

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SURESH KUMAR	Order No : 1000099436
UHID : UHJA24006709	Registered On : 17/10/2024 08:40:45 AM
Age/Sex : 47/Years Male	Collected On : 17/10/2024 09:07:25 AM
Ward / Bed No :	Reported On : 17/10/2024 12:44:40 PM
Reference : Dr. Ashmitha Padma	Bill No : OPBJA240009205
Station : Corp	Mobile No : 9916198667
Payer Name : Mediwheel	Report Status : Final Report

Test Name	Result	Unit	Bio. Ref. Interval
-----------	--------	------	--------------------

BIOCHEMISTRY

FASTING GLUCOSE (Method: Hexokinase)	92	mg/dL	ADA Guidelines < 100 mg/dl - Normal 100 to 125 mg/dl - Prediabetes ≥ 126 mg/dl - Diabetes
--	----	-------	--

POST PRANDIAL GLUCOSE (Method: Hexokinase)	138	mg/dL	70-140
--	-----	-------	--------

GLYCOSYLATED HAEMOGLOBIN (HBA1C) Sample: Whole blood (EDTA)

HBA1C (Method: HPLC)	5.5	%	ADA Guidelines < 5.7% - Normal 5.7 to 6.4% - Prediabetes ≥ 6.5% - Diabetes
-------------------------	-----	---	---

Estimated Average Glucose (eAG) (Method: Calculated)	111	mg/dL	
---	-----	-------	--

THYROID PROFILE (TOTAL T3, TOTAL T4 & TSH) Sample: Serum

TOTAL T3 (Method:CLIA)	1.38	ng/mL	0.87-1.78
---------------------------	------	-------	-----------

TOTAL T4 (Method:CLIA)	10.81	µg/dL	5.1-14.1
---------------------------	-------	-------	----------

THYROID STIMULATING HORMONE (TSH) (Method:CLIA: Ultra-sensitive)	3.03	µIU/mL	0.34-5.60
---	------	--------	-----------

LIPID PROFILE Sample: Serum

TOTAL CHOLESTEROL (Method:CHOD-POD)	182	mg/dL	ATP III Guidelines < 200 - Desirable 200-239 - Borderline high ≥ 240 - High
--	-----	-------	--

TRIGLYCERIDES (Method:Enzymatic GPO-POD)	118	mg/dL	< 150 - Normal 150-199 - Borderline High 200-499 - High ≥ 500 - Very High
---	-----	-------	--

HDL CHOLESTEROL (Method:ENZYMATIC METHOD)	33.8	mg/dL	< 40 - Low ≥ 60 - High
--	------	-------	---------------------------

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SURESH KUMAR	Order No : 1000099436
UHID : UHJA24006709	Registered On : 17/10/2024 08:40:45 AM
Age/Sex : 47/Years Male	Collected On : 17/10/2024 09:07:25 AM
Ward / Bed No :	Reported On : 17/10/2024 12:44:40 PM
Reference : Dr. Ashmitha Padma	Bill No : OPBJA240009205
Station : Corp	Mobile No : 9916198667
Payer Name : Mediwheel	Report Status : Final Report

Test Name	Result	Unit	Bio. Ref. Interval
LDL CHOLESTEROL (Method: Calculated)	124.60	mg/dL	<100 - Optimal 100-129 - Near or above optimal 130-159 - Borderline high 160-189 - High ≥190 - Very high
VLDL CHOLESTEROL (Method: Calculated)	23.60	mg/dL	< 30
TOTAL CHOLESTEROL : HDL RATIO (Method: Calculated)	5.38		Low Risk: 3.3 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0
LDL/HDL CHOLESTEROL RATIO (Method: Calculated)	3.69		< 2.5 Optimal
NON HDL CHOLESTEROL (Method: Calculated)	148.20	mg/dL	< 130
URIC ACID (Method:Uricase - POD(Enzymatic))	5.0	mg/dL	3.5-7.2
BUN/CREATININE RATIO			Sample: Serum
BLOOD UREA NITROGEN(BUN) (Method:Urease GLDH - Kinetic)	9	mg/dL	7.93-20.07
CREATININE (Method:Modified Jaffe, Kinetic)	1.02	mg/dL	0.9-1.3
BUN/CRE-RATIO (Method: Calculated)	8.82		12-20 : 1
LIVER FUNCTION TEST			Sample: Serum
TOTAL BILIRUBIN (Method:Dichlorophenyl Diazotization)	0.66	mg/dL	0.3-1.2
DIRECT BILIRUBIN (Method:Dichlorophenyl Diazotization)	0.13	mg/dL	0.0-0.2
INDIRECT BILIRUBIN (Method: Calculated)	0.53	mg/dL	0.2-1.0
TOTAL PROTEIN (Method:BIURET)	6.9	g/dL	6.6-8.3

