

DEPARTMENT OF RADIOLOGY

Patient Name :Mr. MADDURI SRIDHAR	Age / Gender : 57 Y(s) / Male
Requested Date :13-Mar-2023 9:15 AM	UMR No : UMR84490
Reported Date :13-Mar-2023 10:54 AM	Result/ Bill No : RES393656 / BIL147634
Referred By :Walk-In	Lab No : 0
Advised By :Dr.GENERAL PHYSICIAN	

US ABDOMEN AND PELVIS

FINDINGS

LIVER: 14cms, normal in size and shows grade I increased echogenicity. No focal lesions noted. No intra hepatic biliary dilatation. CBD and Portal vein appear normal in course and calibre.

GALL BLADDER: Distended. No evidence of sludge / calculus. No evidence of wall thickening / pericholecystic collection.

PANCREAS: Visualized extent normal in size and echotexture. Pancreatic duct appears normal. No peri pancreatic collection.

SPLEEN: 10cms, normal in size and echotexture.

BOTH KIDNEYS: Both kidneys are normal in size and echotexture. CMD is maintained. No evidence of calculi. Pelvicalyceal system appears normal on both sides.

Aorta and IVC: are normal.No evidence of para-aortic or paracaval lymphadenopathy.

URINARY BLADDER: Well distended. Wall thickness is normal.

PROSTATE: 3.4 x 3.5 x 4.5cms, normal in size and echotexture. Volume= 28cc

- Inter recti distance at umbilicus - 3cms with no obvious herniation of omentum / bowels
No evidence of ascites.

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IMPRESSION

- * Grade I fatty liver
- * Mild increased inter recti distance at umbilicus - s/o mild divarication of recti

Suggested clinical correlation.

Dr. K.PRASHANTHI
CONSULTANT RADIOLOGIST

Page 2 of 2

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INTERVENTIONAL RADIOLOGIST

Dr.METTU SINDHURA
MDRD, (FRCR)
CONSULTANT RADIOLOGIST

DEPARTMENT OF RADIOLOGY

Patient Name : Mr. MADDURI SRIDHAR	Age / Gender : 57 Y(s) / Male
Requested Date : 13-Mar-2023 9:15 AM	UMR No : UMR84490
Reported Date : 13-Mar-2023 06:00 PM	Result/ Bill No : RES393911 / BIL147634
Referred By : Walk-In	Lab No : 0
Advised By : Dr. GENERAL PHYSICIAN	

X-RAY CHEST PA VIEW

FINDINGS

Heart size is normal.

Both lung fields clear.

Both hila normal.

Both CP angles free.

Soft tissue chest wall and bony cage normal.

Suggested clinical correlation.

Dr. METTU SINDHURA, MDRD, (FRCR)
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INTERVENTIONAL RADIOLOGIST

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DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mr. MADDURI SRIDHAR	Age / Sex	: 57 Y(s)/Male
Ref By	: Dr. GENERAL PHYSICIAN	UMR No	: UMR84490
Bill Date	: 13-Mar-23 09:15 am	Bill No	: BIL147634
Lab No	: BIO/23/3/724	Result No	: RES393662
Sam p.Coll	: 13-Mar-23 09:32 am	Auth. Tim	: 13-Mar-2023 11:18 am
Reported On	: 13-Mar-23 11:18 am		

<u>Parameter</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Method</u>
LIPID PROFILE: SERUM			
Triglycerides	: 89	BorderLine : 150 - 199 mg/dl High : 200 - 500 mg/dl Normal : < 150 mg/dl	GPO-Trinder End Point
Total Cholesterol	: 197	< 200 mg/dl	CHOD-PAP End Point
HDL Cholesterol	: 31	Undesirable : < 40 Optimal : 40 - 59 Desirable : > 60	
VLDL Cholesterol	: 18	2 - 30 mg/dl	
LDL Cholesterol	: 148	0 - 100 mg/dl	
Cholestrol / HDL Ratio	: 6.35	1.0 - 3.5	
Serum Uric Acid	: 6.1	3.5 - 7.2 mg/dl	Uricase-Peroxidase
BLOOD SUGAR FASTING AND POST PRANDIAL			
Fasting Blood Sugar	: 79	60 - 110 mg/dl	GOD-POD
Blood Sugar Post Prandial	: 102	110 - 140 mg/dl	
Blood Urea Nitrogen(BUN)	: 9	6 - 21 mg/dl	
Serum Creatinine	: 1.0	0.4 - 1.4 mg/dl	Jaffe Kinetic
LFT- LIVER FUNCTION TESTS			
Total Bilirubin	: 0.4	0.2 - 1.2 mg/dl	Diazo
Direct Bilirubin	: 0.2	0.0 - 0.3 mg/dl	Diazo
Indirect Bilirubin	: 0.2	0.2 - 0.7 mg/dL	
SGPT	: 24	05 - 40 IU/L	IFCC - Kinetic
SGOT	: 12	05 - 40 IU/L	IFCC - Kinetic
AST / ALT -Ratio	: 0.5		

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Lab No	: BIO/23/3/724	Result No	: RES393662
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Alkaline Phosphatase	: 64	70 - 110 U/L	AMP Kinetic
Total Protein	: 7.3	6.4 - 8.3 gm/dl	Biuret Method
Serum Albumin	: 4.3	3.5 - 5.2 gm/dl	BCG Dye
Serum Globulin	: 3	2.0 - 3.5 g/dL	
Albumin / Globulin Ratio	: 1.43	1.2 - 2.2	
HbA1c	: 5.7	Non Diabetic : 4 - 6 Good Control : 6 - 7 Fair Control : 7 - 8 Poor Control : 8 - 10	Immunoturbidimetry
PROSTATE SPECIFIC ANTI GEN (PSA)	: 2.5	< 4.0 ng/ml	CLIA

Interpretation : Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone.

PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

THYROID PROFILE

T3-Free (Triiodothyronine-Free)	: 2.4	2.0 - 4.2 pg/mL	CLIA
T4-Free (Thyroxine-Free)	: 16.7	8.9 - 17.2 pg/ml	CLIA
TSH(Thyroid Stimulating Hormone).	: 5.0	0.3 - 4.5 µIU/ml	CLIA

--- End Of Report ---



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Bill Date	: 13-Mar-23 09:15 am	Bill No	: BIL147634
Lab No	: 147634	Result No	: RES393781
Samp.Coll	: 13-Mar-23 09:32 am	Auth. Tim	: 13-Mar-2023 1:39 pm
Reported On	: 13-Mar-23 01:39 pm		

<u>Parameter</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Method</u>
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PHH8588



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DEPARTMENT OF HAEMATOLOGY

Patient Name	: Mr. MADDURI SRIDHAR	Age / Sex	: 57 Y(s)/Male
Ref By	: Dr. GENERAL PHYSICIAN	UMR No	: UMR84490
Bill Date	: 13-Mar-23 09:15 am	Bill No	: BIL147634
Lab No	: HEM/23/3/504	Result No	: RES393664
Samp.Coll	: 13-Mar-23 09:32 am	Auth. Tim	: 13-Mar-2023 12:40 pm
Reported On	: 13-Mar-23 12:40 pm		

<u>Parameter</u>	<u>Result</u>	<u>Biological Reference Interval</u>
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COMPLETE BLOOD PICTURE

Haemoglobin	:	15.9 gm%	13.0 - 17.0 gm%
RBC Count	:	5.2 Millions/cumm	4.5-6.5 Millions/cumm
PCV	:	47 Vol%	40 - 50 Vol%
Platelet count	:	2.1 Lakhs/Cumm	1.5 - 4.5 Lakhs/Cumm
WBC Count	:	6,200 cells/cumm	4000 - 11000 cells/cumm

DIFFERENTIAL COUNT

NEUTROPHILS	:	46 %	40-75 %
LYMPHOCYTES	:	44 %	20 - 45 %
EOSINOPHILS	:	04 %	2-6 %
MONOCYTES	:	06 %	2-8 %
BASOPHILS	:	00 %	0 - 2 %

SMEAR EXAMINATION

RBC	:	Normocytic / Normochromic
WBC	:	With In Normal Limits
Platelets	:	Adequate

BLOOD GROUPING & RH TYPING

BLOOD GROUP	:	" O "	Agglutination
RH TYPING	:	POSITIVE	

--- End Of Report ---



DEPARTMENT OF HAEMATOLOGY

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Bill Date	: 13-Mar-23 09:15 am	Bill No	: BIL147634
Lab No	: 147634	Result No	: RES393744
Samp.Coll	: 13-Mar-23 09:32 am	Auth. Tim	: 13-Mar-2023 12:52 pm
Reported On	: 13-Mar-23 12:52 pm		

Parameter

Result

Method

PHH830



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DEPARTMENT OF CLINICAL PATHOLOGY

Patient Name	: Mr. MADDURI SRIDHAR	Age / Sex	: 57 Y(s)/Male
Ref By	: Dr. GENERAL PHYSICIAN	UMR No	: UMR84490
Bill Date	: 13-Mar-23 09:15 am	Bill No	: BIL147634
Lab No	: 147634	Result No	: RES393690
Samp.Coll	: 13-Mar-23 09:32 am	Auth. Tim	: 13-Mar-2023 1:05 pm
Reported On	: 13-Mar-23 01:05 pm		

<u>Parameter</u>	<u>Result</u>	<u>Biological Reference Interval</u>	
ESR - ERYTHROCYTE SEDIMENT RATE			
ESR - ERYTHROCYTE SEDIMENTATION RATE	: 25	< 15 mm	
COMPLETE URINE EXAMINATION			
<u>PHYSICAL EXAMINATION:</u>			
Colour	: Pale Yellow		
Appearance	: Clear		
pH	: 5.0	5.5 - 7.0	pH indicator
Specific gravity	: 1.010	1.010 - 1.025	Bromthymol blue indicator
<u>CHEMICAL EXAMINATION:</u>			
Urine for Sugar	: Nil	0 - 2.8 mmol/L	GOD-POD
Protein	: Nil	0 - 0.15 g/L	protein error of indicator
Blood	: Nil	0 - 10 Cells/ μ L	
Bilirubin	: Nil	0 - 0 μ mol/L	Diazonium method
Ketone bodies	: Negative	0 - 0 mmol/L	Nitroprusside reaction
<u>MICROSCOPIC EXAMINATION:</u>			
Pus Cells	: 1-2	0 - 5 /HPF	
Epithelial Cells	: 0-1	0 - 8 /HPF	
RBC COUNT	: Nil	0 - 2 /HPF	
Casts	: Nil		
Crystals	: Nil		
Others	: Nil		

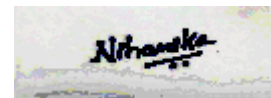
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Bill Date	: 13-Mar-23 09:15 am	Bill No	: BIL147634
Lab No	: 147634	Result No	: RES393771
Samp.Coll	: 13-Mar-23 09:32 am	Auth. Tim	: 13-Mar-2023 1:05 pm
Reported On	: 13-Mar-23 01:05 pm		

<u>Parameter</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Method</u>
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Verified by



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