




PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : 040-42038139, 27845852
7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited
Certificate No.:MC-2566

TEST REPORT

Name : **MS.SINGAMSHETTY CHENNAMMA [178770]** TID/SID : UMR0985895/ 24339443
 Age / Gender : 29 Years / Female Registered on : 24-Dec-2022 / 10:19 AM
 Ref.By : - Collected on : 24-Dec-2022 / 10:24 AM
 Req.No  Reported on : 24-Dec-2022 / 14:41 PM
 BIL2663885 Reference : Medi Wheel

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Light Yellow		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.020		1.003-1.030
Reaction and pH Method:Double Indicator	5.5		5.0-8.0
Protein Method:Protein Error of pH indicators	Negative		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
Microscopic Examination			
Pus cells (leukocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	2 - 3	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf

Lab Timings (Weekdays) : 7.00 am to 8.30 pm
Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm
& 5.45 pm to 7.45 pm
Sundays & Holidays : 7.30 am to 9.30 am




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DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf
Others Method:Microscopy Of Sediment	Nil		Nil

* Sample processed at Parkline

--- End Of Report ---

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MD PATHOLOGY






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DEPARTMENT OF HEMATOLOGY

Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	O
Rh Typing (D)	POSITIVE -
Method:Agglutination	

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DEPARTMENT OF HEMATOLOGY

Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	9	mm/hour	0-20 mm/hour
Method:Westergren			

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DEPARTMENT OF HEMATOLOGY

Hemogram, EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	13.9	g/dL	12.0-15.0 g/dL
Erythrocyte Count(RBC) Method:Electrical Impedence	5.4	mill /cu.mm	3.8-4.8 mill /cu.mm
PCV/HCT Method:Numeric Integration	42	%	36-46 %
MCV Method:Calculated	77	fL	83-101 fL
MCH Method:Calculated	25.3	pg	27-32 pg
MCHC Method:Calculated	33.0	gm/dL	31.5-34.5 gm/dL
RDW (CV) Method:Calculated	15.2	%	11.6-14.0 %
Total WBC Count Method:Impedence flowcytometry/Light scattering	4.6	10 ³ /μL	4-10 10cap;3/μL 10 ³ /μL
Differential Count			
Neutrophils Method:Flowcytometry/Microscopy	72	%	40-80 %
Lymphocytes Method:Flowcytometry/Microscopy	22	%	20-40 %
Monocytes Method:Flowcytometry/Microscopy	3	%	2-10 %
Eosinophils Method:Flowcytometry/Microscopy	3	%	1-6 %
Basophils Method:Flowcytometry/Microscopy	0	%	0-2 %
Platelet Count Method:Electrical Impedence	260	10 ³ /μL	150-410 10 ³ /μL

Peripheral Smear




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		Reference	: Medi Wheel

DEPARTMENT OF HEMATOLOGY

Hemogram, EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
RBC Method:Microscopy	Normocytic and Normochromic, microcytes +		
WBC Method:Microscopy	Within normal limits. No abnormal cells seen.		
Platelets Method:Microscopy	Discrete and adequate. Normal in morphology.		

* Sample processed at Parkline

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Req.No :  Reported on : 24-Dec-2022 / 14:39 PM
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DEPARTMENT OF CLINICAL CHEMISTRY I

Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen. Method:Calculated	7.8	mg/dL	7-23 mg/dL

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DEPARTMENT OF CLINICAL CHEMISTRY I

Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine. Method:Alkaline Picrate	0.75	mg/dL	0.50-1.20 mg/dL

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Name : **MS.SINGAMSHETTY CHENNAMMA [178770]** TID/SID : UMR0985895/ 24339444F
Age / Gender : 29 Years / Female Registered on : 24-Dec-2022 / 10:19 AM
Ref.By : - Collected on : 24-Dec-2022 / 10:24 AM
Req.No :  Reported on : 24-Dec-2022 / 15:48 PM
Reference : Medi Wheel
BIL2663885

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	81	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : >=126 mg/dL

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 Req.No  Reported on : 24-Dec-2022 / 15:48 PM
 BIL2663885 Reference : Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Post Prandial Method:GOD - PAP	103	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : \geq 200 mg/dL

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DEPARTMENT OF CLINICAL CHEMISTRY I

Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	5.2	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	102	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

Note:Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

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DEPARTMENT OF CLINICAL CHEMISTRY I

Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	165	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	30	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	107	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	28	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	142	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	5.50		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	3.57		

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DEPARTMENT OF CLINICAL CHEMISTRY I

Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	0.72	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.22	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.50	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	24	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	27	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	71	U/L	30-115 U/L
PROTEINS			
Total Protein. Method:Biuret	7.67	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.59	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	3.08	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.49		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	23	U/L	7.0-50.0 U/L

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Ref.By : - Collected on : 24-Dec-2022 / 10:24 AM
Req.No :  Reported on : 24-Dec-2022 / 13:46 PM
Reference : Medi Wheel
BIL2663885

DEPARTMENT OF CLINICAL CHEMISTRY I

Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.40	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	13.0	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	2.39	µIU/mL	0.465-4.68 µIU/mL

Note: Change in method and reference range
NOTE:

TSH - Reference ranges during pregnancy:*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3rd Trimester : 0.30 - 3.00

*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors(secondary).

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DEPARTMENT OF CLINICAL CHEMISTRY I

Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid. Method:Uricase	4.34	mg/dL	1.9-7.5 mg/dL

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DEPARTMENT OF HEALTH CHECKUP

Glucose Urine Fasting

--

Urine Glucose Fasting	Nil	NIL
Method:Reagent strip/Reflectance photometry		

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TEST REPORT

Name : **MS.SINGAMSHETTY CHENNAMMA [178770]** TID/SID : UMR0985895/ 24340631
Age / Gender : 29 Years / Female Registered on : 24-Dec-2022 / 10:19 AM
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DEPARTMENT OF HEALTH CHECKUP

Glucose Urine Post Prandial

--

Urine Glucose Post Prandial Nil NIL
Method:Reagent strip/Reflectance photometry

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MEDICAL EXAMINATION REPORT

Name	MS: Singamshetty Chennamma		Date:	24/12/22	
Company	c/o. mediowheel		Reg. No.:	2663885	
Contact No.	9989459662		Sex	<input type="checkbox"/> F	Age: <input type="checkbox"/> 29
Type	Pre-Emp		Emp. No.:	178770	
	Overseas		Height	164 cm	
	Annual	<input checked="" type="checkbox"/>	Weight	54 kg	
Remarks	<p>- Both chival and lab parameters within (N) limits.</p>				
Fitness Status	Medically Fit / Unfit		<p>DR. PRIYANKA SANNIDHI MBBS Regn No: 11351 Physician's Signature</p>		

Distant Vision : Near Vision :

Right Eye: 6/6

With glasses / Without glasses

left Eye : 6/6

with glasses / without glasses

Right Eye: N6

With glasses / Without glasses

left Eye : N6

with glasses / without glasses

Colour Vision : BE normal

Ophthalmologist's Signature

Right Ear

Hearing :

Rinee's Test ;

Weber Test :

Discharge :

Left Ear

N

right ear.
⊕ & Surgery performed (2020 June). Com.

SYSTEMIC EXAMINATION

Pulse : 80 bpm

B.P. : 110/70 mmHg

Lungs : A. Shape of Chest Sp. symmetrical
B. Breath Sounds Sp. clear ⊕
C. Adventitious Sounds NO

Heart : A. Sounds h s & ⊕
B. Murmurs NO murmurs

Abdomen : A. Liver NPD
B. Spleen NPD
C. Piles NO
D. Any Lump NO

Nervous System

A. Higher Function :
B. Cranial Nerves :
C. Sensory System :
D. Motor System :
E. Jerks :
N

General : A. Hernia
B. Hydrocele
C. Varicocele
NPD

CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

Date :

S. Chennamma
Signature

Place :

Note : General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.



PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003. Tel : +91 40-2784 5852, 6649 1787, 7995421787, 7093445852, Fax : +91 40 2784 7864 Email parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited
Certificate No.MC-2566

ENT CONSULTATION

S.No. 2663885 Emp.No. 178770 Date 24/12/22
 Name Mrs: Singamshetty Age 29 Yrs Sex M/F ✓
 Chennai

EARS :

Right

Left

EAC

: patent no Cerumen

- @

TM

: Intact, pearly white

- @ -

TFT

: Rinne's +ve

Rinne's +ve

Weber's - central

NOSE

: Septum @. Bil. Symmetry @. p.w.s. @. no tenderness

THROAT

: Oropharynx @. Bil. Vocal cords @. moving

NECK

: @

Adequately b.l.

IMPRESSION:

Ear N. Clinically NAD.

Dr. D. Hari Krishna Reddy
MS (ENT)
Head & Neck Surgeon
Reg. No: 88379



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TEST REPORT

Name	: Ms . SINGAMSHETTY CHENNAMMA [178770	TID	: UMR0985895
Age / Gender	: 29 Years / Female	Registered on	: 24-Dec-2022 10:19 AM
Ref.By	:	Reported On	: 24-Dec-2022 11:07 AM
Req. No	: BIL2663885	Reference	: Medi Wheel

DEPARTMENT OF ULTRASOUND Ultrasound Whole Abdomen

LIVER : Normal in size and echotexture. No focal lesions.

