




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.SINGAMSHETTY CHENNAMMA [178770]** TID/SID : UMR1402388/ 27375148
 Age / Gender : 30 Years / Female Registered on : 23-Mar-2024 / 10:30 AM
 Ref.By : - Collected on : 23-Mar-2024 / 10:29 AM
 Req.No  Reported on : 23-Mar-2024 / 15:13 PM
 BIL4079352 Reference : Medi Wheel

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Light Yellow		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.010		1.003-1.030
Reaction and pH Method:Double Indicator	7.0		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
Microscopic Examination			
Pus cells (leukocytes) Method:Microscopy Of Sediment	Occasional	/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 ---



Yatish Sai

Dr. Yatish Sai Lanke
Regd. No: 00856
MD PATHOLOGY




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DEPARTMENT OF HEMATOLOGY

Blood Grouping ABO And Rh Typing, EDTA Whole Blood

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

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 Req.No  Reported on : 23-Mar-2024 / 13:06 PM
 BIL4079352 Reference : Medi Wheel

DEPARTMENT OF HEMATOLOGY

Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	13.4	g/dL	12.0-15.0 g/dL
Erythrocyte Count(RBC) Method:Electrical Impedence	5.1	mill /cu.mm	3.8-4.8 mill /cu.mm
PCV/HCT Method:Numeric Integration	39	%	36-46 %
MCV Method:Calculated	76	fL	83-101 fL
MCH Method:Calculated	25.9	pg	27-32 pg
MCHC Method:Calculated	34.0	gm/dL	31.5-34.5 gm/dL
RDW (CV) Method:Calculated	13.3	%	11.6-14.0 %
Total WBC Count Method:Impedence flowcytometry/Light scattering	7.9	10 ³ /μL	4-10 10 ³ /μL
Differential Count			
Neutrophils Method:Flowcytometry/Microscopy	68	%	40-80 %
Lymphocytes Method:Flowcytometry/Microscopy	25	%	20-40 %
Monocytes Method:Flowcytometry/Microscopy	3	%	2-10 %
Eosinophils Method:Flowcytometry/Microscopy	4	%	1-6 %
Basophils Method:Flowcytometry/Microscopy	0	%	0-2 %
Absolute Neutrophil Count	5.37	10 ³ /μL	2.0-7.0 10 ³ /μL
Absolute Lymphocyte Count	1.98	10 ³ /μL	1.0-3.0 10 ³ /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	0.24	10 ³ /μL	0.20-1.0 10 ³ /μL
Absolute Eosinophils Count	0.32	10 ³ /μL	0.02-0.5 10 ³ /μL
Absolute Basophil Count	0	10 ³ /μL	0.02-0.1 10 ³ /μL
Platelet Count	260	10 ³ /μL	150-410 10 ³ /μL
Method:Electrical Impedence			

Peripheral Smear

RBC Normocytic and Normochromic
Method:Microscopy
WBC Within normal limits.No abnormal cells seen.
Method:Microscopy
Platelets Discrete and adequate.Normal in morphology
Method:Microscopy

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DEPARTMENT OF HEMATOLOGY

Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour Method:Westergren	18	mm/hour	0-20 mm/hour

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Age / Gender : 30 Years / Female Registered on : 23-Mar-2024 / 10:30 AM
Ref.By : - Collected on : 23-Mar-2024 / 10:29 AM
Req.No :  Reported on : 23-Mar-2024 / 15:04 PM
Reference : Medi Wheel
BIL4079352

DEPARTMENT OF CLINICAL CHEMISTRY I

Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen.	8.7	mg/dL	7-23 mg/dL
Method:Calculated			

Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine.	0.68	mg/dL	0.50-1.20 mg/dL
Method:Alkaline Picrate			

Glucose Urine Fasting

Investigation	Observed Value
Urine Glucose Fasting	Nil
Method:Reagent strip/Reflectance photometry	

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Req.No :  Reported on : 23-Mar-2024 / 15:04 PM
Reference : Medi Wheel
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DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	94	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : >/=126 mg/dL

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Req.No :  Reported on : 23-Mar-2024 / 15:04 PM
Reference : Medi Wheel
BIL4079352

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	108	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : \geq 200 mg/dL

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Req.No  Reported on : 23-Mar-2024 / 16:03 PM
Reference : Medi Wheel
BIL4079352

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)	4.9	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	93	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 :

- Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 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.
- In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
- 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.
- 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.

* Sample processed at Parkline

--- End Of Report ---

J.G.Mallika

Dr V G Mallika
Regd. No: 63194
MD PATHOLOGY






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Ref.By : - Collected on : 23-Mar-2024 / 10:29 AM
Req.No  Reported on : 23-Mar-2024 / 14:59 PM
Reference : Medi Wheel
BIL4079352

DEPARTMENT OF CLINICAL CHEMISTRY I

Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	195	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	47	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	128	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	20	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	102	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	4.15		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio Method:Calculated	2.72		Ideal : < 2 Good : 2 - 5 Bad : > 5

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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	0.58	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.13	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.45	mg/dL	0.2-0.8 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	20	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	60	U/L	30-115 U/L
PROTEINS			
Total Protein. Method:Biuret	7.61	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.45	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	3.16	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.41		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	17	U/L	7.0-50.0 U/L

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Reference : Medi Wheel
BIL4079352

DEPARTMENT OF CLINICAL CHEMISTRY I

Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.53	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	15.0	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	3.06	µIU/mL	0.400-4.049 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. Method:Uricase	4.65	mg/dL	1.9-7.5 mg/dL

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DEPARTMENT OF HEALTH CHECKUP

Glucose Urine Post Prandial

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

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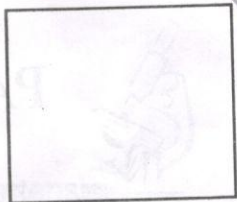
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MEDICAL EXAMINATION REPORT

Name	Mrs. Singamshetty chennamma		Date :	23/3/24
Company	C/O Mediwhel		Reg. No. :	4679352
Contact No.	9989459662		Sex	<input type="checkbox"/> M <input checked="" type="checkbox"/> F
			Age :	<input type="checkbox"/> 20 <input checked="" type="checkbox"/> 30
Type	Pre-Emp		Emp. No.:	17870
	Overseas		Height	165cm
	Annual	<input checked="" type="checkbox"/>	Weight	61kgs
Remarks	Slightly elevated Ty levels. Advice follow up. Rest all physical & lab parameters wnl.			
Fitness	Medically Fit / Unfit		 Dr. PRIYANKA SANNIDHI Physician's Signature MBBS Regn. No. 11351	

COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Ms. Singamshetty Chennamma
 AGE 30 yrs / female
 MARITAL STATUS married CHILDREN : M 1 F 1
 IDENTIFICATION (IF ANY) A mole on forehead.



PAST HISTORY

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

6 6 6 6 6 6

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

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

H/o Blood Transfusion..... Recent Vaccination..... COVAXIN 2 Doses

H/o Epilepsy..... NIL..... Giddiness..... NIL

H/o Surgery..... 2 LSCs 2022..... Fracture in the past..... NIL
2020

Any Personal H/O.

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

6 6 6 6 6 6

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

6 6 6 6 - - -

Present illness / Medication

GENERAL EXAMINATION

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

NAD

Bone, Joints : (2)
 Nutritional Status : well nourished
 Lymph Nodes : NPD
 Edema Feet : NIL
 Varicose Veins : NIL

Distant Vision : Near Vision :

Right Eye: 6/6

Right Eye: 6/6

With glasses / Without glasses

With glasses / Without glasses

left Eye: 6/6

left Eye: 6/6

with glasses / without glasses

with glasses / without glasses

Colour Vision : BE normal

DR. KATTA
M.B.S., D.O., F.R.C.
Ophthalmologist's Signature

Right Ear

Left Ear

Hearing :

Rinee's Test ;

Weber Test :

Discharge :

SYSTEMIC EXAMINATION

Pulse : 80 bpm

B.P. : 120 / 80 mmHg

Lungs : A. Shape of Chest nlc symmetrical
B. Breath Sounds nlc - clear
C. Adventitious Sounds no

Heart : A. Sounds nlc
B. Murmurs no

Nervous System

Abdomen : A. Liver NPD
B. Spleen NPD
C. Piles no
D. Any Lump no

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

General : A. Hernia
B. Hydrocele
C. Varicocele
nlc

Breast : Rt - Lt -

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, Sarojini Devi Road, Secunderabad - 500 003 Tel : 040 - 4203 8139, 2784 5852
7995421787, 7093445852 Email : parklinediagnostics@gmail.com...www.parklinediagnostics.com



NABL Accredited
Certificate No. MC-2566

ENT EXAMINATION

S. No.

Emp. No. :

Date

Name Mrs. Chennamma.

Age

Yrs

Sex M/F

EARS :

Right

Left

EAC

:

(N)

(N)

TM

:

1

(V) (N)

(V) (N)

TFT

:

Rinne's AC > BC

AC > BC

Waxer's



ABC same as examination

NOSE

:

Septum central I (N)

THROAT

:

AP | TF | PPW (N)

NECK

:

No central/lateral neck swelling

IMPRESSION :

ENT well within normal limits

Consultant ENT

Dr. D. Hari Krishna Reddy
MS (ENT)
Head & Neck Surgeon
Reg. No: 88379

Name : Chennamma (Parkline) Sex : F Age : 30

Pt has come for routine dental checkup.

Date : 23/3/24

OPD No : 1811

O/E:
 =

RC treated with


Crowns irt

7654

Restored teeth irt

67

Dr. Khiron.


 MULTI SPECIALITY DENTAL CLINIC
Smile Confidentially... Not Confidentially....
 B.D.S, IMPLANTOLOGIST (USA)
 1-3-1, Rajamudaliar Street, Kalasiguda,
 Secunderabad, Cell : 8977910590,

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From
Chennamma Singamshetty
Bank of Baroda.

To

Park View Diagnostic Centre.

Sub: NO need of ECG & TMT (2D ECG)

Dear Sir/Madam,

Recently I went through
Tubectomy surgery. At that time a doctor
suggested these tests that's why I am
refused to take these tests.

Thanking you.

Yours faithfully,
S. Chennamma.



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TEST REPORT

Name : **Ms . SINGAMSHETTY CHENNAMMA [178770]**
Age / Gender : 30 Years / Female
Ref.By :
Req. No : BIL4079352

TID : UMR1402388
Registered on : 23-Mar-2024 10:30 AM
Reported On : 23-Mar-2024 01:44 PM
Reference : Medi Wheel

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 sludge / gall stones / sol.
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 : 9.82 x 4.93 cms.
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

LEFT KIDNEY : 9.74 x 4.86 cms.
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

URINARY BLADDER : Well distended.Normal in contour.
Wall thickness is normal. No calculus / sol.


UTERUS : Anteverted measuring 8.92 x 4.93 x 3.86 cms - Normal in size and echotexture.
No space occupying lesion is seen.
Cervix is normal in size and echopattern.

ENDOMETRIUM : 8 mm -Normal.

OVARIES : Right ovary : 2.31 x 1.99 cms Left ovary : 2.86 x 2.12 cms.
Both ovaries normal in size and echotexture.
No adnexal mass seen.
No fluid in POD.

IMPRESSION : No significant sonographic abnormality detected.

Clinical correlation.


Dr. PRAJAKTA SUKHADEVE
DNB RADIOLOGY
Reg. No. 68493



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TEST REPORT

Name : Ms . SINGAMSHETTY CHENNAMMA [178770

TID : UMR1402388

Age / Gender : 30 Years / Female

Registered on : 23-Mar-2024 10:30 AM

Ref.By :

Reported On : 23-Mar-2024 01:42 PM

Req. No : BIL4079352

Reference : Medi Wheel

X-RAY CHEST PA VIEW

Lung fields are clear.

Cardia is normal.

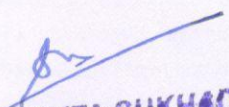
Hila are normal.

C P angles are free.

Bony cage is normal.

Soft tissues are normal.

IMPRESSION : NORMAL CHEST X-RAY


Dr. PRAJAKTA SUKHADEVE
DNB RADIOLOGY
Reg. No. 08493