2742819103462		
	OTHERS	Treadmill / 2D Echo	MYS2742819127528	W.R.P.M	1st Floor
	OTHERS	EYE CHECKUP	MYS2742819135592		
21	X-RAY	X RAY CHEST ✓	MYS2742819145199		
22	OTHERS	Consultation Physician	MYS2742819148004		
23	ECHO	ELECTROCARDIOGRAM ECG ✓	MYS2742819149333		

Registered By
(R.SUNILKUMAR)

Female

AGE: 27
 Measurement Results:

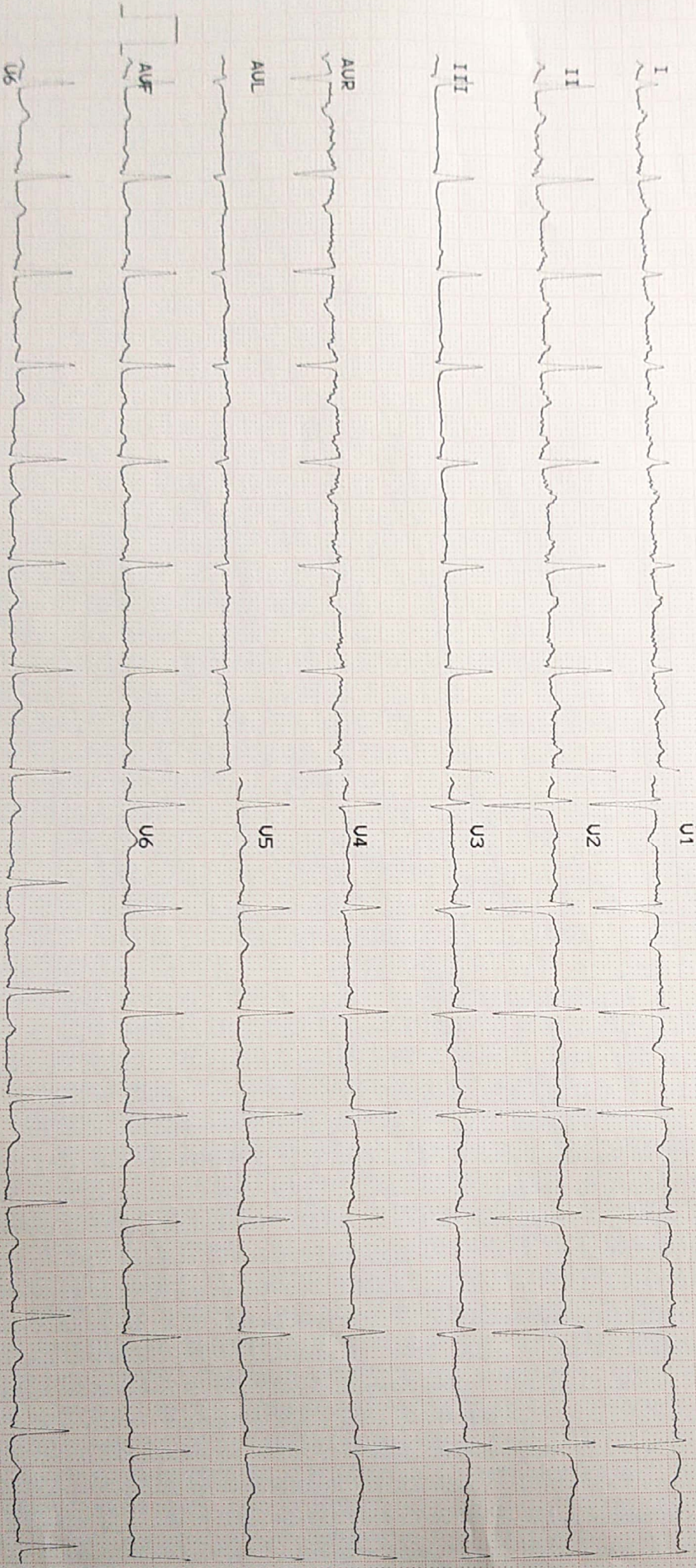
QRS	368 /	96 ms
QT/QTcB	443 ms	
PR	146 ms	
P	120 ms	
RR/PP	690 /	690 ms
P/QRS/T	60 / 70 /	40 degrees
QTd/QTcBD	74 /	89 ms
Sokolow	2.0 mV	
NK	13	

