Name	YOGESH K	ID	MED120920617
Age & Gender	29Year(s)/MALE	Visit Date	3/22/2022 12:00:00 AM
Ref Doctor Name	MediWheel		

SONOGRAM REPORT

WHOLE ABDOMEN

The liver is normal in size and shows uniform echotexture with no focal abnormality.

The gall bladder is partially distended and postprandial.

There is no intra or extra hepatic biliary ductal dilatation.

The pancreas shows a normal configuration and echotexture.

The pancreatic duct is normal.

The portal vein and the IVC are normal.

The spleen is normal.

There is no free or loculated peritoneal fluid.

The right kidney measures 11.0 x 4.3 cm and shows a calculus 0.5 cm in the midpole calyx.

The left kidney measures 11.1 x 4.3 cm and shows a calculus 0.3 cm in the lower pole calyx..

Both kidneys are normal in size, shape and position. Cortical echoes are normal bilaterally.

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There is no calyceal dilatation.

The ureters are not dilated.

The bladder is smooth walled and uniformly transonic.

There is no intravesical mass or calculus.

Prostate measures 2.9 x 3.8 x 2.9 cm (vol-17.9 cc) and is normal sized.

The echotexture is homogeneous.

Parametria are free.

Iliac fossae are normal.

IMPRESSION:

- **Bilateral renal calculi.**

-for clinical correlation

Dr. CATHRINE
SONOLOGIST.

Name	YOGESH K	ID	MED120920617
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Ref Doctor Name	MediWheel		

Name	YOGESH K	ID	MED120920617
Age & Gender	29Year(s)/MALE	Visit Date	3/22/2022 12:00:00 AM
Ref Doctor Name	MediWheel		

Personal Health Report

General Examination:

BP: 120/80 mmhg
Pulse: 84/ min, regular

Systemic Examination:

CVS: S1 S2 heard;
RS : NVBS +.
Abd : Soft.
CNS : NAD

Blood report:

ECHO - No regional wall motion abnormality; Normal LV systolic function.

Eye Test - Distant vision defect.

Vision	Right eye	Left eye
Distant Vision	6/9	6/9
Near Vision	N6	N6
Colour Vision	Normal	Normal

Impression & Advice:

Eye Test - Distant vision defect. To consult an ophthalmologist for further evaluation and management.

DR. NOOR MOHAMMED RIZWAN A. M.B.B.S, FDM
MHC Physician Consultant

Name	YOGESH K	ID	MED120920617
Age & Gender	29Year(s)/MALE	Visit Date	3/22/2022 12:00:00 AM
Ref Doctor Name	MediWheel		

DEPARTMENT OF CARDIOLOGY

TRANSTHORACIC RESTING ECHO CARDIOGRAPHY REPORT

ECHO INDICATION: Assessment **ACOUSTIC WINDOW : GOOD**

M MODE & 2-D PARAMETERS:

LV STUDY

IVS(d) cm	0.6
IVS(s) cm	1.1
LPW(d) cm	0.8
LPW(s) cm	1.5
LVID(d) cm	5.1
LVID(s) cm	3.4
EDV ml	133
ESV ml	40
SV ml	92
EF %	69
FS %	32

Parameters	Patient Value
LA cm	2.6
AO cm	2.0

DOPPLER PARAMETERS

Valves	Velocity max(m/sec mm/Hg)
AV	0.6/2 m/s
PV	0.9/3 m/s
MV (E)	0.7 m/s
((A)	0.7 m/s
TV (E)	1.0/4 m/s

Name	YOGESH K	ID	MED120920617
Age & Gender	29Year(s)/MALE	Visit Date	3/22/2022 12:00:00 AM
Ref Doctor Name	MediWheel		

FINDINGS:

- **No regional wall motion abnormality.**
- **Normal left ventricle systolic function.**
- **No diastolic dysfunction.**
- **Normal chambers dimension.**
- **Normal valves.**
- **Normal pericardium/Intact septae.**
- **No clot/aneurysm.**

IMPRESSION:

NO REGIONAL WALL MOTION ABNORMALITY.
NORMAL LEFT VENTRICLE SYSTOLIC FUNCTION.

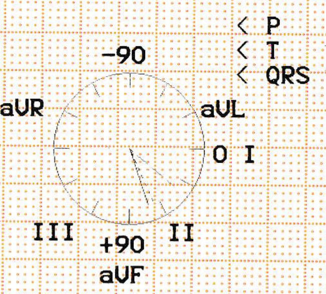
S. VIGNESH M.Sc.
ECHO TECHNICIAN

GE MAC1200 ST   YOGESH K, 0602203551, MEDALL DIAGNOSTICS
Male, 29 Years (12.05.1992)

HR **76** bpm

Measurement Results:

QRS	:	108 ms
QT/QTcB	:	370 / 414 ms
PR	:	140 ms
P	:	106 ms
RR/PP	:	798 / 795 ms
P/QRS/T	:	65/ 70/ 40 degrees
QTD/QTcBD	:	16 / 18 ms
Sokolow	:	1.7 mV
NK	:	10



Interpretation:

normal ECG

Unconfirmed report.

I AVR V1 V4

II AVL V2 V5

III AVF V3 V6

II

22.Mar.2022 10:53:58 25mm/s 10mm/mV ADS 50Hz 0.08 - 40Hz 3_F1_R Automatic V6.2 12i (1)

MEDALL PRECISION DIAGNOSTICS

MEDICAL EXAMINATION FORM

NAME :	MR. YOGESH	HEIGHT:	164.5
DATE OF BIRTH:	12.05.1992	WEIGHT:	76
AGE:	29/M	PULSE:	71
CONTACT NUMBER:	6383662636	BP:	126/65
EMPLOYEE ID:	BOB123044	SIGNATURE:	K. Yogesh

TO BE FILLED BY THE CANDIDATES	No	Yes	If yes,details.........		
Are you taking any medicine?	✓				
Are you married?(in case of female)	–				
Recent complaints					
Past medical history	**No**	**Yes**	**If yes,details.........**		
Fits	✓				
Jaundice	✓				
Asthma	✓				
Operation		✓	Appendicectomy.		
Diabetes	✓				
Tuberculosis	✓				
Blood transfusion	✓				
High BP	✓				
Hospitalisation	✓				
Others(please specify)					
Family medical history	**No**	**Yes**	**If yes,details.........**		
Diabetes		✓	mother diabetic		
Asthma	✓				
High BP	✓				
Cancer	✓				
Miscellaneous	✓				
Smoker	✓		How many/day?	For how many years?	
Alcohol	✓		How often?		
Vegetarian			Non-vegetarian	✓	
Allergy to drugs/food?	✓		If yes,details...		
Any problem with vision?	✓		If yes,details...		
Do you wear glasses or contact lenses?	✓		If yes,details...		
Any problem with hearing?	✓		If yes,when did you check your hearing last?		
Donated blood?		✓	No means,reason..		
			If yes,how many times?	3 times	

Doctor's Observations:

NAD.

Name	YOGESH K	Customer ID	MED120920617
Age & Gender	29Y/M	Visit Date	Mar 22 2022 9:45AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

There is suggestion of dextrocardia(on the basis of right side marking on Xray film)
The arch of aorta is seen on right side.
Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

- Needs clinical correlation.

DR. H.K. ANAND **DR. HIMA BINDU P** **DR. SHWETHA S** **DR. POOJA B.P**

CONSULTANT RADIOLOGISTS

Name	: **Mr. YOGESH K**		**Register On**	:	22/03/2022 9:45 AM
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SID No.	: 602203551		**Report On**	:	24/03/2022 11:09 AM
Age / Sex	: 29 Year(s) / Male		**Printed On**	:	24/03/2022 6:42 PM
Ref. Dr	: **MediWheel**		**Type**	:	OP

Investigation	Observed Value	Unit	Biological Reference Interval

IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING (Blood /Agglutination)	'AB' 'Positive'		

INTERPRETATION: Reconfirm the Blood group and Typing before blood transfusion
If Rh Variant
When Reciepient, Consider patient as Rh negative when Donor, Consider patient as Rh positive.

HAEMATOLOGY

Complete Blood Count With - ESR

Investigation	Observed Value	Unit	Biological Reference Interval
Haemoglobin (Blood/Spectrophotometry)	15.2	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (Blood/Derived from Impedance)	43.9	%	42 - 52
RBC Count (Blood/Impedance Variation)	5.05	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (Blood/ Derived from Impedance)	86.8	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (Blood/Derived from Impedance)	30.1	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (Blood/Derived from Impedance)	34.7	g/dL	32 - 36
RDW-CV (Blood/Derived from Impedance)	12.9	%	11.5 - 16.0
RDW-SD (Blood/Derived from Impedance)	39.19	fL	39 - 46
Total Leukocyte Count (TC) (Blood/ Impedance Variation)	6570	cells/cu.mm	4000 - 11000
Neutrophils (Blood/Impedance Variation & Flow Cytometry)	56.3	%	40 - 75
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	25.7	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	**10.3**	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	7.1	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	0.6	%	00 - 02

INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

Investigation	Observed Value	Unit	Biological Reference Interval
Absolute Neutrophil count (Blood/ Impedance Variation & Flow Cytometry)	3.70	10^3 / µl	1.5 - 6.6
Absolute Lymphocyte Count (Blood/ Impedance Variation & Flow Cytometry)	1.69	10^3 / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (Blood/ Impedance Variation & Flow Cytometry)	**0.68**	10^3 / µl	0.04 - 0.44

DR.NOORUNNISHA
CONSULTANT BIOCHEMIST

Dr. Ramesh Dayanand Kinha
Chief Pathologist
Reg No : 142072

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Investigation	Observed Value	Unit	Biological Reference Interval
Remark: Kindly correlate clinically			
Absolute Monocyte Count (Blood/ Impedance Variation & Flow Cytometry)	0.47	10^3 / µl	< 1.0
Absolute Basophil count (Blood/Impedance Variation & Flow Cytometry)	0.04	10^3 / µl	< 0.2
Platelet Count (Blood/Impedance Variation)	282	10^3 / µl	150 - 450
MPV (Blood/Derived from Impedance)	9.9	fL	7.9 - 13.7
PCT (Blood/Automated Blood cell Counter)	0.28	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated - Westergren method)	8	mm/hr	< 15

BIOCHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
BUN / Creatinine Ratio	10.5		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	88.6	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

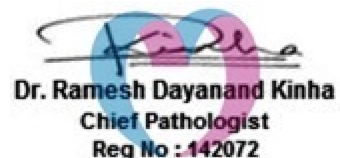
Investigation	Observed Value	Unit	Biological Reference Interval
Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/ GOD-PAP)	99.5	mg/dL	70 - 140

INTERPRETATION:
Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Investigation	Observed Value	Unit	Biological Reference Interval
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	10.7	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	1.01	mg/dL	0.9 - 1.3

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists,N-acetylcysteine, chemotherapeutic agent such as flucytosine etc.

Investigation	Observed Value	Unit	Biological Reference Interval
Uric Acid (Serum/Enzymatic)	7.1	mg/dL	3.5 - 7.2
Liver Function Test			
Bilirubin(Total) (Serum/DCA with ATCS)	0.90	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.24	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.66	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	21.7	U/L	5 - 40



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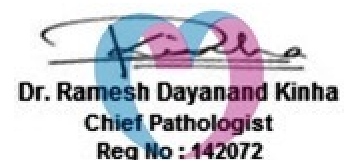
Investigation	Observed Value	Unit	Biological Reference Interval
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	22.7	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	25.8	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/ Modified IFCC)	68.9	U/L	53 - 128
Total Protein (Serum/Biuret)	6.98	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.51	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.47	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.83		1.1 - 2.2
Lipid Profile			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	134.8	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	75.1	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.

Investigation	Observed Value	Unit	Biological Reference Interval
HDL Cholesterol (Serum/Immunoinhibition)	**37.1**	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	82.7	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	15	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	97.7	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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Investigation	Observed Value	Unit	Biological Reference Interval
Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3.6		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)	2		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/ Calculated)	2.2		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

Glycosylated Haemoglobin (HbA1c)

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1C (Whole Blood/HPLC)	5.2	%	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 %

Investigation	Observed Value	Unit	Biological Reference Interval
Estimated Average Glucose (Whole Blood)	102.54	mg/dL	

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 glycemic 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.

IMMUNOASSAY

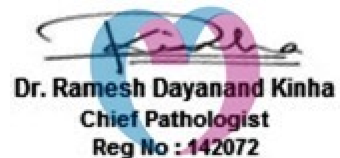
THYROID PROFILE / TFT

Investigation	Observed Value	Unit	Biological Reference Interval
T3 (Triiodothyronine) - Total (Serum/ Chemiluminescent Immunometric Assay (CLIA))	0.81	ng/ml	0.7 - 2.04

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.

Investigation	Observed Value	Unit	Biological Reference Interval
T4 (Tyroxine) - Total (Serum/ Chemiluminescent Immunometric Assay (CLIA))	4.87	µg/dl	4.2 - 12.0

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.



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Ref. Dr	**:**	**MediWheel**	**Type**	**:**	OP

Investigation	Observed Value	Unit	Biological Reference Interval
TSH (Thyroid Stimulating Hormone) (Serum /Chemiluminescent Immunometric Assay (CLIA))	2.74	µIU/mL	0.35 - 5.50

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<0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

CLINICAL PATHOLOGY

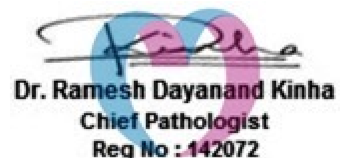
Urine Analysis - Routine

COLOUR (Urine)	Pale yellow		Yellow to Amber
APPEARANCE (Urine)	Clear		Clear
Protein (Urine/Protein error of indicator)	Negative		Negative
Glucose (Urine/GOD - POD)	Negative		Negative
Pus Cells (Urine/Automated .ÅFlow cytometry)	**1 - 2**	/hpf	NIL
Epithelial Cells (Urine/Automated .ÅFlow cytometry)	**1 - 2**	/hpf	NIL
RBCs (Urine/Automated .ÅFlow cytometry)	NIL	/hpf	NIL
Casts (Urine/Automated .ÅFlow cytometry)	NIL	/hpf	NIL
Crystals (Urine/Automated .ÅFlow cytometry)	NIL	/hpf	NIL
Others (Urine)	NIL		

INTERPRETATION: Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

Stool Analysis - ROUTINE

Colour (Stool)	Brown		Brown
Blood (Stool)	Absent		Absent
Mucus (Stool)	Absent		Absent



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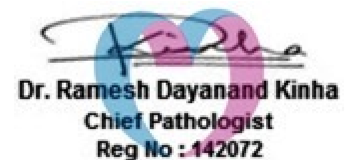
Investigation	Observed Value	Unit	Biological Reference Interval
Reaction (Stool)	Acidic		Acidic
Consistency (Stool)	Semi Solid		Semi Solid
Ova (Stool)	NIL		NIL
Others (Stool)	NIL		NIL
Cysts (Stool)	NIL		NIL
Trophozoites (Stool)	NIL		NIL
RBCs (Stool)	NIL	/hpf	Nil
Pus Cells (Stool)	**1 - 2**	/hpf	NIL
Macrophages (Stool)	NIL		NIL
Epithelial Cells (Stool)	NIL	/hpf	NIL

-- End of Report --



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