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SURESH KUMAR	Order No : 1000099436
UHID : UHJA24006709	Registered On : 17/10/2024 08:40:45 AM
Age/Sex : 47/Years Male	Collected On : 17/10/2024 09:07:25 AM
Ward / Bed No :	Reported On : 17/10/2024 12:44:40 PM
Reference : Dr. Ashmitha Padma	Bill No : OPBJA240009205
Station : Corp	Mobile No : 9916198667
Payer Name : Mediwheel	Report Status : Final Report

Test Name	Result	Unit	Bio. Ref. Interval
ALBUMIN (Method:BCG)	4.18	g/dL	3.5-5.2
GLOBULIN (Method: Calculated)	2.72	g/dL	2.3-3.5
AG RATIO (Method: Calculated)	1.54		2:1
SERUM SGOT (Method:IFCC without P5P)	24	U/L	< 50
SERUM SGPT (Method:IFCC without P5P)	27	U/L	< 50
ALKALINE PHOSPHATASE, SERUM (Method:PNPP AMP Buffer)	68	U/L	50-116
GGT (Method:IFCC)	17	U/L	< 55
PROSTATE SPECIFIC ANTIGEN (PSA) (Method:CLIA)	1.07	ng/mL	< 4.0
<u>Interpretation Notes</u>			
Serum PSA concentrations should not be interpreted as absolute evidence for the presence or absence of malignant disease nor should serum PSA be used alone as a screening test for malignant disease. For diagnostic purposes, the results obtained by immunometric assay should always be used in combination with the clinical examinations, patient medical history and other findings. The concentration of PSA in a given specimen, determined with assays from different manufacturers, may not be comparable due to differences in assay methods, calibration, and reagent specificity.			
UREA (Method:Urease GLDH - Kinetic)	19.9	mg/dL	17-43

Dr. Varsha Shree R
M.D(Pathology)
CONSULTANT PATHOLOGIST
KMC No : 103567

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SURESH KUMAR	Order No : 1000099436
UHID : UHJA24006709	Registered On : 17/10/2024 08:40:45 AM
Age/Sex : 47/Years Male	Collected On : 17/10/2024 09:07:25 AM
Ward / Bed No :	Reported On : 17/10/2024 12:44:40 PM
Reference : Dr. Ashmitha Padma	Bill No : OPBJA240009205
Station : Corp	Mobile No : 9916198667
Payer Name : Mediwheel	Report Status : Final Report

Test Name	Result	Unit	Bio. Ref. Interval
-----------	--------	------	--------------------

HAEMATOLOGY

COMPLETE BLOOD COUNT(CBC)

Sample: Whole blood (EDTA)

HAEMOGLOBIN (Method:Photometric Measurement: Oxyhemoglobin method)	12.00	g/dL	13.5-17.5
PACKED CELL VOLUME/HEMATOCRIT (PCV/HCT) (Method: Calculated)	39.3	%	42-52
TOTAL WBC COUNT (TLC) (Method:Coulter Principle)	4350	Cells/Cum	4000-11000
DIFFERENTIAL COUNT			
NEUTROPHILS (Method:Optical/Impedance)	54.85	%	40-75
LYMPHOCYTES (Method:Optical/Impedance)	34.17	%	20-45
EOSINOPHILS (Method:Optical/Impedance)	2.32	%	0-6
MONOCYTES (Method:Optical/Impedance)	8.45	%	2-10
BASOPHILS (Method:Optical/Impedance)	0.21	%	0-2
RED BLOOD CORPUSCLES(RBC) (Method:Coulter Principle)	5.36	million/cum	4.5-5.9
MCV (Method:Derived from RBC Histogram)	73.4	fL	78-100
MCH (Method: Calculated)	22.4	pg	27-31
MCHC (Method: Calculated)	30.5	g/dL	31-37
RDW - CV (Method: Calculated)	16.9	%	11.5-14.5
PLATELET COUNT (Method:Electrical Impedance)	2.97	Lakhs/Cum	1.5-4.5

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SURESH KUMAR	Order No : 1000099436
UHID : UHJA24006709	Registered On : 17/10/2024 08:40:45 AM
Age/Sex : 47/Years Male	Collected On : 17/10/2024 09:07:25 AM
Ward / Bed No :	Reported On : 17/10/2024 12:44:40 PM
Reference : Dr. Ashmitha Padma	Bill No : OPBJA240009205
Station : Corp	Mobile No : 9916198667
Payer Name : Mediwheel	Report Status : Final Report

Test Name	Result	Unit	Bio. Ref. Interval
MEAN PLATELET VOLUME(MPV) <small>(Method:Derived from PLT Histogram)</small>	6.63	fl	9-13
PLATELET DISTRIBUTION WIDTH (PDW) <small>(Method: Calculated)</small>	27.1	fl	9-19
ABSOLUTE NEUTROPHIL COUNT (ANC) <small>(Method: Calculated)</small>	2390	Cells/Cum	1500-7500
ABSOLUTE EOSINOPHIL COUNT (AEC) <small>(Method: Calculated)</small>	100	Cells/Cum	40-440
ABSOLUTE LYMPHOCYTE COUNT (ALC) <small>(Method: Calculated)</small>	1490	Cells/Cum	1000-4000
ABSOLUTE MONOCYTE COUNT (AMC) <small>(Method: Calculated)</small>	370	Cells/Cum	200-1000
ABSOLUTE BASOPHIL COUNT (ABC) <small>(Method: Calculated)</small>	10	Cells/Cum	20-100
ERYTHROCYTE SEDIMENTATION RATE(ESR) <small>(Method:Modified Westergren Method)</small>	20	mm/hour	1-15

BLOOD GROUPING & RH TYPING

Sample: Whole blood (EDTA)

ABO Group <small>(Method:Agglutination Method)</small>	A
Rh Factor <small>(Method:Agglutination Method)</small>	Positive

Interpretation Notes

Note: Both forward and reverse grouping performed

Dr. Varsha Shree R
M.D(Pathology)
CONSULTANT PATHOLOGIST
KMC No : 103567

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SURESH KUMAR	Order No : 1000099436
UHID : UHJA24006709	Registered On : 17/10/2024 08:40:45 AM
Age/Sex : 47/Years Male	Collected On : 17/10/2024 09:07:25 AM
Ward / Bed No :	Reported On : 17/10/2024 12:44:40 PM
Reference : Dr. Ashmitha Padma	Bill No : OPBJA240009205
Station : Corp	Mobile No : 9916198667
Payer Name : Mediwheel	Report Status : Final Report

Test Name	Result	Unit	Bio. Ref. Interval
-----------	--------	------	--------------------

CLINICAL PATHOLOGY

**URINE EXAMINATION, ROUTINE
PHYSICAL EXAMINATION**

Sample: Urine

VOLUME	20	mL	
COLOUR	Pale Yellow		
APPEARANCE	Clear		
PH	7.0		5.0-8.0
SPECIFIC GRAVITY	1.015		1.005-1.030
CHEMICAL EXAMINATION			
PROTEIN (Method:Protein Error of pH Indicator)	Absent		Absent
GLUCOSE (Method:GOD-POD)	Absent		Absent
KETONE BODIES (Method:Nitroprusside method/ Rothera's test)	Absent		Absent
BILIRUBIN (Method:DIAZO/FOUCHET'S TEST)	Negative		Negative
BILE SALT (Method:Hay's sulfur test)	Absent		Absent
NITRITE (Method:Griess method)	Negative		Negative
UROBILINOGEN (Method:Azo coupling method)	Normal		
LEUKOCYTE ESTERASE (Method:Leukocyte Esterase activity)	Negative		Negative
BLOOD (Method:Peroxidase Reaction)	Negative		Negative