No IHBD /CBD dilatation. Portal vein is normal.

SPLEEN : Normal in size and echotexture. No focal lesion seen.

GALL BLADDER : Well distended. No sludge / gall stones / sol.
Gall bladder - Wall thickness is normal.
No pericholecystic oedema.

PANCREAS : Normal in size and echotexture.No calcification / sol.
Pancreatic duct is normal. No peripancreatic fluid collection.

RIGHT KIDNEY : 10.73 x 3.71 cms
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

LEFT KIDNEY : 11.56 x 3.74 cms
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

URINARY BLADDER : Well distended.Normal in contour.
Wall thickness is normal. No calculus / sol.

UTERUS : Anteverted measuring 7.36 x 2.75 x 4.45 cms - Normal in size and echotexture.
No space occupying lesion is seen.
Cervix is normal in size and echopattern.

ENDOMETRIUM : Normal.

OVARIES : Right ovary : 3.05 x 1.46 cms Left ovary : 2.77 x 1.60 cms
Both ovaries normal in size and echotexture.
No adnexal mass seen.
No fluid in POD.

IMPRESSION : Normal Study.

12/1
Dr. D.J. MOHAN
MD DMRD
(Reg No. 8995)
Consultant Radiologist

77996896970

Name : S. Chennamma Sex : F Age : 29

Chief complaint:- General check-up.

Date : 24/12/22

OPD No : 1096

Oral Examination:-

* FPD int

765 | ~~67~~

* Filling int

| 67

* calculus stainst
 Adv. oral prophylaxis.


Rx:-

stolin Gum paint

Brush twice daily.

Gargle tw. After Intake of food.

water floss.


 MULTI SPECIALITY DENTAL CLINIC
Smile Confidentially... Not Confidentially...
 B.D.S, IMPLANTOLOGIST (USA)
 1-3-1, Rajamudaliar Street, Kalasiguda,
 Secunderabad, Cell : 8977910590,

Sowmya

PATIENT SUMMARY REPORT

PARKLINE DIAGNOSTICS PVT.LTD

ID : 2663885
NAME : MS.SINGAMSHETTY CHENNAMMA
AGE / SEX : 29 / FEMALE

HEIGHT (cm) : 164
WEIGHT (kg) : 54
PROTOCOL : BRUCE

REF. BY : MEDIWHEEL
DONE BY : DR.SAMEER G VANKAR
TECHNICIAN : G.M.SURESH

CASE HISTORY

MEDICATION

OBJECT OF TEST	Routine Check Up.
RISK FACTOR	None.
ACTIVITY	Very Active.
OTHER INVESTIGATION	E C G
REASON FOR TERMINATION	THR ACHIEVED
EXERCISE TOLERANCE	Good (> 10 METS).
EXERCISE INDUCED ARRHYTHMIAS	No.
HAEMO RESPONSE	Normal.
CHRONO RESPONSE	Normal.
FINAL IMPRESSION	
EXTRA COMMENTS	

Test Negative

[Signature]
DR. PRASHANT PHADTARE
DM CARDIOLOGY
MMC - 1848

Confirmed By _____

Signature



PARKLINE DIAGNOSTICS PVT. LTD.

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7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com

TEST REPORT

Name : Ms . SINGAMSHETTY CHENNAMMA [178770]
Age / Gender : 29 Years / Female
Ref.By :
Req. No : BIL2663885

TID : UMR0985895
Registered on : 24-Dec-2022 10:19 AM
Reported On : 24-Dec-2022 01:42 PM
Reference : Medi Wheel

X-RAY CHEST PA VIEW

Lung fields appears clear.

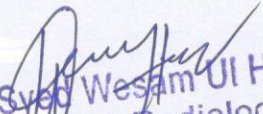
Cardia appears normal.

Hila appears normal.

C P angles appears clear.

Bony cage appears normal.

Soft tissues appears normal.


Dr. Syed Wesam Ul Haq
Consultant Radiologist
Regd.No. 68775

ID: 2005885

24-12-2022 12:44:53 PM

CARDIART

MRS. SINGAMSHETTY CHENNAMMA

Female 29Years

HR : 91 bpm
P : 92 ms
PR : 130 ms
QRS : 84 ms
QT/QTc : 352/435 ms
P/QRS/T : 69/58/43 °
RV5/SV1 : 1.156/0.793 mV

Diagnosis Information:
Sinus Rhythm
Poor R Wave Progression(V3)

Wml

[Signature]

DR. PRASHANT PHADTARE
DM CARDIOLOGIST
MMC - 1848

Report Confirmed by: