




# 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.SWETHA OGGULA [SPOUSE]** TID/SID : UMR0923157/ 24040697  
 Age / Gender : 34 Years / Female Registered on : 08-Oct-2022 / 09:39 AM  
 Ref.By : - Collected on : 08-Oct-2022 / 09:47 AM  
 Req.No  Reported on : 08-Oct-2022 / 14:24 PM  
 BIL2444656 Reference : Medi Wheel

### DEPARTMENT OF CLINICAL PATHOLOGY

### Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	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	6.0		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
<b>Microscopic Examination</b>			
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	Nil	/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	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

\* Sample processed at Parkline

--- End Of Report ---

**Dr.Jyothi Kiranmai**  
Regd. No: 52272  
MD PATHOLOGY






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Req.No	:  BIL2444656	Reported on	: 08-Oct-2022 / 15:04 PM
		Reference	: Medi Wheel

### DEPARTMENT OF HEMATOLOGY

### Blood Grouping ABO And Rh Typing, EDTA Whole Blood

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

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 BIL2444656 Reference : Medi Wheel

### DEPARTMENT OF HEMATOLOGY

### Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	<b>10.3</b>	g/dL	12.0-15.0 g/dL
Erythrocyte Count(RBC) Method:Electrical Impedence	4.8	mill /cu.mm	3.8-4.8 mill /cu.mm
PCV/HCT Method:Numeric Integration	<b>33</b>	%	36-46 %
MCV Method:Calculated	<b>70</b>	fL	83-101 fL
MCH Method:Calculated	<b>21.3</b>	pg	27-32 pg
MCHC Method:Calculated	<b>30.6</b>	gm/dL	31.5-34.5 gm/dL
RDW (CV) Method:Calculated	<b>17.5</b>	%	11.6-14.0 %
Total WBC Count Method:Impedence flowcytometry/Light scattering	5.9	cells/cumm	4-10 cells/cumm
<b>Differential Count</b>			
Neutrophils Method:Flowcytometry/Microscopy	54	%	40-80 %
Lymphocytes Method:Flowcytometry/Microscopy	<b>42</b>	%	20-40 %
Monocytes Method:Flowcytometry/Microscopy	2	%	2-10 %
Eosinophils Method:Flowcytometry/Microscopy	2	%	1-6 %
Basophils Method:Flowcytometry/Microscopy	0	%	0-2 %
Absolute Neutrophil Count	3.19	10 <sup>3</sup> /μL	2.0-7.0 10 <sup>3</sup> /μL
Absolute Lymphocyte Count	2.48	10 <sup>3</sup> /μL	1.0-3.0 10 <sup>3</sup> /μL

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### DEPARTMENT OF HEMATOLOGY

### Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Absolute Monocyte Count	<b>0.12</b>	10 <sup>3</sup> /μL	0.20-1.0 10 <sup>3</sup> /μL
Absolute Eosinophil Count	0.12	10 <sup>3</sup> /μL	0.02-0.5 10 <sup>3</sup> /μL
Absolute Basophil Count	<b>00</b>	10 <sup>3</sup> /μL	0.02-0.1 10 <sup>3</sup> /μL
Platelet Count	380	10 <sup>3</sup> /μL	150-410 10 <sup>3</sup> /μL
Method:Electrical Impedence			

#### Peripheral Smear

RBC

Method:Microscopy

Microcytic and  
hypochromic,  
Anisocytosis+

WBC

Method:Microscopy

Lymphocytosis+.No  
abnormal cells seen.

Platelets

Method:Microscopy

Discrete and  
adequate.Normal in  
morphology

\* Sample processed at Parkline

--- End Of Report ---

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		Reference	: Medi Wheel

### DEPARTMENT OF HEMATOLOGY

### Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	<b>25</b>	mm/hour	0-20 mm/hour
Method:Westergren			

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Req.No :  Reported on : 08-Oct-2022 / 14:05 PM  
Reference : Medi Wheel  
BIL2444656

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen.	8.4	mg/dL	7-23 mg/dL
Method:Calculated			

#### Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine.	0.74	mg/dL	0.50-1.20 mg/dL
Method:Alkaline Picrate			

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## TEST REPORT

Name	: MS.SWETHA OGGULA [SPOUSE]	TID/SID	: UMR0923157/ 24040698F
Age / Gender	: 34 Years / Female	Registered on	: 08-Oct-2022 / 09:39 AM
Ref.By	: -	Collected on	: 08-Oct-2022 / 09:47 AM
Req.No	:  BIL2444656	Reported on	: 08-Oct-2022 / 16:10 PM
		Reference	: Medi Wheel

### DEPARTMENT OF CLINICAL CHEMISTRY I

### Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	97	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : >=126 mg/dL

\* Sample processed at Parkline

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## TEST REPORT

Name	: MS.SWETHA OGGULA [SPOUSE]	TID/SID	: UMR0923157/ 24040698P
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Req.No	:  BIL2444656	Reported on	: 08-Oct-2022 / 16:10 PM
		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	110	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : $\geq$ 200 mg/dL

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Req.No  Reported on : 08-Oct-2022 / 16:10 PM  
Reference : Medi Wheel  
BIL2444656

### 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)	<b>5.8</b>	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	119	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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BIL2444656

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	147	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	25	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	97	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	25	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	127	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	5.88		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	3.88		

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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	0.37	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.12	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.25	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	18	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	21	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	61	U/L	30-115 U/L
<b>PROTEINS</b>			
Total Protein. Method:Biuret	7.21	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.02	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	3.19	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.26		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	29	U/L	7.0-50.0 U/L

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### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.61	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	11.0	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	4.34	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

3dr 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 form 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.	4.21	mg/dL	1.9-7.5 mg/dL
Method:Uricase			

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## TEST REPORT

Name : **MS.SWETHA OGGULA [SPOUSE]** TID/SID : UMR0923157/ 24042752  
Age / Gender : 34 Years / Female Registered on : 08-Oct-2022 / 09:39 AM  
Ref.By : - Collected on : 08-Oct-2022 / 09:47 AM  
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BIL2444656

### DEPARTMENT OF HEALTH CHECKUP

#### Glucose Urine Fasting

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

#### Glucose Urine Post Prandial

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

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--- End Of Report ---



**Dr V G Mallika**  
Regd. No: 63194  
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Email parklinediagnostics@gmail.com www.parklinediagnostics.com



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## MEDICAL EXAMINATION REPORT

Name	Ms. Swetha Oggula		Date :	8/10/22
Company	clo. Mediawheel		Reg. No. :	2444656
Contact No.	9390529593		Sex	<input type="checkbox"/> F <input type="checkbox"/> M
			Age :	34
Type	Pre-Emp		Emp. No.:	Spouse
	Overseas		Height	160
	Annual	✓	Weight	68
Remarks	<ul style="list-style-type: none"> <li>microcytic, hypochromic anisocytosis</li> <li>Low Hb levels</li> <li>ESR elevated</li> <li>lymphocytosis</li> <li>HbA1c elevated</li> <li>(Impaired glucose tolerance)</li> <li>Advised follow up for same</li> <li>Remaining parameter WNL.</li> </ul>			
Fitness Status	Medically Fit / Unfit		Physician's Signature	
			 <b>DR. B. DEEPAK KUMAR</b> (M.B.B.S)	



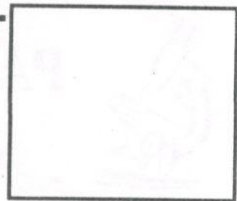
# COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Mrs. Sushma Oggula

AGE 34 yrs

MARITAL STATUS married CHILDREN : M  F  (Son 3 yrs)

IDENTIFICATION (IF ANY) more 009 to index



## PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer

Any personal H/o Major illness like : Typhoid.....  .....Jaundice.....  .....Etc.

Any H/o STD.....  .....Skin infection.....

H/o Blood Transfusion.....  .....Recent Vaccination.....  (two doses)

H/o Epilepsy.....  .....Giddiness.....  (Yes (last 6 months))

H/o Surgery.....  .....Fracture in the past.....

### Any Personal H/O.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

(H.o.m) (Sly) (regy)

Present illness / Medication \_\_\_\_\_

## GENERAL EXAMINATION

Conjunctiva :  
Skin :  
Ears :  
Nose :  
Throat & Oral Cavity :

*Handwritten notes for physical exam:*  
H.o.m

Bone, Joints :  
Nutritional Status :  
Lymph Nodes :  
Edema Feet :  
Varicose Veins :

*Handwritten notes for physical exam:*  
H.o.m  
H.o.m

**Distant Vision : Near Vision :**

Right Eye: 6/18 - 1.50 sph 6/6

With glasses / Without glasses

left Eye: 6/18 - 1.50 sph 6/6

with glasses / without glasses

Colour Vision: BF normal

**Right Ear**

Hearing :

Rinee's Test ;

Weber Test :

Discharge :

Right Eye: NG

With glasses / Without glasses

left Eye : NG

with glasses / without glasses

Ophthalmologist's Signature

**Left Ear**

**SYSTEMIC EXAMINATION**

Pulse : 74 / min

B.P. : 90/60 mmHg

Lungs : A. Shape of Chest  
B. Breath Sounds  
C. Adventitious Sounds

Bilateral symmetrical  
clear  
No

Heart : A. Sounds  
B. Murmurs

S1, S2 (+)  
No

**Nervous System**

Abdomen : A. Liver  
B. Spleen  
C. Piles  
D. Any Lump

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

Normal

General : A. Hernia  
B. Hydrocele  
C. Varicocele

No  
No  
No

Breast : Rt (No) Lt. (No)

## 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 :



\_\_\_\_\_  
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. 2444656

Emp.No. spouse

Date 10/12

Name Swetha Oggula

Age 34 Yrs

Sex M/F ✓

### EARS :

Right

Left

EAC :

(N)

(N)

TM :

(?) (N)

(N) (N)

TFT :

Rinne's Ac > Bc

Ac > Bc

Waber's

←————→

cut

NOSE :

(N)

ABC same as ear nose

THROAT :

(N)

NECK :

(N)

IMPRESSION:

ENT within (N) limits

**Dr. POORNIMA**

M.B.B.S, D.L.O.,(ENT)

Reg No.100155(KMC)





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

## TEST REPORT

Name : Ms . SWETHA OGGULA [SPOUSE]  
Age / Gender : 34 Years / Female  
Ref.By : Medi Wheel  
Req. No : BIL2444656

TID : UMR0923157  
Registered on : 08-Oct-2022 09:39 AM  
Reported On : 08-Oct-2022 12:25 PM

### 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 gall stones / sol. Sludge seen.  
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** : 9.86 x 4.62 cms.  
Normal in size and echotexture.  
Cortical thickness is normal.  
No evidence of calculi / sol.  
Pelvi calyceal system is normal.

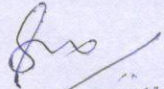
**LEFT KIDNEY** : 10.82 x 4.96 cms.  
Normal in size and echotexture.  
Cortical thickness is normal.  
No evidence of calculi / sol.  
Pelvi calyceal system is normal.

**URINARY BLADDER** : Collapsed.

**UTERUS, ENDOMETRIUM AND OVARIES** : Not seen due to collapsed bladder.

**IMPRESSION** : No significant sonographic abnormality detected.

Clinical correlation.

  
DR. PRAJAKTA SUKHADEV  
DNB RADIOLOGY  
Reg. No. 08483



**PATIENT SUMMARY REPORT**

DIAGNOSTICS PVT.LTD

2444656  
VETHA OGGULA  
FEMALE

TP

HEIGHT (cm) : 160  
WEIGHT (kg) : 68  
PROTOCOL : BRUCE

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

0-2022, 11:15:  
C

T : Routine Check Up.  
None.  
Very Active.  
GATION : E C G  
TERMINATION : THR ACHIEVED  
ERANCE : Good (> 10 METS).  
UCED ARRHYTHMIAS : No.  
NSE : Normal.  
ONSE : Normal.  
SSION :

*tm 7mg w*

**DR. SAMEER G. VANKAR**  
MD., D.M.  
Consultant Interventional Cardiologist  
Reg.No.8245

Confirmed By : \_\_\_\_\_

Signature

Page No.: 1

BPL DYNATRAC

Recorded On 08-10-2022, 11:15:41







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Req. No : BIL2444656

TID : UMR0923157  
Registered on : 08-Oct-2022 09:39 AM  
Reported On : 09-Oct-2022 08:19 AM

### X-RAY CHEST PA VIEW

Lung fields are clear.

Cardia is normal.

Hila are normal.

C P angles are free.

Bony cage is normal.

Soft tissues are normal.

**IMPRESSION : NORMAL CHEST X-RAY**



**Dr. D.J. MOHAN**  
MB DMRD  
(Reg No. 8995)  
Consultant Radiologist



M.S.SWETHA OGGULA

Female 34Years

HR : 79 bpm  
 P : 95 ms  
 PR : 144 ms  
 QRS : 87 ms  
 QT/QTc : 393/451 ms  
 P/QRS/T : 50/22/59 °  
 RV5/SV1 : 1.79/1.50 mV

Diagnosis Information:  
 Sinus Rhythm  
 \*\*\*Normal ECG\*\*\*

*Normal*

*[Signature]*  
**Dr. SAMEER G. VANKAR**  
 MD., D.M.  
 Consultant Interventional Cardiologist  
 Reg.No.8245

Report Confirmed by: