

GE MAC1200 ST
Female

healthcare REF 1019728LS1
JAYALAKSHMI S, 110726206, CLUMAX DIAGNOSTICS, MYSORE

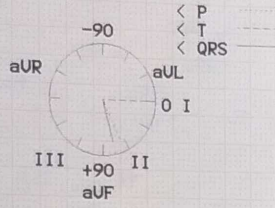
CE LOT D664

HR 63bpm

AGE: 26

Measurement Results:

QRS : 86 ms
QT/QTcB : 382 / 392 ms
PR : 144 ms
P : 116 ms
RR/PP : 950 / 950 ms
P/QRS/T : 65 / 75 / 0 degrees
QTD/QTcBD : 48 / 49 ms
Sokolow : 1.8 mV
NK : 8

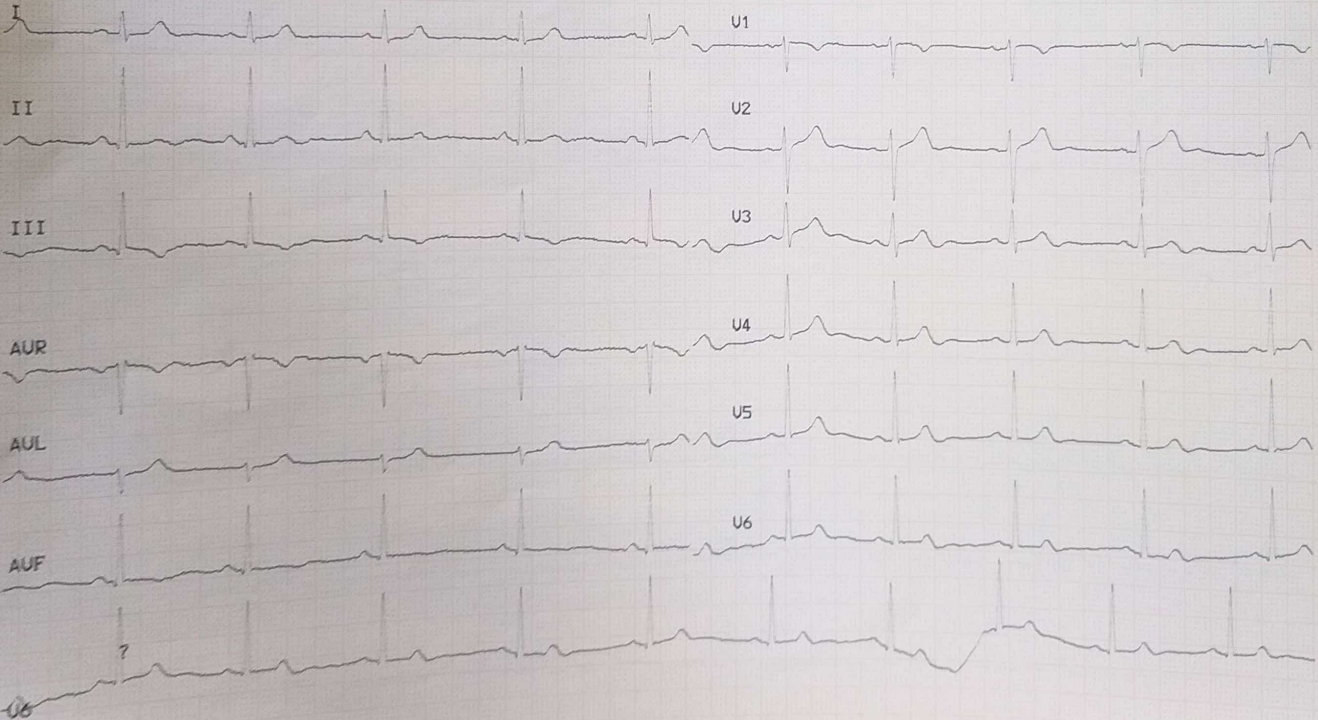


Interpretation:

normal ECG

normal sinus rhythm [Signature]

Unconfirmed report.



22 Nov. 2021 11:22:01

25mm/s 10mm/mV ADS 50Hz 0.08 - 20Hz 6_F1 Automatic U6.2 121 (1)

MYSORE-BALLAL CIRCLE



--- A MEDALL COMPANY ---

Date 22-Nov-2021 9:28 AM

Customer Name : MRS.JAYALAKSHMI S

DOB : 18 Nov 1995

Ref Dr Name : MediWheel

Age : 26Y/FEMALE

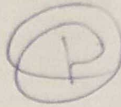
Customer Id : MED110726206

Visit ID : 712139803

Email Id :

Phone No : 6364576943

Corp Name : MediWheel

Address : #1215, ch12 & 1215/a ch12a, KRISHNAMURTHY PURAM, NEW KANTHA RAJ URS
ROAD, MYSORE

7:30 PM

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				
15	LAB	BLOOD GROUP & RH TYPE				

		(Forward Reverse)			
16	LAB	BUN/CREATININE RATIO			
17	OTHERS	physical examination	MYS2591905102651		
18	US	ULTRASOUND ABDOMEN	MYS2591905103462		
19	OTHERS	Treadmill / 2D Echo	MYS2591905127528		
20	OTHERS	EYE CHECKUP	MYS2591905135592		
21	X-RAY	X RAY CHEST	MYS2591905145199		
22	OTHERS	Consultation Physician	MYS2591905148004		
23	ECHO	ELECTROCARDIOGRAM ECG	MYS2591905149333		

Registered By

(T.DIVYA)

Ht - 151 cms

Wt - 63.3 kgs

BP - 110/70 mmHg

Pul - 70/min

Temp - 34

Went - 38

Name	JAYALAKSHMI S	ID	MED110726206
Age & Gender	26Y/F	Visit Date	Nov 22 2021 12:00AM
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:

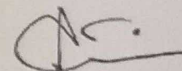
Cardia is normal shape and configuration.

Diaphragm, Thoracic cage, soft tissues are normal.

IMPRESSION:

- NO SIGNIFICANT DIAGNOSTIC ABNORMALITY.

AASV



Dr. Anitha Adarsh
Consultant Radiologist

Name : Mrs. JAYALAKSHMI S
 PID No. : MED110726206
 SID No. : 712139803
 Age / Sex : 26 Year(s) / Female
 Type : OP
 Ref. Dr : MediWheel

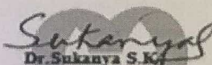
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Investigation	Observed Value	Unit	Biological Reference Interval
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HAEMATOLOGY

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood Spectrophotometry)	13.1	g/dL	12.5 - 16.0
INTERPRETATION: Haemoglobin values vary in Men, Women & Children. Low haemoglobin values may be due to nutritional deficiency, blood loss, renal failure etc. Higher values are often due to dehydration, smoking, high altitudes, hypoxia etc.			
PCV (Packed Cell Volume) / Haematocrit (EDTA Blood Derived)	38.8	%	37 - 47
RBC Count (EDTA Blood Automated Blood cell Counter)	4.34	mill/cu.mm	4.2 - 5.4
MCV (Mean Corpuscular Volume) (EDTA Blood Derived from Impedance)	90.0	fL	78 - 100
MCH (Mean Corpuscular Haemoglobin) (EDTA Blood Derived)	30.2	pg	27 - 32
MCHC (Mean Corpuscular Haemoglobin concentration) (EDTA Blood Derived)	33.7	g/dL	32 - 36
RDW-CV (Derived)	10.66	%	11.5 - 16.0
RDW-SD (Derived)	33.58	fL	39 - 46
Total WBC Count (TC) (EDTA Blood Derived from Impedance)	6000	cells/cu.mm	4000 - 11000
Neutrophils (Blood/Impedance Variation & Flow Cytometry)	56	%	40 - 75
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	32	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	04	%	01 - 06


 Dr. Sukanya S.K.
 MBBS, DCP, DNB
 Consultant Pathologist
 KMC No: 100727

APPROVED BY

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Age / Sex : 26 Year(s) / Female
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Monocytes (Blood/Impedance Variation & Flow Cytometry)	08	%	02 - 08
Basophils (Blood/Impedance Variation & Flow Cytometry)	00	%	00 - 01
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	3.36	10 ³ / μ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	1.92	10 ³ / μ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.24	10 ³ / μ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.48	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)	318	10 ³ / μ l	150 - 450
MPV (Blood/Derived)	08.19	fL	8.0 - 13.3
PCT	0.26	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citrate Blood/Automated ESR analyser)	05	mm/hr	< 20

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Investigation Observed Value Unit Biological Reference Interval

BIOCHEMISTRY

Liver Function Test

Bilirubin(Total) (Serum/Diazotized Sulfanilic Acid)	0.4	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.1	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.30	mg/dL	0.1 - 1.0
Total Protein (Serum/Biuret)	7.5	gm/dl	6.2 - 8.0
Albumin (Serum/Bromocresol green)	4.8	gm/dl	3.0 - 5.0
Globulin (Serum/Derived)	2.70	gm/dL	2.3 - 3.6
A : G Ratio (Serum/Derived)	1.78		1.2 - 2.5

INTERPRETATION: Remark : Electrophoresis is the preferred method

SGOT/AST (Aspartate Aminotransferase) (Serum/IFCC / Kinetic)	21	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/IFCC / Kinetic)	12	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/PNPP / Kinetic)	93	U/L	42 - 98
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	17	U/L	< 38

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Jayalakshmi S

Mrs. JAYALAKSHMI S
MED110726208
No. : 712139803
Age / Sex : 26 Year(s) / Female
Type : OP
Ref. Dr : MediWheel

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Lipid Profile

Cholesterol Total
(Serum/Oxidase / Peroxidase method)

164 mg/dL

Optimal: < 200
Borderline: 200 - 239
High Risk: >= 240

Triglycerides
(Serum/Glycerol phosphate oxidase / peroxidase)

60 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)

64 mg/dL

Optimal(Negative Risk Factor): >= 60
Borderline: 50 - 59
High Risk: < 50

Remark: kindly correlate clinically

LDL Cholesterol
(Serum/Calculated)

88 mg/dL

Optimal: < 100
Above Optimal: 100 - 129
Borderline: 130 - 159
High: 160 - 189
Very High: >= 190

VLDL Cholesterol
(Serum/Calculated)

12 mg/dL

< 30

Non HDL Cholesterol
(Serum/Calculated)

100.0 mg/dL

Optimal: < 130
Above Optimal: 130 - 159
Borderline High: 160 - 189
High: 190 - 219
Very High: >= 220

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The results pertain to sample tested.

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Jayalakshmi S

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<p>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.</p>			
Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	2.6		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)	0.9		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	1.4		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

Sankarajal
Dr. Sankaraya S.K.
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Jayalakshmi S

Mrs. JAYALAKSHMI S
MED110726208
712139803
26 Year(s) / Female
OP
MediWheel

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Investigation	Observed Value	Unit	Biological Reference Interval
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	6.0	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: \geq 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control \geq 8.1 %
Remark: kindly correlate clinically.

Estimated Average Glucose
(Whole Blood) 125.5 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 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.

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KMC No: 190727

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Jayalakshmi S

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MED110726206
No. : 712139803
Age / Sex : 26 Year(s) / Female
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.08	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))	9.57	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))	4.883	μ IU/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 $\leq 0.03 \mu$ IU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

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Investigation	Observed Value	Unit	Biological Reference Interval
IMMUNOHAEMATOLOGY			
BLOOD GROUPING AND Rh TYPING (EDTA Blood Agglutination)	'A' Positive'		
Remark: Test to be confirmed by Gel Method			

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The results pertain to sample tested.

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BIOCHEMISTRY

BUN / Creatinine Ratio	14		
Glucose Fasting (FBS) (Plasma - F/GOD- POD)	90	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)	87	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)	8.1	mg/dL	7.0 - 21
Creatinine (Serum/Jaffe Kinetic)	0.6	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)	2.8	mg/dL	2.6 - 6.0
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Sukanya
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APPROVED BY

-- End of Report --

Customer Name	MRS. JAYALAKSHMI S	Customer ID	MED110726206
Age & Gender	26Y/FEMALE	Visit Date	22/11/2021
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.

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	8.5	1.7
Left Kidney	8.9	1.6

URINARY BLADDER partially distended.

UTERUS is anteverted and has normal shape and size. It has uniform myometrial echopattern.
Endometrial echo is of normal thickness 6.8 mms.
Uterus measures as follows: LS: 5.8cms AP: 3.6cms TS: 4.0cms.

OVARIES

Right ovary is normal size, shape and echotexture, measures: 1.9 x 1.5 cms.

Left ovary not visualised.

POD & adnexa are free.

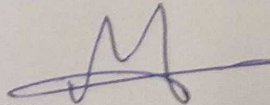
No evidence of ascites.

Impression:

➤ *No Significant Abnormality Detected.*

CONSULTANT RADIOLOGISTS

DR. ANITHA ADARSH
MB/MS

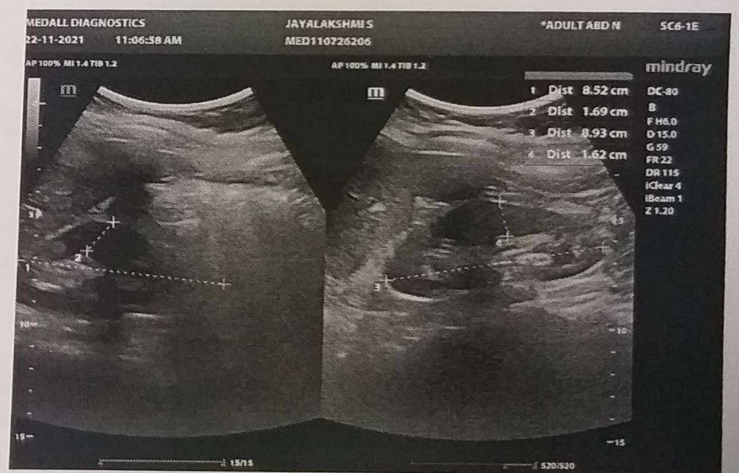
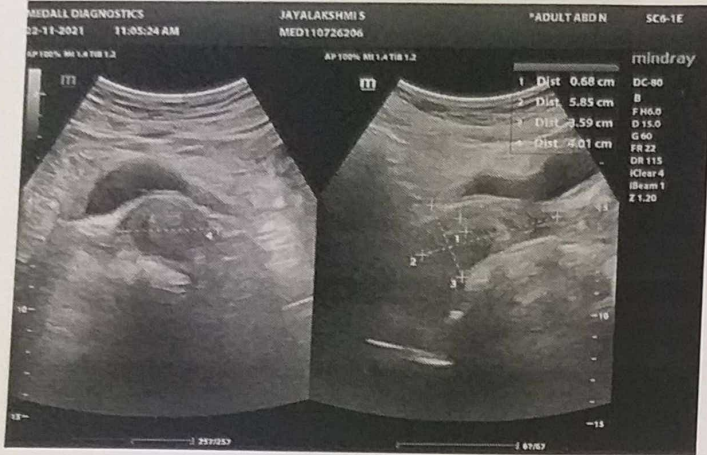


DR. MOHAN B

Medall Diagnostics
Ballal Circle(Ashoka circle) - Mysore



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Age & Gender	26Y/FEMALE	Visit Date	22/11/2021
Ref Doctor	MediWheel		



Customer Name	MRS.JAYALAKSHMI S	Customer ID	MEDI10726206
Age & Gender	26Y/FEMALE	Visit Date	22/11/2021
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2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

AORTA	:	2.4cms
LEFT ATRIUM	:	2.5cms
LEFT VENTRICLE (DIASTOLE)	:	3.9cms
(SYSTOLE)	:	2.2cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.7cms
(SYSTOLE)	:	1.0cms
POSTERIOR WALL (DIASTOLE)	:	0.8cms
(SYSTOLE)	:	1.0cms
EDV	:	61ml
ESV	:	22ml
FRACTIONAL SHORTENING	:	37%
EJECTION FRACTION	:	63%
RVID	:	0.9cms

DOPPLER MEASUREMENTS:

MITRAL VALVE	:	'E' - 0.79 m/s	'A' - 0.29m/s	NO MR
AORTIC VALVE	:	0.88m/s		NO AR
TRICUSPID VALVE	:	'E' - 0.72m/s	'A' - 0.29m/s	NO TR
PULMONARY VALVE	:	0.82m/s		NO PR

Notes: Like other investigations
where radiological reports should
and pathological findings.

R



Customer Name	MRS.JAYALAKSHMI S	Customer ID	MED110726206
Age & Gender	26Y/FEMALE	Visit Date	22/11/2021
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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 prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

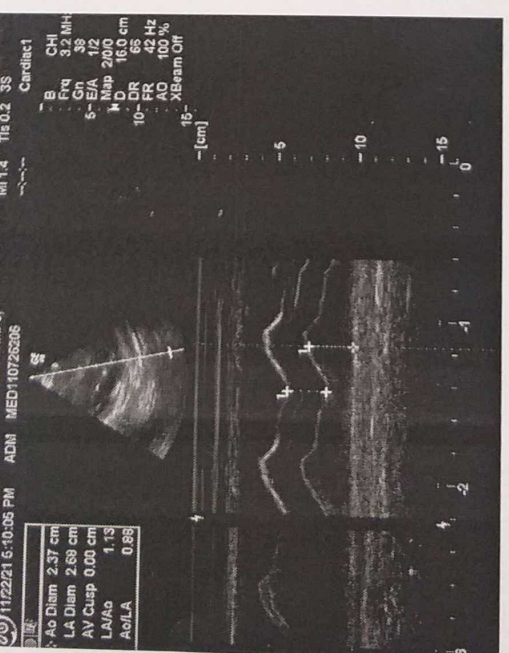
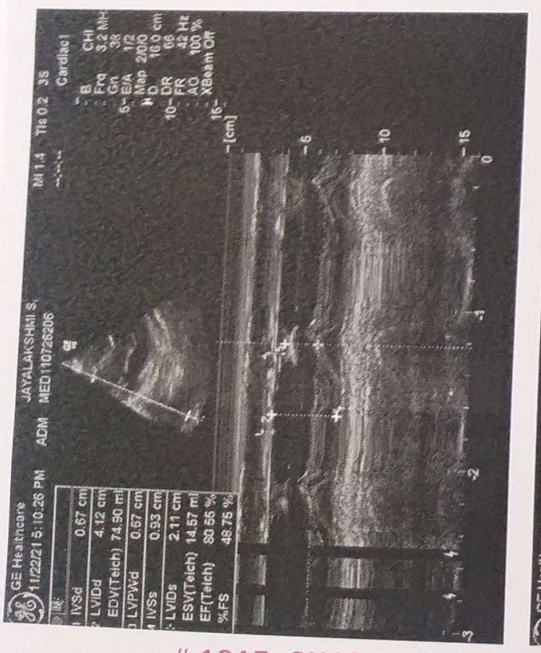
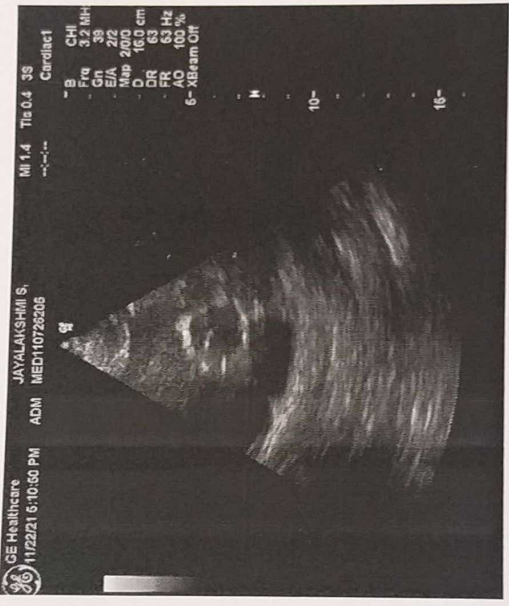
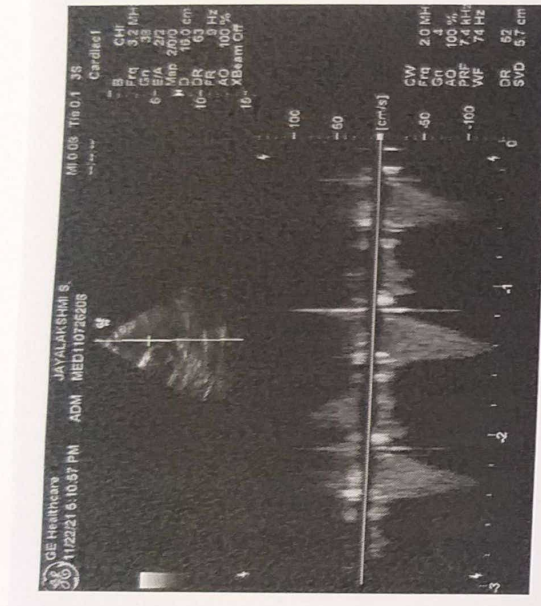
IVS : Intact.