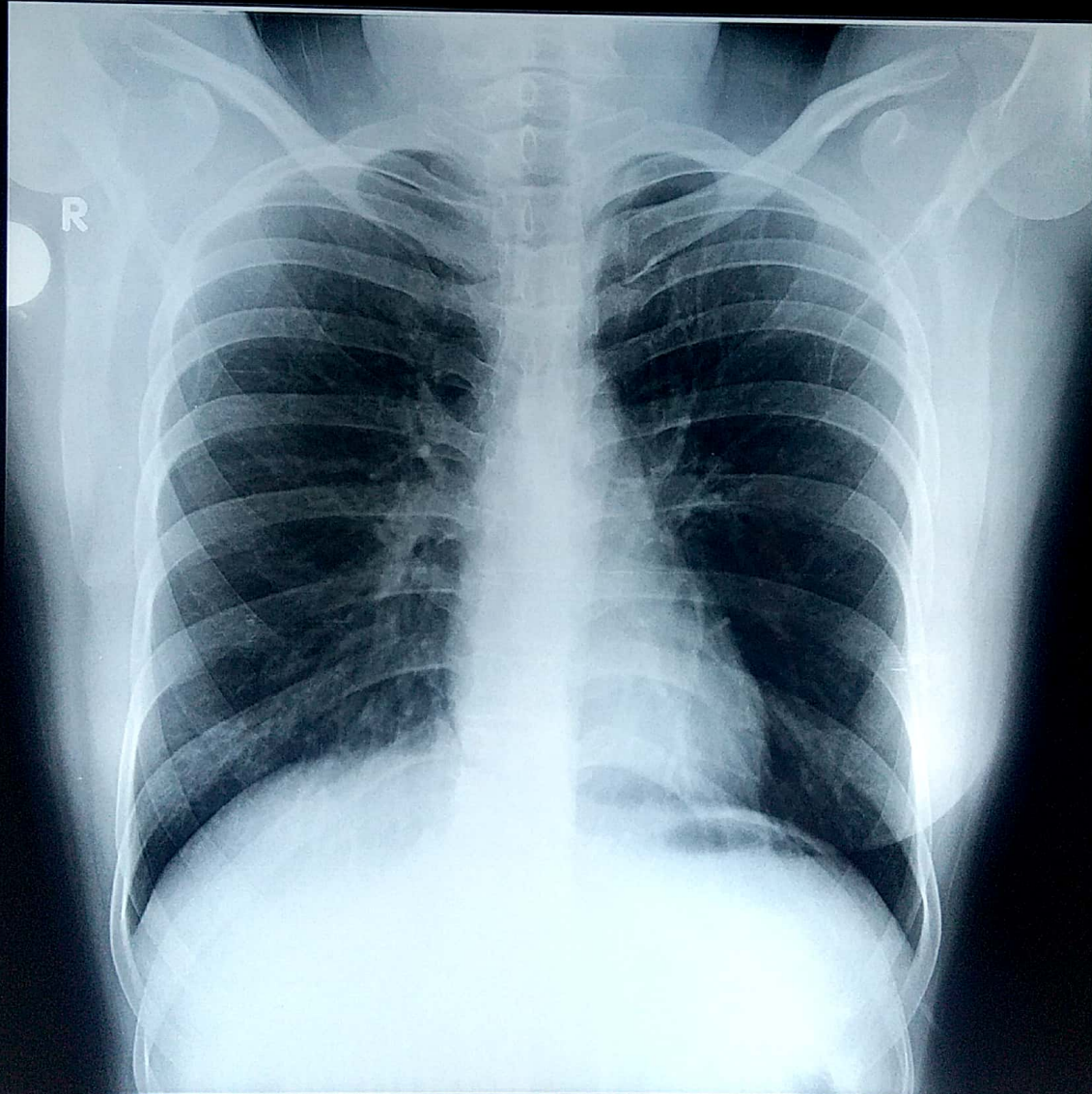


Interpretation:
 T-wave near baseline (anterior)
 probably normal ECG

Normal sinus rhythm
Duffin
R

Unconfirmed report.





MANASA K S 27 MED111394052 F CHEST PA 11/26/2022 12:52 PM
MEDALL CLUMAX DIAGNOSTIC

Customer Name	MRS.MANASA K S	Customer ID	MED111394052
Age & Gender	27Y/FEMALE	Visit Date	26/11/2022
Ref Doctor	MediWheel		

2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

AORTA	:	2.4cms
LEFT ATRIUM	:	2.4cms
LEFT VENTRICLE (DIASTOLE)	:	3.9cms
(SYSTOLE)	:	2.0cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.7cms
(SYSTOLE)	:	1.0cms
POSTERIOR WALL (DIASTOLE)	:	0.6cms
(SYSTOLE)	:	0.9cms
EDV	:	61ml
ESV	:	21ml
FRACTIONAL SHORTENING	:	37%
EJECTION FRACTION	:	65%
RVID	:	1.6cms

DOPPLER MEASUREMENTS:

MITRAL VALVE	:	'E' - 0.81m/s	'A' - 0.35 m/s	NO MR
AORTIC VALVE	:	1.00m/s		NO AR
TRICUSPID VALVE	:	'E' - 0.69m/s	'A' - 0.28 m/s	NO TR
PULMONARY VALVE	:	0.78m/s		NO PR



Customer Name	MRS.MANASA K S	Customer ID	MED111394052
Age & Gender	27Y/FEMALE	Visit Date	26/11/2022
Ref Doctor	MediWheel		

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.

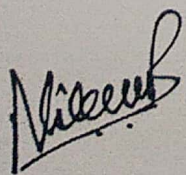
IAS : Intact.

IVS : Intact.

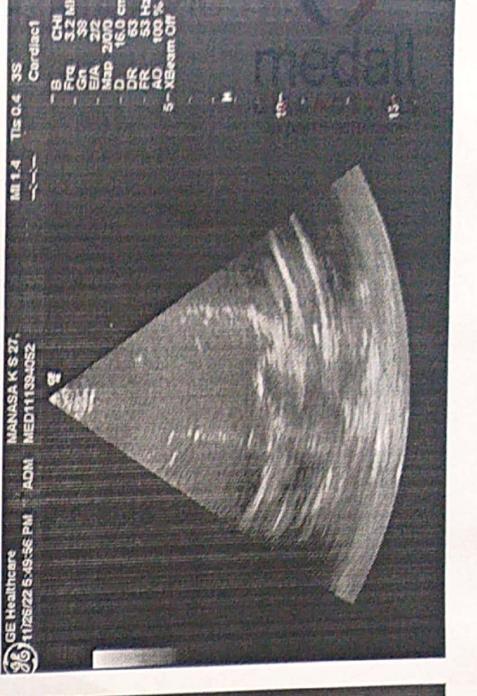
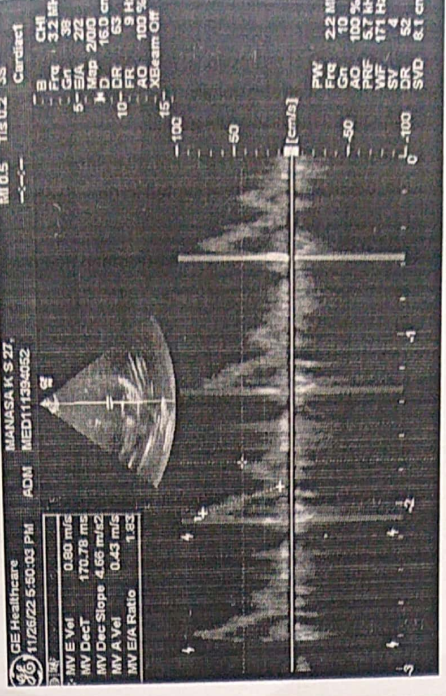
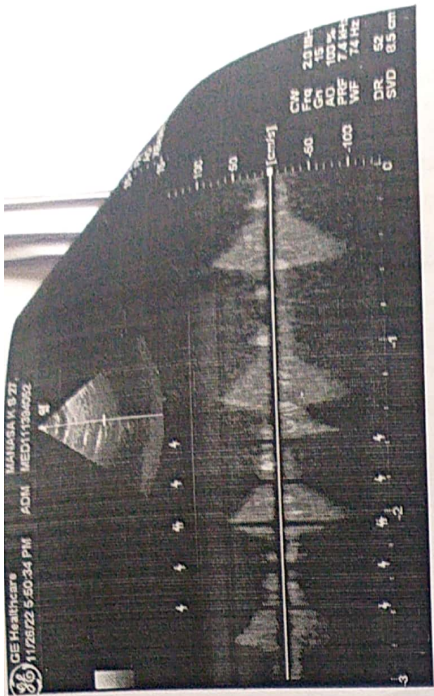
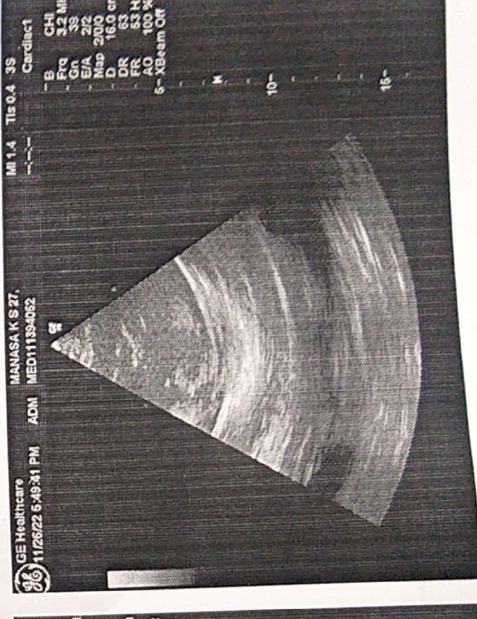
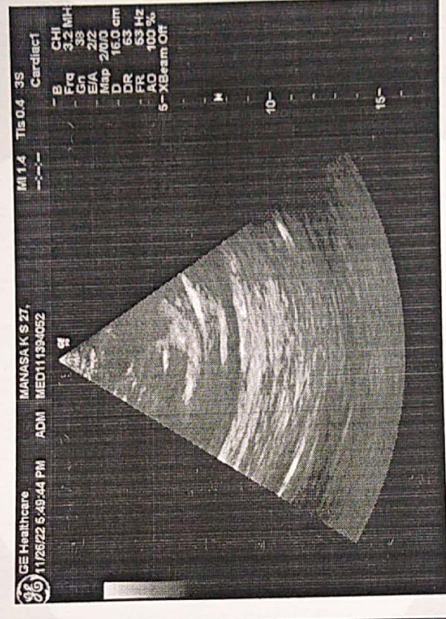
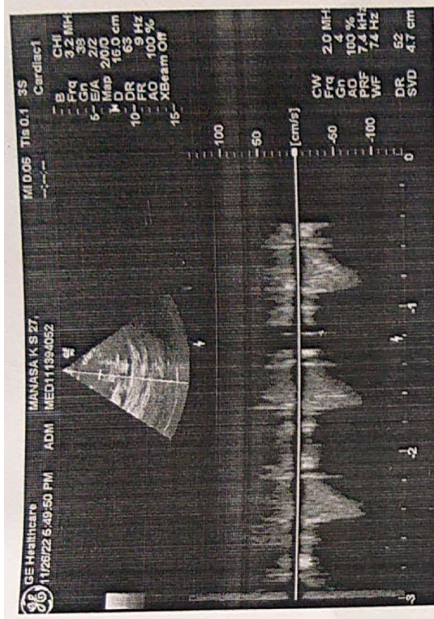
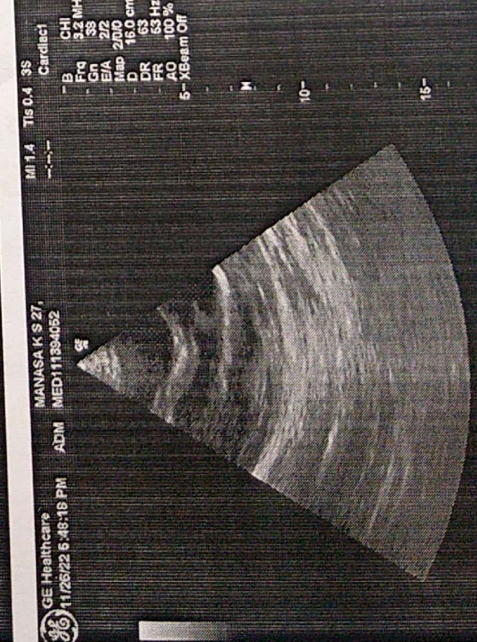
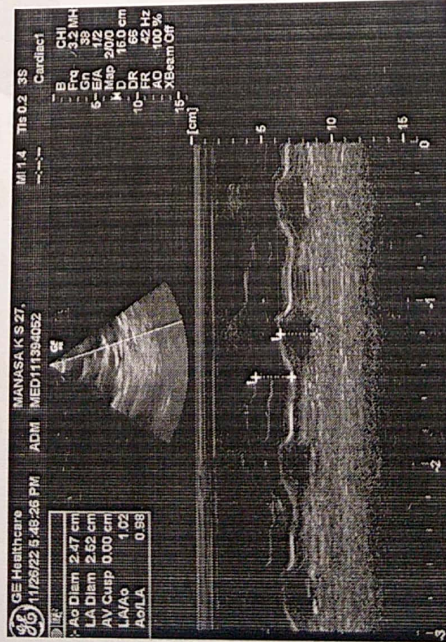
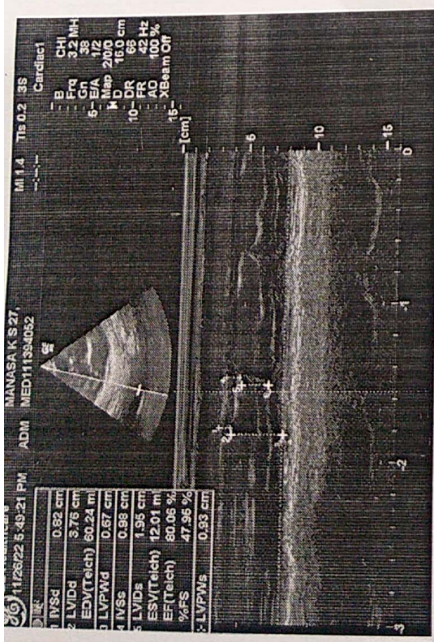
Pericardium : No pericardial effusion.

IMPRESSION:

- NORMAL SIZED CARDIAC CHAMBERS.
- NORMAL LV SYSTOLIC FUNCTION. EF:65 %.
- NO REGIONAL WALL MOTION ABNORMALITIES.
- NORMAL VALVES.
- NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.



DR. NIKHIL B
INTERVENTIONAL CARDIOLOGIST



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Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number customer id during your subsequent visits.

Customer Name	MRS.MANASA K S	Customer ID	MED111394052
Age & Gender	27Y/FEMALE	Visit Date	26/11/2022
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 show normal shape and has clear contents.
Gall bladder wall is of normal thickness. 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	9.2	1.2
Left Kidney	10.1	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 6.5 mms.
Uterus measures as follows: LS: 6.4cms AP: 4.3cms TS: 4.5cms.

OVARIES are normal size, shape and echotexture.
Right ovary measures: 2.8 x 2.3cms Left ovary measures: 3.1 x 2.2cms
POD & adnexa are free.

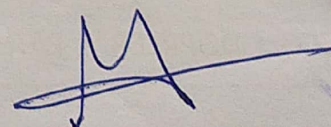
No evidence of ascites.

IMPRESSION:

> **NO SIGNIFICANT ABNORMALITY DETECTED.**

CONSULTANT RADIOLOGISTS

DR. ANITHA ADARSH
MB/MS



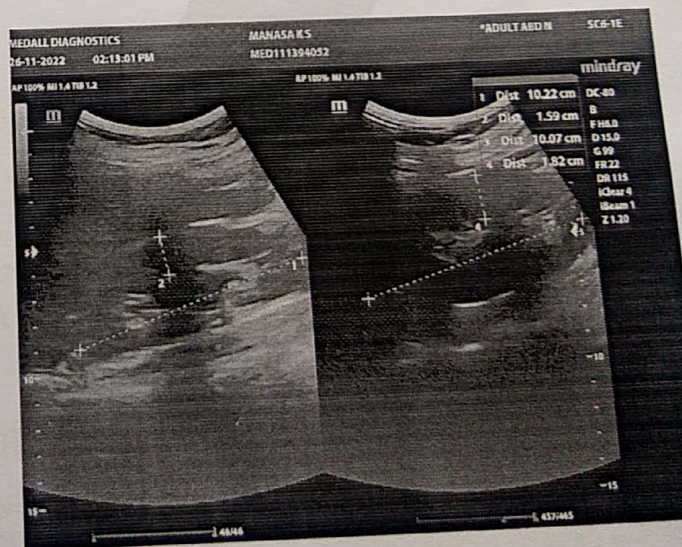
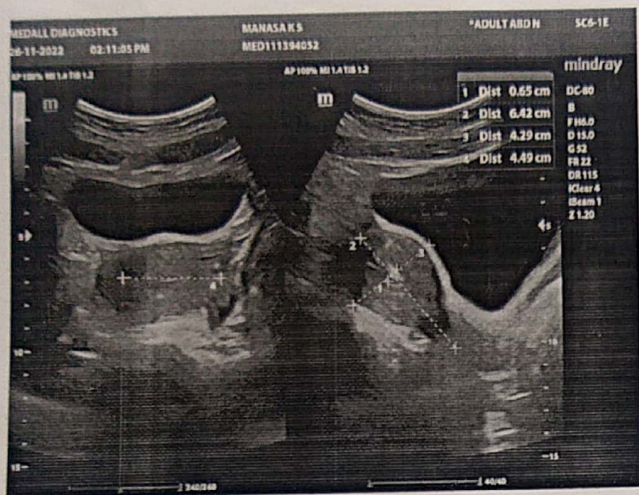
DR. MOHAN B

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Age & Gender	27Y/FEMALE	Visit Date	26/11/2022
Ref Doctor	MediWheel		



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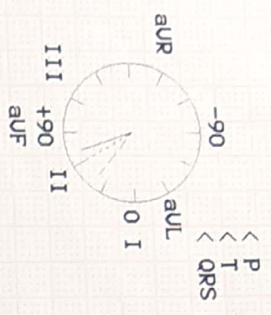
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Registered By
(R.SUNILKUMAR)

