



Name : Mr. K NAGARAJA

PID No. : MED111708923

SID No. : 423041630

Age / Sex : 37 Year(s) / Male

Type : OP

Ref. Dr : MediWheel

Register On : 01/07/2023 9:16 AM

Collection On : 01/07/2023 11:02 AM

Report On : 01/07/2023 6:06 PM

Printed On : 10/10/2023 2:37 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Basophils (Blood)	0.7	%	00 - 02
<b>INTERPRETATION:</b> Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood)	3.86	10 <sup>3</sup> / $\mu$ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	3.30	10 <sup>3</sup> / $\mu$ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.34	10 <sup>3</sup> / $\mu$ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.45	10 <sup>3</sup> / $\mu$ l	< 1.0
Absolute Basophil count (EDTA Blood)	0.06	10 <sup>3</sup> / $\mu$ l	< 0.2
Platelet Count (EDTA Blood)	379	10 <sup>3</sup> / $\mu$ l	150 - 450
MPV (EDTA Blood)	7.9	fL	7.9 - 13.7
PCT (EDTA Blood/Automated Blood cell Counter)	<b>0.30</b>	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citrate Blood)	7	mm/hr	< 15



*Anusha*  
Dr Anusha.K.S  
Sr.Consultant Pathologist  
Reg No : 100674

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<b><u>BIOCHEMISTRY</u></b>			
<b><u>Liver Function Test</u></b>			
Bilirubin(Total) (Serum/DCA with ATCS)	0.31	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.12	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.19	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	22.25	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	37.47	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	45.57	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	126.8	U/L	53 - 128
Total Protein (Serum/Biuret)	7.27	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	3.51	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	3.76	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	0.93		1.1 - 2.2



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>Lipid Profile</u></b>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	139.74	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	<b>373.33</b>	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)	<b>25.40</b>	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	39.6	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	74.7	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	114.3	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

**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.



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	5.5		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)	14.7		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	1.6		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0



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

**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose 116.89 mg/dL  
(Whole Blood)

**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 glyemic 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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Investigation Observed Value Unit Biological Reference Interval

**IMMUNOASSAY**

**THYROID PROFILE / TFT**

T3 (Triiodothyronine) - Total 2.02 ng/ml 0.7 - 2.04  
(Serum/ECLIA)

**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 (Tyroxine) - Total 13.45 µg/dl 4.2 - 12.0  
(Serum/ECLIA)

**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) 1.81 µIU/mL 0.35 - 5.50  
(Serum/ECLIA)

**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&amp;lt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Leukocytes(CP) (Urine)	Negative		
<b><u>MICROSCOPIC EXAMINATION</u></b> <b><u>(URINE COMPLETE)</u></b>			
Pus Cells (Urine)	0-2	/hpf	NIL
Epithelial Cells (Urine)	0-2	/hpf	NIL
RBCs (Urine)	NIL	/HPF	NIL
Others (Urine)	NIL		
<b>INTERPRETATION:</b> Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.			
Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL



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Investigation

Observed  
Value

Unit

Biological  
Reference Interval

**IMMUNOHAEMATOLOGY**

BLOOD GROUPING AND Rh TYPING  
(EDTA Blood/Agglutination)

'O' 'Positive'



APPROVED BY



Mahesh

Mob:8618385220

9901569756



ಶ್ರೀ ಪಾರ್ವತಿ ಆಪ್ಟಿಕ್ಸ್

# SRI PARVATHI OPTICS

Multi Branded Opticals Store

## Computerized Eye Testing & Spectacles Clinic

# 333.8th Main 5th Cross Near Cambridge & Miranda School HAL 3rd Stage  
Behind Vishveshvariah Park New Thippasandra, Bangalore - 560075,  
Email: parvathiopticals@gmail.com

### SPECTACLE PRESCRIPTION

Name: *Nagaraja*

No. **3133**

Mobil No:

Date: *1/7/2020*

Age / Gender *32/3/M*

Ref. No.

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	VISION	SPH	CYL	AXIS	VISION
DISTANCE	<i>Plano</i>			<i>6/6</i>	<i>Plano</i>			<i>6/6</i>
NEAR								

PD *62mm*

Advice to use glasses for:

DISTANCE  FAR & NEAR  READING  COMPUTER PURPOSE

We Care Your Eyes

**SRI PARVATHI OPTICS**

NEW THIPPASANDRA

**CLUMAX DIAGNOSTICS**

MEDALL HEALTHCARE PVT LTD

CUSTOMER CHECKLIST

Print Date : 01/07/2023 11:26 AM



MED111708923

39



Customer Name : **MR.K NAGARAJA**

Ref Dr Name : **MediWheel**

Customer Id : **MED111708923** Visit ID : **423041630**

Age : **37Y/MALE** Phone No : **9590423848**

DOB : **19 Mar 1986** Visit Date : **01/07/2023**

Company Name : MediWheel

Package Name : **Mediwheel Full Body Health Checkup Male Below 40**

S.No	Modality	Study	AccessionNo	Time	Signature
1	LAB	BLOOD UREA NITROGEN (BUN)			
2	LAB	CREATININE			
3	LAB	GLUCOSE - FASTING			
4	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)			
5	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c)			
6	LAB	URIC ACID			
7	LAB	LIPID PROFILE			
8	LAB	LIVER FUNCTION TEST (LFT)			
9	LAB	THYROID PROFILE/ TFT( T3, T4, TSH)			
10	LAB	URINE GLUCOSE - FASTING			
11	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)			
12	LAB	COMPLETE BLOOD COUNT WITH ESR			
13	LAB	STOOL ANALYSIS - ROUTINE	Not Required		
14	LAB	URINE ROUTINE			
15	LAB	BUN/CREATININE RATIO			
16	LAB	BLOOD GROUP & RH TYPE (Forward Reverse)			
17	ECG	ECG	IND14016111138		<del>_____</del> dm.
18	OTHERS	TDD / 2D Echo	IND140161114690		<del>_____</del> dm
19	OTHERS	physical examination	IND140161115279		<del>_____</del> dm
20	US	ULTRASOUND ABDOMEN	IND140161115292		<del>_____</del> dm
21	OTHERS	EYE CHECKUP	IND140161117756		<del>_____</del> dm
22	X-RAY	X RAY CHEST	IND140161118659		<del>_____</del> dm
23	OTHERS	Consultation Physician	IND140161118736		

Registered By  
(HARI.O)

ht 766  
wt. 70.0  
BP. 149/98  
pulse. #2.



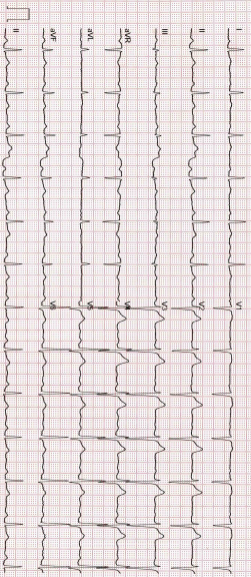
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GE Healthcare 137176

01.07.2023, 11:03:12  
CLINIX DIAGNOSTICS  
THIRUVANMIYUR  
MEDICAL CARE

*Handwritten signature*

76 bpm  
-7--monthlg

HR	98 ms
QT / QTcBZ	390 / 405 ms
PR	180 ms
P	114 ms
RR / PP	790 / 789 ms
P / QRS / T	68 / 44 / 58 degrees



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz

Unconfirmed  
24546\_25\_R1

1/1

**DR. SUBRAMANI K.S**  
 MD, DM (Cardiology)  
 Consultant Cardiologist  
 KMC, Reg. No. : 46604  
 MEDICAL DIAGNOSTICS

Name	K NAGARAJA	ID	MED111708923
Age & Gender	37-Male	Visit Date	7/2/2023 9:57:36 AM
Ref Doctor Name	MediWheel		



## 2 D ECHOCARDIOGRAPHIC STUDY

### M mode measurement:

AORTA	:	3.2cms
LEFT ATRIUM	:	3.3cms
AVS	:	----
LEFT VENTRICLE (DIASTOLE)	:	4.3cms
(SYSTOLE)	:	2.8cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.4cms
POSTERIOR WALL (DIASTOLE)	:	0.7cms
(SYSTOLE)	:	1.6cms
EDV	:	84ml
ESV	:	30ml
FRACTIONAL SHORTENING	:	35%
EJECTION FRACTION	:	65%
EPSS	:	---
RVID	:	1.8cms

### DOPPLER MEASUREMENTS:

MITRAL VALVE	:	E' 0.92 m/s	A' 0.60 m/s	NO MR
AORTIC VALVE	:	1.04 m/s		NO AR
TRICUSPID VALVE	:	E' - m/s	A' - m/s	NO TR
PULMONARY VALVE	:	0.96 m/s		NO PR

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- 7.Results of the test are influenced by the various factors such as sensitivity, specificity of the procedures of the tests, quality of the samples and drug interactions etc.,
- 8.If the test results are found not to be correlating clinically can contact the lab in charge for clarification or retesting where practicable within 24 hours from the time of issue of results.
- 9.Liability is limited to the extend of amount billed.
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Age & Gender	37-Male	Visit Date	7/2/2023 9:57:36 AM
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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:65 %.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

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DR. K.S. SUBRAMANI. MBBS, MD, DM (CARDIOLOGY) FESC  
SENIOR CONSULTANT INTERVENTIONAL CARDIOLOGIST  
SRI JAYADEVA INSTITUTE OF CARDIOLOGY, BANGALORE  
Kss/da

**Note:**

- \* Report to be interpreted by qualified medical professional.
- \* To be correlated with other clinical findings.
- \* Parameters may be subjected to inter and intra observer variations.
- \* Any discrepancy in reports due to typing errors should be corrected as soon as possible.

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## 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** shows 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** shows normal shape, size and echopattern. No demonstrable Para -aortic lymphadenopathy.

**KIDNEYS** move well with respiration and have normal shape, size and echopattern. Cortico- medullary differentiations are well madeout.

**A calculus measuring about 3mm in size is noted in the upper pole of the right kidney.**

**A calculus measuring about 4mm in size is noted in the mid pole of the left kidney.**

**No evidence of hydronephrosis on either side.**

**The kidney measures as follows:**

	<b>Bipolar length (cms)</b>	<b>Parenchymal thickness (cms)</b>
<b>Right Kidney</b>	<b>9.6</b>	<b>1.2</b>
<b>Left Kidney</b>	<b>10.3</b>	<b>1.4</b>

**URINARY BLADDER** shows normal shape and wall thickness. It has clear contents. No evidence of diverticula.

**PROSTATE** shows normal shape, size and echopattern. It measures 2.6 x 2.7 x 3.2cms (Vol:12cc).

No evidence of ascites / pleural effusion.

### IMPRESSION:

- **BILATERAL RENAL NON-OBSTRUCTIVE CALCULI.**
- **NO OTHER SIGNIFICANT ABNORMALITY DETECTED.**

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Age & Gender	37-37-Male	Visit Date	7/2/2023 9:57:36 AM
Ref Doctor Name	MediWheel		



DR. APARNA  
CONSULTANT RADIOLOGIST  
A/ms

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- 2.The results reported here in are subject to interpretation by qualified medical professionals only.
- 3.Customer identities are accepted provided by the customer or their representative.
- 4.information about the customer's condition at the time of sample collection such as fasting, food consumption, medication, etc are accepted as provided by the customer or representative and shall not be investigated for its truthfulness.
- 5.If any specimen/sample is received from any others laboratory/hospital,its is presumed that the sample belongs to the patient identified or named.
- 6.Test results should be interpreted in context of clinical and other findings if any.In case of any clarification /doubt , the referring doctor/patient can contact the respective section head of the laboratory.
- 7.Results of the test are influenced by the various factors such as sensitivity, specificity of the procedures of the tests, quality of the samples and drug interactions etc.,
- 8.If the test results are found not to be correlating clinically can contact the lab in charge for clarification or retesting where practicable within 24 hours from the time of issue of results.
- 9.Liability is limited to the extend of amount billed.
- 10.Reports are subject to interpretation in their entirety.partial or selective interpretation may lead to false opinion.
- 11.Disputes,if any , with regard to the report findings are subject to the exclusive jurisdiction of the competent courts chennai only.

Name	Mr. K NAGARAJA	ID	MED111708923
Age & Gender	37Y/M	Visit Date	Jul 1 2023 9:15AM
Ref Doctor	MediWheel		

**X - RAY CHEST PA VIEW**

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

**Impression: Essentially normal study.**



DR. APARNA

CONSULTANT RADIOLOGIST