NAME	MR. NATARAJ S	PATIENT ID	147170
ACCESSION NO	156953	AGE/GENDER	43Y/MALE
REFERRED BY	MEDIWHEEL	DATE	15-NOV-2023

VISUAL ACUITY (VA)

WITH BEST CORRECTION	
DISTANCE VISION (With glasses)	
Right	09/11
Left	08/11
Both	10/11
NEAR VISION (With glasses)	
Both	N6

COLOUR VISION (With glasses)	
BOTH	Normal
DISTANCE VISION (Without glasses)	
Right	6/10
Left	6 /10
Both	6/10
NEAR VISION (Without glasses)	
Both	N6

COLOUR VISION (Without glasses)	
BOTH	Normal
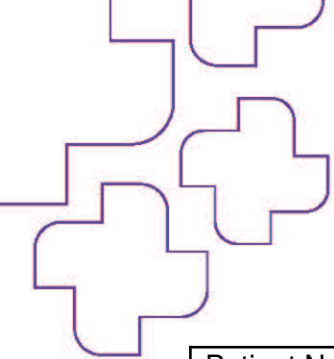
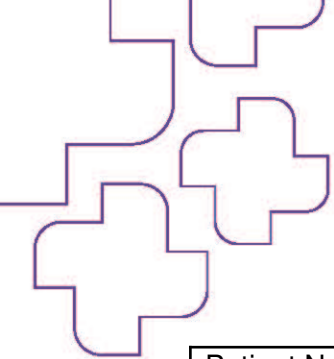| Patient Name	MR. NATARAJ S	Age	43Yr
Patient ID	156953	Sex	Male
Referral Dr	MEDIWHEEL	Study Date	15 Nov 2023

X-RAY - CHEST PA VIEW

OBSERVATION:

The trachea is central.

The mediastinal and cardiac silhoutte are normal.

Cardiothoracic ratio is normal.

Cardiophrenic and costophrenic angles are normal.

Both hila are normal.

Lung zones are clear.

Bones of the thoracic cage are normal.

Soft tissues of the chest wall are normal.

IMPRESSION:

No significant abnormality seen.

Dr. Lokesh Babu., MD., (RD)
Consultant Radiologist

Patient Name	MR.NATARAJ S		Age	43Yr
Patient ID	147170		Sex	Male
Referral Dr	MEDIWHEEL		Study Date	15 Nov 2023

USG REPORT - ABDOMEN AND PELVIS

LIVER:

Is increased in size ~ 15.7 cm and shows increased echo texture.

No obvious focal lesion seen. No intra – Hepatic biliary radical dilatation seen.

GALL BLADDER:

Is adequately distended. No calculus or internal echoes are seen. Wall thickness is normal.

PANCREAS:

Appears normal in size and it shows uniform echo texture.

SPLEEN:

Is normal in size ~ 9.9 cm and shows uniform echogenicity.

RIGHT KIDNEY:

Right kidney measures ~ 9.6 x 3.8 cms.

The shape, size and contour of the right kidney appear normal.

Cortico medullary differentiation is within normal. No evidence of pelvicalyceal dilatation.

No calculi seen.

LEFT KIDNEY:

Left kidney measures ~10.8 x 5.2 cms.

The shape, size and contour of the left kidney appear normal.

Cortico medullary differentiation is within normal. No evidence of pelvicalyceal dilatation.
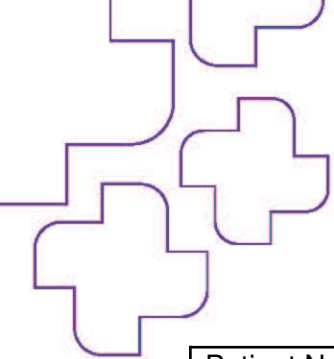
No calculi seen.

URINARY BLADDER:

Is normal contour. No intra luminal echoes are seen.

PROSTATE:

Prostate appears normal, Measures ~ 2.9 x 3.4 x 2.7cms (Vol –14.6 cc).

RIGHT ILIAC FOSSA:

No focal fluid collections seen.

No evidence of hernia seen in anterior abdominal wall.

IMPRESSION:

- **Hepatomegaly with grade II fatty liver.**
- **No significant abnormality seen in the present study.**

    - Suggested clinical correlation.

Dr. Abinaya., MD., (RD)
Consultant Radiologist

tricog

Age / Gender: 43/Male

Patient ID: 0000147170

Patient Name: MR. NATARAJ S

Date and Time: 15th Nov 23 10:02 AM

I	aVR	V1	V4
II	aVL	V2	V5
III	aVF	V3	V6
II			

25.0 mm/s 10.0 mm/mV   0-20Hz, 50Hz

tricog
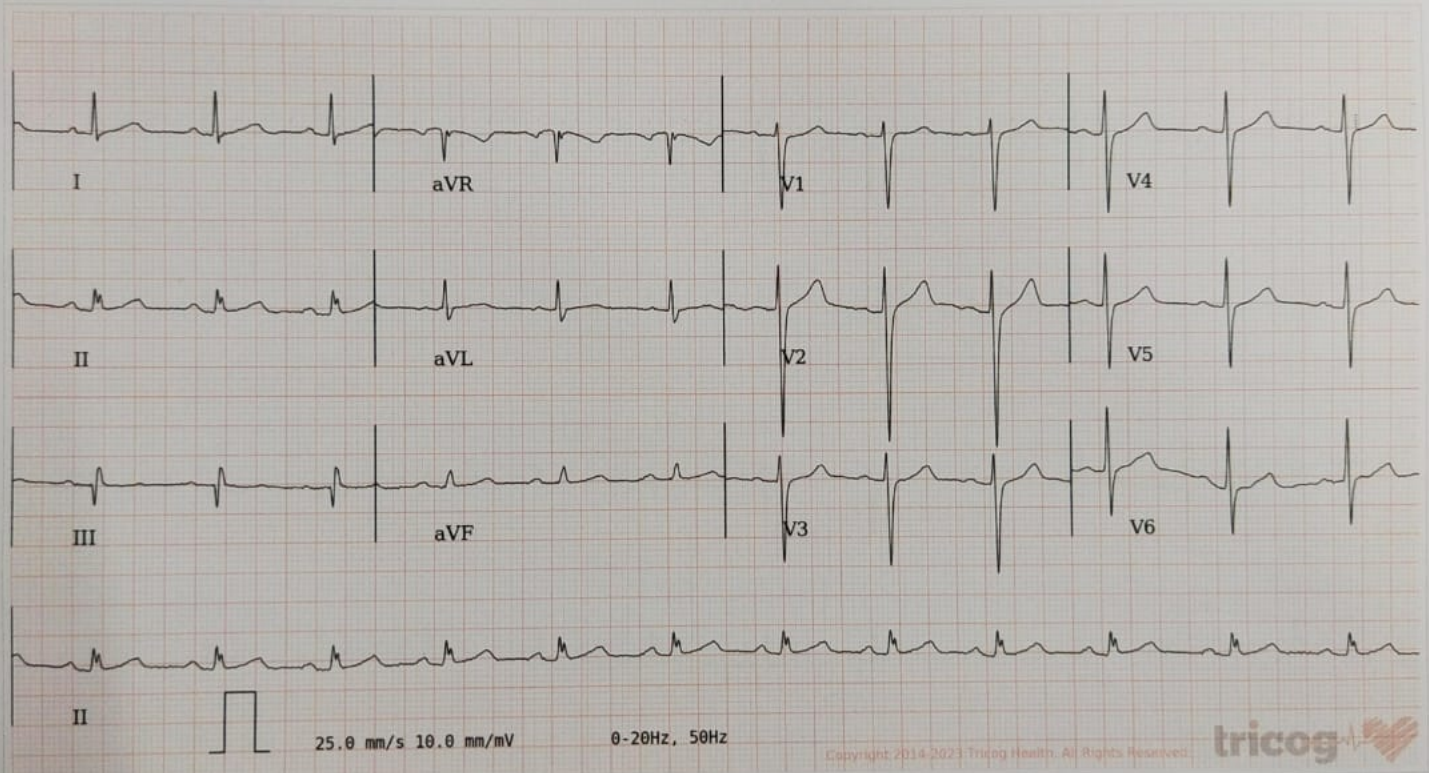
| AR: 77bpm | VR: 77bpm | QRSD: 98ms | QT: 396ms | QTcB: 448ms | PRI: 174ms | P-R-T: 42° 27° 34° |

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

NAME	MR. NATARAJ S	PATIENT ID	147170
ACCESSION NO	156953	AGE/SEX	43Y/MALE
REFERRED BY	MEDIWHEEL	DATE	15-NOV-2023

ECHOCARDIOGRAPHIC EVALUATION
MEASUREMENTS: ACOUSTIC WINDOW: OPTIMAL

2D/ M MODE PARAMETERS:

Parameters	Patient Values	Normal Adult Value
LA	3.15	(2.0 – 4.0 cm)
AO	3.11	(2.0 – 4.0 cm)
LVIDD	4.57	(3.5 – 5.5 cm)
LVIDS	3.05	(2.5 – 4.3 cm)
IVSd	1.08	(0.6 – 1.2 cm)
LVPWd	0.89	(0.6 – 1.2 cm)
EF	62	(50% - 70%)

IMPRESSION:

- No regional wall motion abnormality at rest.
- Normal valves and chambers.
- Grade I Diastolic dysfunction.
- No pulmonary hypertension.
- No pericardial effusion.
- Normal LV systolic function.

Dr. KARTHIK C.S.MD.,PGD(CARDIOLOGY,UKR)
CONSULTANT CARDIOLOGIST

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Collection Time : Nov 15, 2023, 11:21 a.m.

Reporting Time : Nov 15, 2023, 01:52 p.m.

Sample ID :

001431923P

Test Description	Value(s)	Unit(s)	Reference Range
COMPLETE BLOOD COUNT (CBC)			
Hemoglobin (Hb)	14.5	gm/dL	13.5 - 18.0
Erythrocyte (RBC) Count	5.78	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	42.8	%	42 - 52
Mean Cell Volume (MCV)	**74.05**	fL	78 - 100
Mean Cell Haemoglobin (MCH)	**25.09**	pg	27 - 31
Mean Corpuscular Hb Concn. (MCHC)	33.88	g/dL	32 - 36
Red Cell Distribution Width (RDW)	12.8	%	11.5 - 14.0
Total Leucocytes (WBC) Count	4600	cell/cu.mm	4000-10000
Neutrophils	54	%	40 - 80
Lymphocytes	36	%	20 - 40
Monocytes	8	%	2 - 10
Eosinophils	2	%	1 - 6
Basophils	0	%	1-2
Absolute Neutrophil Count	2484	/c.mm	2000 - 7000
Absolute Lymphocyte Count	1656	/c.mm	1000 - 3000
Absolute Monocyte Count	368	/c.mm	200 - 1000
Absolute Eosinophil Count	92	/c.mm	20 - 500
Absolute Basophils Count	0	/c.mm	20 - 100
Platelet Count	271	10^3/ul	150 - 450
Mean Platelet Volume (MPV)	10.2	fL	7.2 - 11.7
PCT	0.28	%	0.2 - 0.5
PDW	12.5	%	9.0 - 17.0
ESR	**55.0**	mm/hr	13.5 - 18.0

DR.K.MURALEKAARTHIC
MD(Patho)

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URINE COMPLETE ANALYSIS,

Physical Examination

Quantity	30	ml	-
Colour	Pale Yellow		Pale yellow/Yellow
Appearance	Cloudy		Clear
Specific Gravity	1.020		1.005-1.025
pH	5.0		5.0 - 8.0
Deposit	**Present**		Absent

Chemical Examination

Protein	**Present (+)**		Absent
Sugar	**Present (+++)**		Absent
Ketones	Absent		Absent
Bile Salt	Absent		Absent
Bile Pigment	Absent		Absent
Urobilinogen	Normal		Normal

Microscopic Examination (/hpf)

Pus Cell	4-5		Upto 5
Epithelial Cells	2-4		Upto 5
Red Blood Cells	Absent		Absent
Casts	Absent		Absent
Crystals	Absent		Absent
Amorphous Deposit	Absent		Absent
Yeast Cells	Absent		Absent
Bacteria	**Present**		Absent
Other findings	Not seen		Not seen

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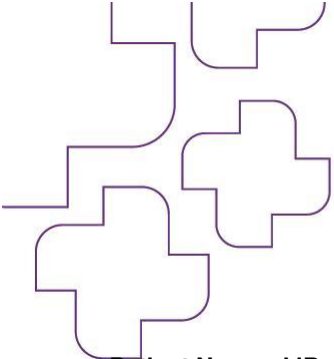
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Test Description	Value(s)	Unit(s)	Reference Range

BLOOD GROUP & RH TYPING

Blood Group (ABO typing)	"O"		
Method : Manual-Hemagglutination			
RhD Factor (Rh Typing)	Positive		
Method : Manual hemagglutination			

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Test Description	Value(s)	Unit(s)	Reference Range

Glycosylated HbA1c

HbA1c (GLYCOSYLATED HEMOGLOBIN)	11.8	%	
Method : (HPLC, NGSP certified)			
Estimated Average Glucose :	291.96	mg/dL	-

Interpretation

As per American Diabetes Association (ADA)	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	<5.7
At risk (Prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemic control	Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5

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Test Description	Value(s)	Unit(s)	Reference Range
THYROID PROFILE TEST - TOTAL			
T3-Total	91.0	ng/dL	60 - 200
T4-Total	10.3	ug/dL	4.52 - 12.8
TSH-Ultrasensitive	1.30	uIU/mL	0.32 - 5.5
Method : CLIA			

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Test Description	Value(s)	Unit(s)	Reference Range
LIPID PROFILE			
Cholesterol-Total	**241**	mg/dL	Desirable level | < 200
Method : Spectrophotometry			Borderline High | 200-239
			High | >or = 240
Triglycerides	**352**	mg/dL	Normal: < 150
Method : Serum, Enzymatic, endpoint			Borderline High: 150-199
			High: 200-499
			Very High: >= 500
HDL Cholesterol	45.0	mg/dL	Normal: > 40
Method : Serum, Direct measure-PEG			Major Risk for Heart: < 40
LDL Cholesterol	125.60	mg/dL	Optimal < 100
Method : Enzymatic selective protection			Near / Above Optimal 100-129
			Borderline High 130-159
			High 160-189
			Very High >or = 190
VLDL Cholesterol	**70.40**	mg/dL	6 - 38
Method : Serum, Enzymatic			
CHOL/HDL Ratio	**5.36**		3.5 - 5.0
Method : Serum, Enzymatic			
LDL/HDL Ratio	2.79		2.5 - 3.5
Method : Serum, Enzymatic			

Note:

8-10 hours fasting sample is required.

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Test Description	Value(s)	Unit(s)	Reference Range
RENAL PROFILE			
Urea	26.0	mg/dL	19-42
Method : Uricase			
Blood Urea Nitrogen-BUN	12.13	mg/dL	9-20
Method : Serum, Urease			
Creatinine	0.92	mg/dL	0.66-1.25
Method : Serum, Jaffe			
Uric Acid	**3.1**	mg/dL	3.5-8.5
Method : Serum, Uricase			

Remark:

In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.

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Test Description	Value(s)	Unit(s)	Reference Range
LIVER FUNCTION TEST			
Total Protein	7.5	g/dL	6.3-8.2
Method : Serum, Biuret, reagent blank end point			
Albumin	4.2	g/dL	3.5-5.0
Method : Serum, Bromocresol green			
Globulin	3.30	g/dL	1.8 - 3.6
Method : Serum, EIA			
A/G Ratio	1.27		1.2 - 2.2
Method : Serum, EIA			
Bilirubin - Total	0.7	mg/dL	0.3-1.2
Method : Serum, Jendrassik Grof			
Bilirubin - Direct	0.2	mg/dL	< 0.2
Method : Serum, Diazotization			
Bilirubin - Indirect	0.50	mg/dL	0.1 - 1.0
Method : Serum, Calculated			
SGOT	20	U/L	17-59
Method : Serum, UV with P5P, IFCC 37 degree			
SGPT	34	U/L	21-72
Method : Serum, UV with P5P, IFCC 37 degree			
Alkaline Phosphatase	105	U/L	30 - 120
Method : PNPP-AMP Buffer/Kinetic			
GGT-Gamma Glutamyl Transpeptidae	47	U/L	< 55
Method : Serum, G-glutamyl-carboxy-nitoanilide			

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Test Description	Value(s)	Unit(s)	Reference Range

PSA-Total (Prostate-specific antigen-Total)

PSA Profile *

PSA (Prostate Specific Antigen)-Total	0.34	ng/mL	0 - 4.0

Method : Serum, CLIA

Interpretation:

1. Increased levels are noted in Prostate cancer, Bengin prostatic hypertrophy, Prostatitis

PSA (Prostate-Specificantigen)-Free *	-	ng/mL	0.0 - 0.5

Method : Serum, CLIA

Interpretation & Remarks:

• Normal results do not eliminate the possibility of prostate cancer.

• Values obtained with different assay methods or kits may be different and cannot be used interchangeably.

• Tumor markers are not specific for malignancy. Test results cannot be interpreted as absolute evidence for the presence or absence of malignant disease

• Specimens drawn from patients undergoing prostate manipulation, especially needle biopsy and transurethral resection, may show erroneously high prostatic-specific antigen (PSA) results. Care should be taken that specimens are drawn before these procedures are performed.

• The percentage of free PSA can be used to estimate how likely it is that a biopsy will show cancer.

• If the percentage of free PSA is higher than 25%, the likelihood of prostate cancer is about 8%.

• If the percentage of free PSA is less than 10%, then the likelihood of prostate cancer rises to 56%.

Free PSA / Total PSA %	-		-

Method : Serum

Interpretation

• When total prostate-specific antigen (PSA) concentration is <2.0 ng/mL, the probability of prostate cancer in asymptomatic men is low, further testing and free PSA may provide little additional information. When total PSA concentration is >10.0 ng/mL, the probability of cancer is high and prostate biopsy is generally recommended.

• The total PSA range of 4.0 to 10.0 ng/mL has been described as a diagnostic "gray zone," in which the free:total PSA ratio helps to determine the relative risk of prostate cancer (see table below). Therefore, some urologists recommend using the free:total ratio

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Test Description	Value(s)	Unit(s)	Reference Range

to help select which men should undergo biopsy. However even a negative result of prostate biopsy does not rule-out prostate cancer. Up to 20% of men with negative biopsy results have subsequently been found to have cancer.

Based on free:total PSA ratio: the percent probability of finding prostate cancer on a needle biopsy by age in years:

Free:total PSA ratio	50-59 years	60-69 years	> or =70 years
< or =0.10	49.2%	57.5%	64.5%
0.11-0.18	26.9%	33.9%	40.8%
0.19-0.25	18.3%	23.9%	29.7%
>0.25	9.1%	12.2%	15.8%

Cautions

• Normal results do not eliminate the possibility of prostate cancer.

• Values obtained with different assay methods or kits may be different and cannot be used interchangeably

• Tumor markers are not specific for malignancy. Test results cannot be interpreted as absolute evidence for the presence or absence of malignant disease.
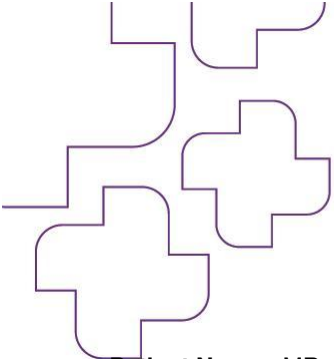
Interfering factors :

• Prostatic massage

• Proctoscopy

• Prostatic biopsy

• Prostate cancer patients receiving treatment with antiandrogens and luteinizing hormone-releasing factor agonists may exhibit markedly decreased levels of PSA. Also, men treated for benign prostatic hyperplasia with inhibitors of 5-alpha-reductase (finasteride) may demonstrate a significant reduction in PSA levels compared to values before treatment. Care should be taken in interpreting values for these individuals.

• In patients receiving therapy with high biotin doses (ie, >5 mg/day), no sample should be taken until at least 8 hours after the last biotin administration.

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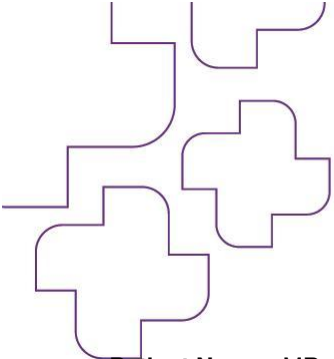
Sample ID :

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Test Description	Value(s)	Unit(s)	Reference Range
GLUCOSE (F)			
Glucose fasting	**312.0**	mg/dL	70 - 120
Method : GOD-POD			

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Test Description	Value(s)	Unit(s)	Reference Range
GLUCOSE (PP)			
Blood Glucose-Post Prandial	**426.0**	mg/dL	80 - 140
Method : GOD-POD			

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