MICROSCOPIC EXAMINATION

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SURESH KUMAR	Order No : 1000099436
UHID : UHJA24006709	Registered On : 17/10/2024 08:40:45 AM
Age/Sex : 47/Years Male	Collected On : 17/10/2024 09:07:25 AM
Ward / Bed No :	Reported On : 17/10/2024 12:44:40 PM
Reference : Dr. Ashmitha Padma	Bill No : OPBJA240009205
Station : Corp	Mobile No : 9916198667
Payer Name : Mediwheel	Report Status : Final Report

Test Name	Result	Unit	Bio. Ref. Interval
EPITHELIAL CELLS	2-4	/HPF	0-5
PUS CELLS	2-4	/HPF	0-5
RBCs	Nil	/HPF	0-2
CASTS	Nil	/LPF	
CRYSTALS	Nil		
OTHERS	Nil		
URINE SUGAR, FASTING (Method:GOD-POD)	Absent		
URINE SUGAR (POST PRANDIAL)	Absent		

Verified By
G Mahesh kumar

---End of Report---



Dr. Varsha Shree R
M.D(Pathology)
CONSULTANT PATHOLOGIST
KMC No : 103567



**UNITED
HOSPITAL**

Care Par Excellence
Jayanagar, Bangalore

NABH

No.1

Out Patient Record

Patient Name : Mr.SURESH KUMAR UHID : UHJA24006709
Age / Sex : 47 Years / Male OP NO/Reg Dt : 17-10-2024 08:40 AM
Spouse / Father Name : . Department :
Address : ., Bengaluru Urban, Karnataka, INDIA, Referred By :
Consultant : Dr.Ashmitha Padma MBBS, MD
(GENERAL MEDICINE), PGDCC,FEM
KMC No. : 02M1087

Complaints / Findings / Observations :

HT- 179,
WT- 85 kg
BP- 130/89,
PR- 110b/m
SpO2- 98%.

Investigations:

Treatment / Care of Plan / Provisional Diagnosis :

Follow Up Advice :

Signature of the Doctor

UNITED HOSPITAL (A Unit of United Brothers Healthcare Services Private Limited)

United Hospital

No 110 (30) Madhavan Park Circle. 10th Main Rd.

T: 080 4566 6666

E: appointments@unitedhospital.in



NABH



No.1

PATIENT NAME :	Mr. SURESH KUMAR	DATE :	17/10/24
AGE :	47 YEARS GENDER : MALE	PATIENT ID :	24006709
REF BY :	CMO	OP/ IP :	HEALTH CHECK

**2D- ECHOCARDIOGRAPHY
M - MODE AND DOPPLER MEASUREMENTS**

(cm)	(cm)	(cm/sec)	
AO : 3.0 (2.5-3.7)	LVIDD : 3.5 (3.5-5.5)	MV EV: 0.7 AV: 0.5	MR : NORMAL
LA : 3.4 (1.9-4.0)	LVIDS : 2.4 (2.4-4.2)	AV : 0.8	AR : NORMAL
RA : 2.1 (<4.4)	IVSD : 1.1 (0.6-1.1)	PV : 0.8	PR : NORMAL
RV : 1.9 (<3.5)	IVSS : 1.1 (0.9-1.2)	TV EV : ---- AV : ----	TR : TRIVIAL TR, PASP-20mmHg
TAPSE : 1.8 (>1.6)	LVPWD : 1.0 (0.6-1.1)	Diastolic Function : NO LVDD	
	LVPWS : 0.9 (0.9-1.2)		
	EF : 60%		