GE MAC1200 ST
 Female

AGE: 27
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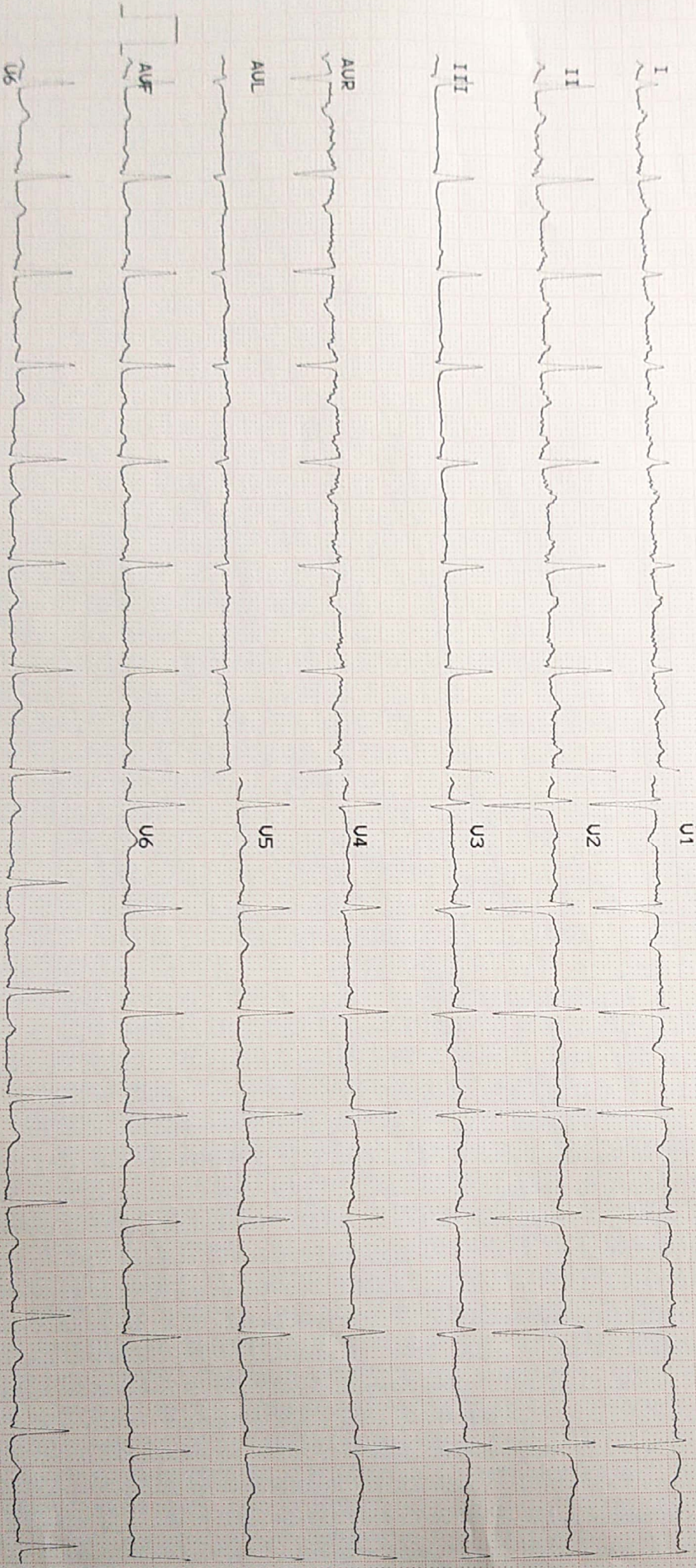
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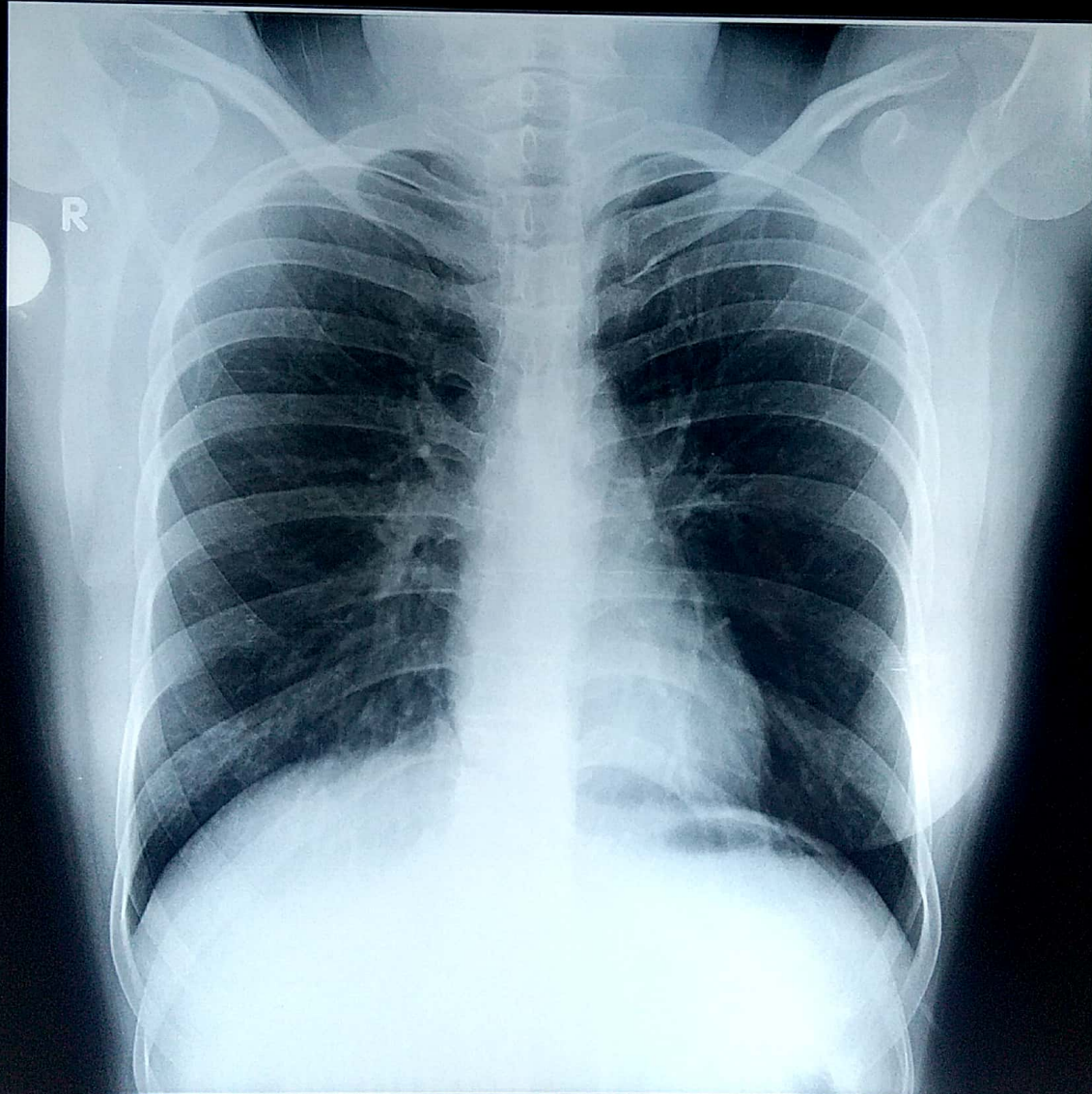


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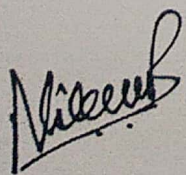
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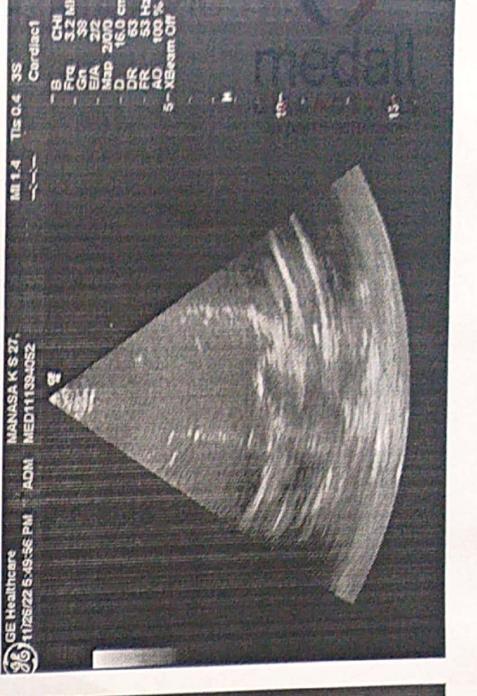
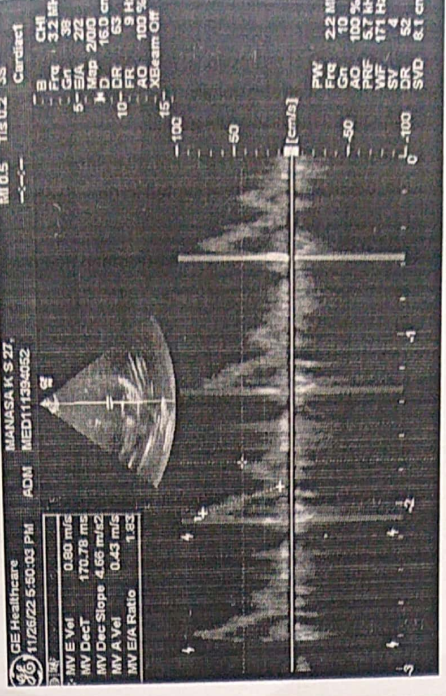
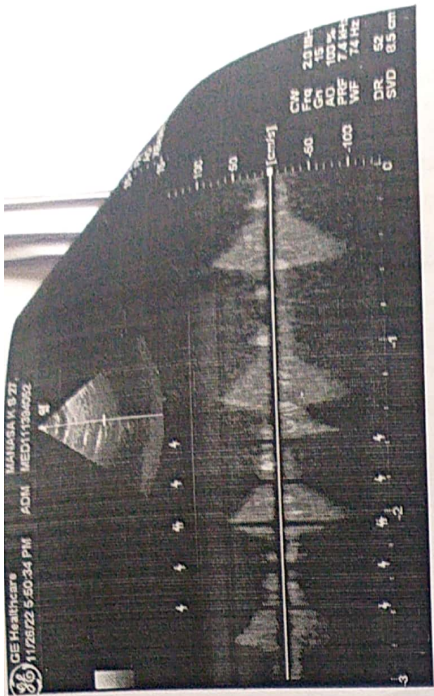
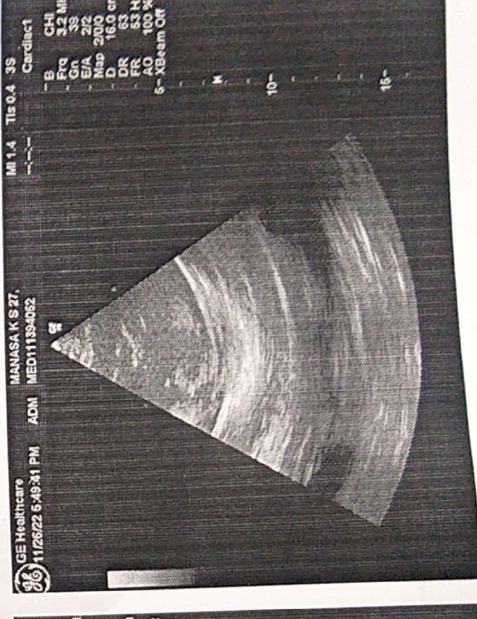
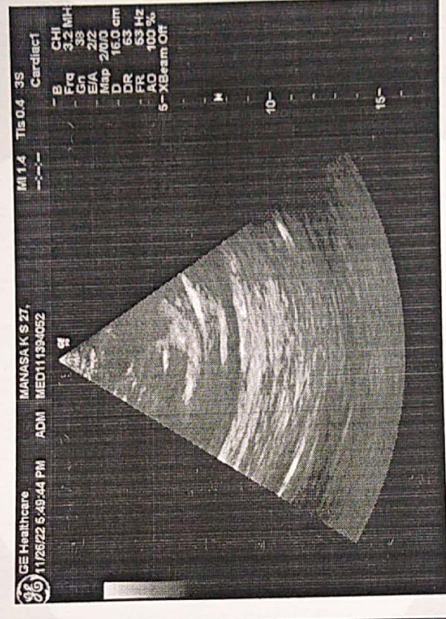
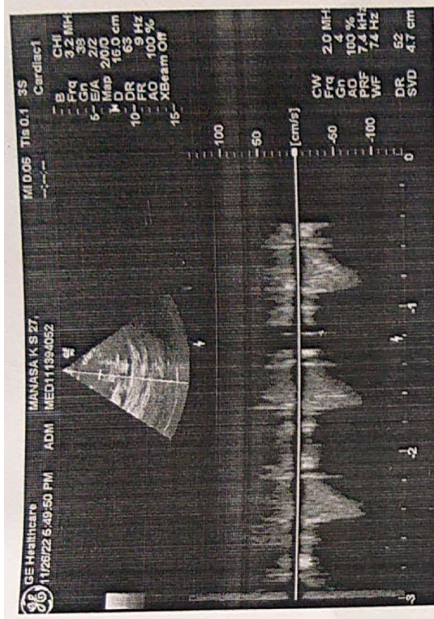
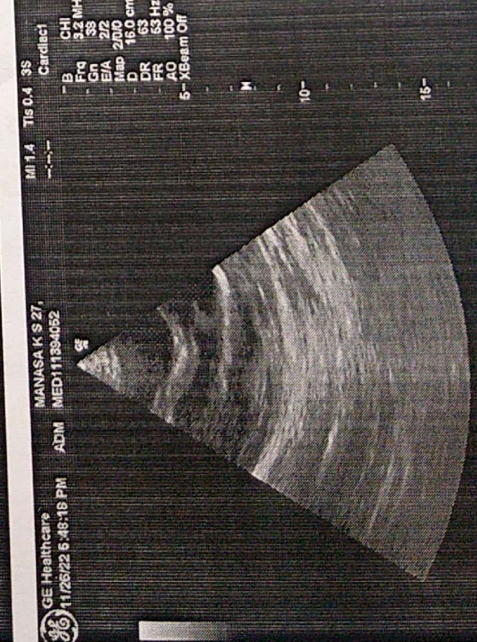
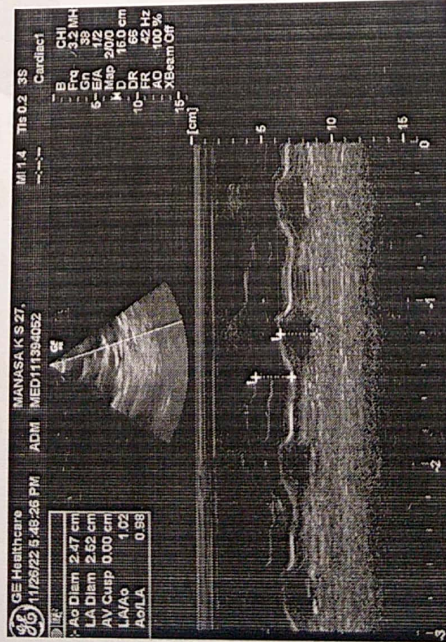
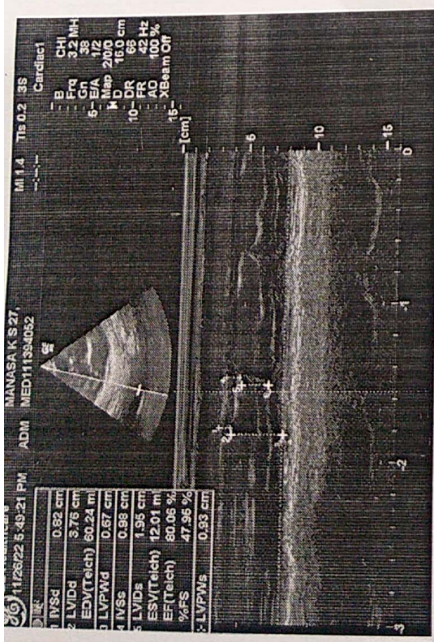
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INTERVENTIONAL CARDIOLOGIST



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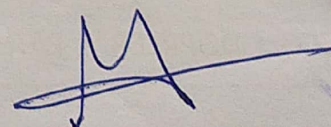
No evidence of ascites.

IMPRESSION:

➤ **NO SIGNIFICANT ABNORMALITY DETECTED.**

CONSULTANT RADIOLOGISTS

DR. ANITHA ADARSH
MB/MS



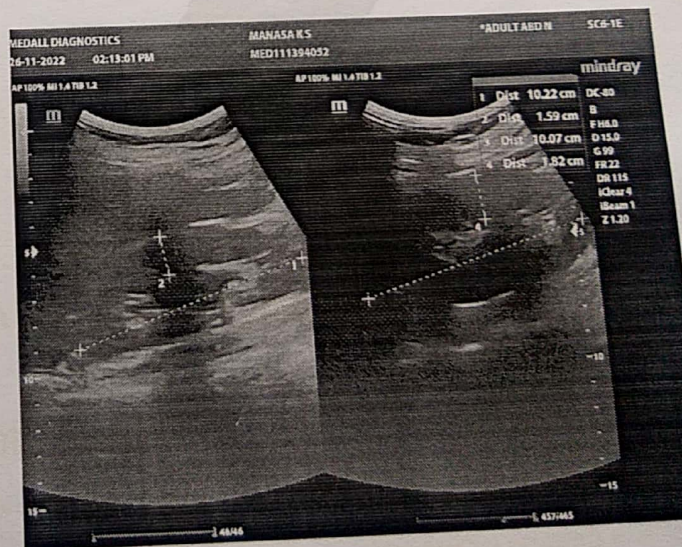
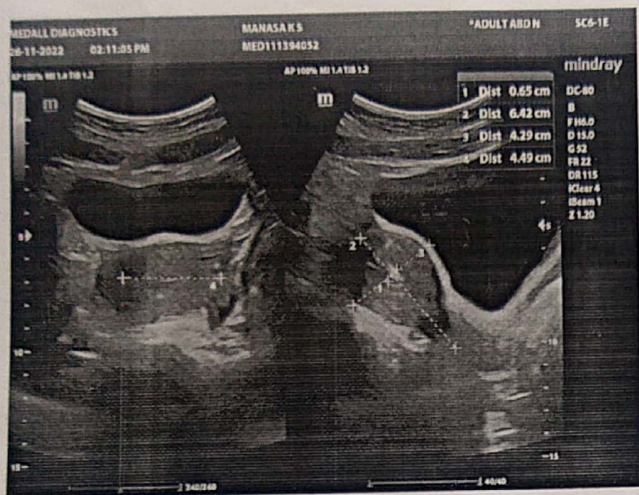
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Age & Gender	27Y/FEMALE	Visit Date	26/11/2022
Ref Doctor	MediWheel		



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Name : Mrs. MANASA K S
PID No. : MED111394052
SID No. : 712235840
Age / Sex : 27 Year(s) / Female
Type : OP
Ref. Dr : MediWheel


Register On : 26/11/2022 10:30 AM
Collection On : 26/11/2022 1:33 PM
Report On : 26/11/2022 6:10 PM
Printed On : 29/11/2022 4:08 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	02	%	01 - 06
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)	3.58	10 ³ / μ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.47	10 ³ / μ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.13	10 ³ / μ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.33	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)	469	10 ³ / μ l	150 - 450
MPV (Blood/Derived)	5.7	fL	8.0 - 13.3
PCT	0.27	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	18	mm/hr	< 20


Mr. S. Mohan Kumar
Sr. Lab Technician

VERIFIED BY


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name : Mrs. MANASA K S
PID No. : MED111394052
SID No. : 712235840
Age / Sex : 27 Year(s) / Female
Type : OP
Ref. Dr : MediWheel

Register On : 26/11/2022 10:30 AM
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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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)	4.5		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
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Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	2.3		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
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LDL/HDL Cholesterol Ratio (Serum/Calculated)	3		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
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Mr. S. Mohan Kumar
Sr. Lab Technician

VERIFIED BY

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DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name : Mrs. MANASA K S
PID No. : MED111394052
SID No. : 712235840
Age / Sex : 27 Year(s) / Female
Type : OP
Ref. Dr : MediWheel

Register On : 26/11/2022 10:30 AM
Collection On : 26/11/2022 1:33 PM
Report On : 26/11/2022 6:10 PM
Printed On : 29/11/2022 4:08 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	5.0	%	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 %

Estimated Average Glucose 96.8 mg/dL
(Whole Blood)

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 glycaemic 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.

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IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.06	ng/ml	0.7 - 2.04
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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 (Thyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	8.81	Microg/dl	4.2 - 12.0
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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))	1.232	µIU/mL	0.35 - 5.50
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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.


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CLINICAL PATHOLOGY

PHYSICAL EXAMINATION

Colour (Urine/Physical examination)	PALE YELLOW		Yellow to Amber
Volume (Urine/Physical examination)	30		ml
Appearance (Urine)	CLEAR		

CHEMICAL EXAMINATION

pH (Urine)	6.5		4.5 - 8.0
Specific Gravity (Urine/Dip Stick ~ Reagent strip method)	1.015		1.002 - 1.035
Protein (Urine/Dip Stick ~ Reagent strip method)	Negative		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

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Blood (Urine)	Nil		Nil
Urobilinogen (Urine/Dip Stick - Reagent strip method)	NORMAL		Within normal limits

Urine Microscopy Pictures

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

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IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING
(EDTA Blood/Agglutination)

'AB' 'Positive'

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>BIOCHEMISTRY</u>			
BUN / Creatinine Ratio	5.8		
Glucose Fasting (FBS) (Plasma - F/GOD- POD)	78	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

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

Urine sugar, Fasting (Urine - F)	Nil		Nil
Glucose Postprandial (PPBS) (Plasma - PP/GOD - POD)	79	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.

Urine Sugar (PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	4.1	mg/dL	7.0 - 21
Creatinine (Serum/Jaffe Kinetic)	0.7	mg/dL	0.6 - 1.1

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-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Uricase/Peroxidase)	3.4	mg/dL	2.6 - 6.0
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-- End of Report --

Name	MANASA K S	ID	MED111394052
Age & Gender	27Y/F	Visit Date	Nov 26 2022 10:30AM
Ref Doctor	MediWheel		

X – RAY CHEST PA VIEW

LUNGS:

Both lung fields are clear.

Vascular markings are normal.

Tracheal air lucency is normal.

No evidence of abnormal hilar opacities.

Costophrenic angle recesses are normal.

CARDIA:

Cardia is normal shape and configuration.

Diaphragm, Thoracic cage, soft tissues are normal.

IMPRESSION:

- **NO SIGNIFICANT DIAGNOSTIC ABNORMALITY.**



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

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