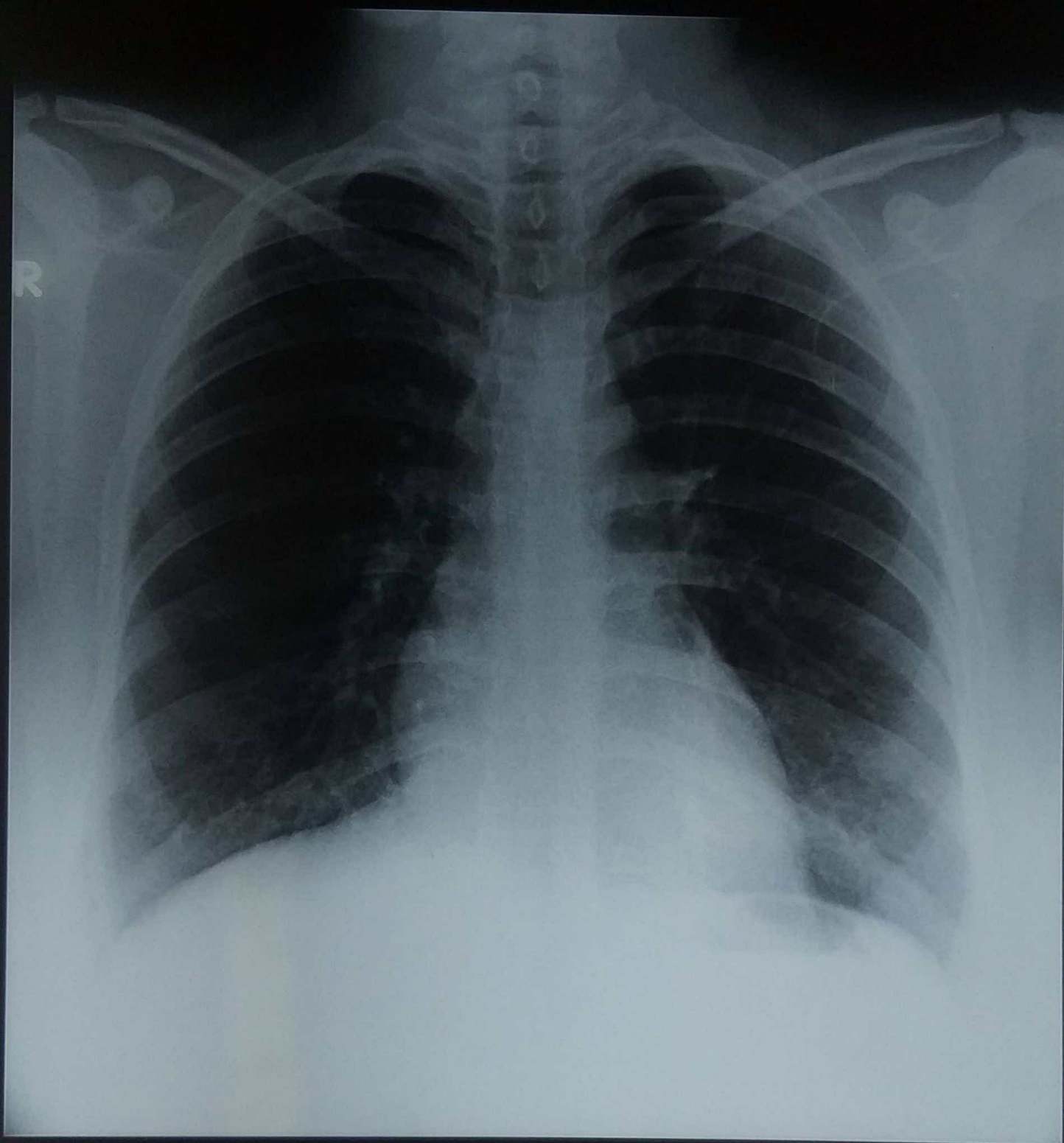
Pericardium : No pericardial effusion.

IMPRESSION:

- > NORMAL SIZED CARDIAC CHAMBERS.
- > NORMAL LV SYSTOLIC FUNCTION. EF:63 %.
- > NO REGIONAL WALL MOTION ABNORMALITIES.
- > NORMAL VALVES.
- > NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.

DR. NIKHIL B
INTERVENTIONAL CARDIOLOGIST
NB/SA





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