DESCRIPTIVE FINDINGS

Left Ventricle	: NORMAL
Right Ventricle	: NORMAL
Left Atrium	: NORMAL
Right Atrium	: NORMAL
Wall motion analysis	: NO RWMA
Mitral Valve	: NORMAL
Aortic Valve	: NORMAL
Tricuspid Valve	: NORMAL
Pulmonary Valve	: NORMAL
IAS	: INTACT
IVS	: INTACT
Pericardium	: NORMAL
Other Findings	: IVC NORMAL AND COLLAPSING

IMPRESSION:

NORMAL CHAMBER DIMENSIONS
 NORMAL LV SYSTOLIC FUNCTION EF : 60%
 NORMAL LV DIASTOLIC FUNCTION
 NO PULMONARY ARTERY HYPERTENSION
 NO REGIONAL WALL MOTION ABNORMALITIES
 NO CLOTS/ PERICARDIAL EFFUSION /VEGETATION


DR. RAHUL S PATIL
 CONSULTANT CARDIOLOGIST



NABH



No.1



Care Par Excellence
Jayanagar, Bangalore

DEPARTMENT OF RADIODIAGNOSIS

Name	Suresh Kumar	Date	17/10/24
Age	47 years	Hospital ID	UHJA24006709
Sex	Male	Ref.	Health check

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and *shows mildly increased echopattern*. No intra or extra hepatic biliary duct dilatation. No focal lesions. **Portal vein** is normal in size, course and caliber. **CBD** is not dilated.

Gall bladder is normal without evidence of calculi, wall thickening or pericholecystic fluid.

Pancreas - Visualized part of the pancreatic head and body appears normal in size, contour and echogenicity. Rest of the pancreas is obscured by bowel gas.

Spleen is normal in size, shape, contour and echopattern. No focal lesion.

Right Kidney is normal in size (11.4 x 4.4 cms), position, shape and echopattern. Corticomedullary differentiation is maintained. No calculus or hydronephrosis.

Left Kidney is normal in size (11.4 x 4.4 cms), position, shape and echopattern. Corticomedullary differentiation is maintained. No calculus or hydronephrosis.

Retroperitoneum - Visualized aorta appeared normal. No obvious enlarged para-aortic nodes.

Urinary Bladder is distended, normal in contour and wall thickness. No evidence of calculi.

Prostate is normal in echopattern and size, measures ~ 14.5 cc.

No ascites or pleural effusion. Appendix could not be localized. No RIF probe tenderness.

IMPRESSION: *Suboptimal evaluation due to poor acoustic window from thick body habitus.*

- Mild fatty infiltration of liver (Grade I).
- No other definite sonological abnormality detected.

Dr. Elluru Santosh Kumar
Consultant Radiologist

UNITED HOSPITAL (A Unit of United Brothers Healthcare Services Private Limited)



NABH



No.1



DEPARTMENT OF RADIODIAGNOSIS

Name	Suresh Kumar	Date	17/10/24
Age	47 years	Hospital ID	UHJA24006709
Sex	Male	Ref.	Health check

RADIOGRAPH OF THE CHEST (PA – VIEW)

FINDINGS:

Bilateral lung fields are normal.

Bilateral costo-phrenic angles are normal.

Cardia and mediastinal contours are normal.

The bony thorax is grossly normal.

IMPRESSION:

- No radiographic abnormality.

Dr. Elluru Santosh Kumar
Consultant Radiologist

Ex: M cm kg mmHg 47 years
 Name: mr sureshkumar Birth date: /
 Indication: 98 bpm
 Symptoms: 148 ms
 History: 100 ms
 R int 314/ 370 ms
 RS dur 73/ -19/ 38 °
 T/QTc(E) int 1.18/ 0.38 mV
 V/QRS/T axis 1.57 mV
 V5/SV1 amp
 V5+SV1 amp

1100 Sinus rhythm
 2420 RSR (QR) in lead V1/V2, consistent with right ventricular
 conduction delay [RSR pattern (V1)]
 4068 Nonspecific Twave abnormality [flat T or negative T (I,
 aVL)]
 9130 ** borderline ECG **

Unconfirmed Report
Reviewed by:

