

## CARDIOLOGY

<b>UHID / IP NO</b>	226552 (11283)	<b>RISNo./Status :</b>	116703/
<b>Patient Name :</b>	Mr. M SRIKANTH	<b>Age/Gender :</b>	49 Y/M
<b>Referred By :</b>	Dr. CMO	<b>Ward/Bed No :</b>	OPD
<b>Bill Date/No :</b>	24/02/2024 8:13AM/ OPCR/24/7643	<b>Scan Date :</b>	
<b>Report Date :</b>	24/02/2024 9:30AM	<b>Company Name:</b>	Final

### M- MODE MEASUREMENTS

<b>AO</b>	2.70	cm	<b>RVIDD</b>	1.45	cm
<b>LA</b>	3.45	cm	<b>IVSD</b>	1.37	cm
<b>AO/LA RATIO</b>	0.85	cm	<b>LVIDD</b>	4.16	cm
<b>AV CUP</b>	1.52	cm	<b>LVPWD</b>	1.26	cm
<b>EPSS</b>		cm	<b>IVSS</b>	1.68	cm
<b>DE</b>	1.83	cm	<b>LVIDS</b>	2.75	cm
<b>EF SLOPE</b>	0.7	cm	<b>LVPWS</b>	1.41	cm
<b>SV</b>	57.41		<b>EDV</b>	76.72	ml
<b>CO</b>			<b>ESV</b>	28.34	ml
<b>HR</b>			<b>EF</b>	63.73	%
<b>LVMl</b>			<b>FS</b>	33.90	%
<b>OTHERS</b>			<b>LV MASS</b>	188.32	grams

**DESCRIPTIVE FINDINGS:** Technically Adequate Study. Normal Sinus rhythm during Study.

<b>LEFT VENTRICLE</b>	Concentric LVH
<b>LEFT ATRIUM</b>	Normal in size
<b>RIGHT VENTRICLE</b>	Normal in size
<b>RIGHT ATRIUM</b>	Normal in size
<b>WALL MOTION ANALYSIS</b>	No RWMA
<b>TRICUSPID VALVE</b>	Normal
<b>MITRAL VALVE</b>	Normal
<b>PULMONIC VALVE</b>	Normal
<b>AORTIC VALVE</b>	Normal
<b>IAS &amp; IVS</b>	Intact
<b>AORTA &amp; PA</b>	Normal In Size
<b>SYSTEMIC &amp; PULMONARY VENIS</b>	Normally Draining
<b>PERICARDIUM</b>	Normal
<b>OTHERS</b>	No Intra Cardiac Thrombus, Tumour or Vegetation

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### DOPPLER STUDY

<b>VALVES</b>	<b>VELOCITY</b>	<b>GRADIENT</b>	<b>REGURGITATION</b>	<b>OTHERS</b>
<b>P V</b>	0.71m/s		NO PR	
<b>MV</b>	E: 0.96m/s A: 1.06m/s		TRIVIAL MR	
<b>AV</b>	1.05m/s		NO AR	
<b>TV</b>	E: 0.60m/s A: 0.40m/s		MILD TR	
<b>OTHERS</b>				

### SUMMARY FINDINGS:

CONCENTRIC LV HYPERTROPHY

NO REGIONAL WALL MOTION ABNORMALITY AT REST

NORMAL LV SYSTOLIC FUNCTION (EF-63 %)

GRADE-1 LVDD, TRIVIAL MR

NO CLOT / PE / VEGETATION / PAH

**Dr. PRANEETHS**  
CONSULTANT  
CARDIOLOGIST

**Mr. Naveen Kumar M K**

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<b>NAME</b>	: Mr. M SRIKANTH	<b>VISIT ID</b>	: 24030059402
<b>GENDER</b>	: Male	<b>AGE</b>	: 49 Years
<b>REFERRED BY</b>	:	<b>DATE OF REGISTRATION</b>	: 24-Feb-2024 14:54
<b>REF CENTER</b>	: VASAVI HOSPITAL & LABORATORY SERVICES	<b>DATE OF COLLECTION</b>	: 24-Feb-2024 14:54
		<b>DATE OF REPORT</b>	: 24-Feb-2024 16:25
		<b>REF NO.</b>	:

**LABORATORY TEST REPORT**

TEST PARAMETER	RESULT	UNIT	REFERENCE RANGE	SAMPLE TYPE
<b>CLINICAL BIOCHEMISTRY</b>				
<b>PROSTATE SPECIFIC ANTIGEN (PSA)- Total</b> Method : ECLIA	1.45	ng/ml	0 - 4.0	Serum

Processed By : AUTO

----- End Of Report -----

Rajkumar R  
 MSc Biochemistry  
 Biochemist

Report Status: Final

Outside samples to be correlated with other clinical findings

# All investigation have their limitation which are imposed by the limits of sensitivity and specificity of individual assay procedures as well as the specimen received by the laboratory. Isolated laboratory investigations never confirm the final diagnosis of the disease. They only help in arriving at a diagnosis in conjunction with clinical presentation and other related investigations. Reports to be correlated clinically.

# Sample outsourced, will be processed at a NABL Accredited Laboratory.

# This document is valid for Lab Reports only and not valid for Medico legal cases. Terms and conditions of reporting are mentioned in appended sheet.





<b>NAME</b>	: Mr. M SRIKANTH	<b>VISIT ID</b>	: 24030059402
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### LABORATORY TEST REPORT

#### TERMS & CONDITIONS OF REPORTING

- It is presumed that the specimen belongs to the patient named or identified in the test request form.
- The report results are for information and interpretation for your referring doctor can be correlated with the patient's clinical history.
- Biological Reference Range/Interval is suggested for your Gender and Age on the basis of available literature. All reference ranges are to be reconsidered by the doctor's advice for your specific care.
- Test requested might not be performed for the following reasons
  - Specimen quality insufficient (inadequate collections/spillage in transit)
  - Specimen quality unacceptable (haemolysed/clotted/ lipemic etc.)
  - Incorrect specimen type.
  - Test cancelled either or request of patient or doctor, or because of incorrect test code, test name of specimen received. Reference may be provided to a new Accession number. Under "COMMENT" if the specimen has been re-accessioned for a different test. It is expected that a fresh specimen will be sent for the purpose of reporting on the same parameter(s), if required.
- This Medical Report is a professional opinion, not a diagnosis. Test results are not valid for medico legal purposes.
- The report will carry the name and age provided at the time of registration. To maintain confidentiality, certain reports may not be e-mailed at the discretion of the management.
- All the notes and interpretation beneath the test result in the report provided are for educational purposes only. It is not intended to be a substitute for doctor's consultation.
- Reports that carries a 'PRELIMINARY' status signifies that results are yet to be reported for one or more of the test, or else as is the case with many microbiology tests, a "FINAL.'" culture, identification or drug susceptibility result might be pending. In such case, the descriptor "RESULTS" column will be replaced by the test results whenever the latter are ready. The report will, when completed, acquire a "FINAL.'" status.
- Results of tests may vary from laboratory to laboratory and in some parameters from time to time for the same patients. Test results and reference range may also vary depending on the technology and methodology used. Laboratory test results may also vary depending on the age, sex, time of the day sample has been taken, diet, medication and limitation of modern technology.
- In case of any unexpected or alarming test results, please contact us immediately for re-confirmation, further discussion, clarifications and rectifications, if needed only.
- In case of any discrepancy due to typing error, kindly get It rectified immediately. The collection date was not stated in the Test Requisition Form, the same will not be printed on the report.
- The Lab or its employees/representatives does not assume any liability or responsibility for any loss or damage that may be incurred by any person as result of interpreting the meaning of this report.
- In case of any issues or suggestions about your test results, please email us on [lab@tridentdiagnostics.com](mailto:lab@tridentdiagnostics.com)
- Our liability is limited to the amount of investigations booked with us.
- The courts (forums) at Bengaluru shall have exclusive jurisdiction in all disputes/claims concerning the tests and the results of the tests.

Report Status: Final

Outside samples to be correlated with other clinical findings

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Tests marked with NABL symbol are accredited by NABL vide Certificate no MC-2251



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<b>Age/Gender</b>	49 Yrs/Male	<b>Receiving Date</b>	24/02/2024 9:20AM
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 2:15PM
<b>Referred By</b>	Dr. CMO	<b>Report Status</b>	Final
<b>Bill No.</b>	OPCR/24/7643	<b>Manual No.</b>	

## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>Sample: Serum</b>				
BLOOD UREA NITROGEN	5.4	mg/dl	Upto 14 years : 5 - 18 mg/dl Male (above 14 years): 8 - 24 mg/dl Female (above 14 years): 6 - 21 mg/dl Pregnant women : 5 - 12 mg/dl	
SERUM CREATININE	<b>0.36 L</b>	mg/dl	0.60 - 1.40	
FASTING BLOOD SUGAR	<b>131.3 H</b>	mg/dl	74.00 - 100.00	
<b>GLYCOSYLATED HAEMOGLOBIN (HbA1c)</b>				
HbA1c (GLYCOSYLATED Hb)	5.4	%	4.00 - 6.00	Immunoturbidimetric
MEAN BLOOD GLUCOSE	108.28	mg/dl	70.00 - 140.00	
<b>LIPID PROFILE</b>				
TOTAL CHOLESTEROL	<b>239 H</b>	mg/dl	0.00 - 200.00	
TRIGLYCERIDES	192	mg/dl	0.00 - 200.00	
HDL CHOLESTEROL - DIRECT	43.8	mg/dl	35.00 - 55.00	
LDL CHOLESTROL - CALCULATED	<b>156.8 H</b>	mg/dl	0 - 130	
TC/HDL	5.46			
LDL/HDL	3.58			

**Sample: Serum**

## LIVER FUNCTION TEST (LFT)

**Verified By**  
Shashi Kumar G

*Ravi Shankar*

**Ravi Shankar K**  
**Bio Chemist**

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TOTAL BILIRUBIN 0.59 mg/dl Adult - 0.2 - 1.3 mg/ dL

### Special condition:

Premature - <2.0 mg/ dL  
Full term - <2.0 mg/ dL  
0-1 day - Premature-  
1.0 - 8.0 mg/ dL  
0-1 day - Full term -  
2.0 - 6.0 mg/ dL  
1 - 2 days Premature -  
6.0 - 12.0 mg/ dL  
1 - 2 days Full term -  
6.0 - 10.0 mg/ dL  
3 - 5 days Premature -  
10.0 - 14.0 mg/ dL  
3 - 5 days Full term -  
4.0 - 8.0 mg/ dL

DIRECT BILIRUBIN	0.27	mg/dl	0.00 - 0.30
INDIRECT BILIRUBIN.	0.32	mg/dl	
ASPARATE AMINOTRANSFERASE (SGOT/AST)	39.4	U/L	0.00 - 40.00
ALANINE AMINOTRANSFERASE (SGPT/ALT)	<b>60.3 H</b>	U/L	0.00 - 40.00
ALKALINE PHOSPHATASE (ALP)	66	IU/L	53.00 - 128.00
TOTAL PROTEIN	6.73	g/dl	6.00 - 8.50
SERUM ALBUMIN	4.21	g/dl	3.50 - 5.20
SERUM GLOBULIN	2.52	g/dl	2.30 - 3.50
A/G RATIO	1.67	%	1.00 - 2.00
POST PRANDIAL BLOOD GLUCOSE	<b>202.3 H</b>	mg/dl	70.00 - 140.00
URIC ACID	4.5	mg/dl	4.50 - 8.10

Verified By

Shashi Kumar G

Ravi Shankar K

Bio Chemist

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<b>Referred By</b>	Dr. CMO	<b>Report Status</b>	Final
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<b>Age/Gender</b>	49 Yrs/Male	<b>Receiving Date</b>	24/02/2024 9:20AM
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 1:21PM
<b>Referred By</b>	Dr. CMO	<b>Report Status</b>	Final
<b>Bill No.</b>	OPCR/24/7643	<b>Manual No.</b>	

## CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>UIRNE GLUCOSE FASTING</b>				
URINE SUGAR	NIL		NEGATIVE	Sample: Urine
<b>PHYSICAL CHARACTERS</b>				
COLOUR	Pale Yellow			
APPEARANCE	Clear		Clear	
SPECIFIC GRAVITY	1.010			
PH	6.5			
<b>CHEMICAL CONSTITUENTS</b>				
ALBUMIN	Nil			
SUGAR	Nil			
BILE SALTS	Absent			
BILE PIGMENTS	Absent			
KETONE BODIES	NEGATIVE			
BLOOD	Absent			
<b>MICROSCOPY</b>				
PUS CELLS	3-4/HPF			
R.B.C	Nil			
EPITHELIAL CELLS	2-3/HPF			
CASTS	Absent			
CRYSTALS	Absent			
BACTERIA	Absent			

--End Of Report--

**Verified By**  
Shashi Kumar G

  
**BADARINATH S**  
MD (PGI) KMC No 19014  
HEMATOPATHOLOGIST / PATHOLOGIST

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<b>Age/Gender</b>	49 Yrs/Male	<b>Receiving Date</b>	24/02/2024 12:36PM
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 1:21PM
<b>Referred By</b>	Dr. CMO	<b>Report Status</b>	Final
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## CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>URINE GLUCOSE-POST PRANDIAL</b>				
URINE SUGAR	Trace		NEGATIVE	
--End Of Report--				

**Verified By**  
Shashi Kumar G

  
**Ravi Shankar K**  
**Bio Chemist**

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<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 2:28PM
<b>Referred By</b>	Dr. CMO	<b>Report Status</b>	Final
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## HAEMATOTOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
BLOOD GROUP	"A"			
RH TYPE	POSITIVE			
			<b>Sample: Blood</b>	
HAEMOGLOBIN	<b>13.9 L</b>	gm/dl	14.00 - 18.00	
TOTAL COUNT	7160	cells/cumm	4500.00 - 11000.00	
<b>DLC</b>				
NEUTROPHILS	63	%	35.00 - 66.00	
LYMPHOCYTES	24	%	24.00 - 44.00	
MONOCYTES	06	%	4.00 - 10.00	
EOSINOPHILS	<b>07 H</b>	%	1.00 - 6.00	
BASOPHILS	00	%	0.00 - 1.00	
R.B.C COUNT	5.43	mill/cumm	4.50 - 5.90	
PACKED CELL VOLUME (PCV)	<b>39.6 L</b>	%	40.00 - 50.00	
PLATELET COUNT	2.65	lakh/cumm	1.50 - 4.50	
M.C.V	<b>72.9 L</b>	fL	80.00 - 100.00	
M.C.H	<b>25.6 L</b>	pg	26.00 - 34.00	
M.C.H.C	35.2	%	32.00 - 36.00	
ESR (ERYTHROCYTE SEDIMENTATION RATE)	10	mm/hr	0.00 - 12.00	

--End Of Report--

Verified By

Shashi Kumar G

**BADARINATH S**

**MD (PGI) KMC No 19014**

**HEMATOPATHOLOGIST / PATHOLOGIST**

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<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 12:17PM
<b>Referred By</b>	Dr. CMO	<b>Report Status</b>	Final
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## HORMONES

Test Name	Result	Unit	Biological Ref. Range	Method
<b>THYROID PROFILE (T3, T4, TSH)</b>				
TOTAL TRIIODOTHYRONINE (T3)	1.30	ng/mL	0.59 - 2.15	
TOTAL THYROXINE (T4)	102	ng/mL	52.00 - 127.00	
TSH (THYROID STIMULATING HORMONE)	<b>7.85 H</b>	uIU/ml	0.30 - 4.50	

--End Of Report--

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Shashi Kumar G

  
**Ravi Shankar K**  
**Bio Chemist**

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## USG

### ABDOMEN & PELVIS (USG)

### Verified By

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<b>Age/Gender</b>	49 Yrs/Male	<b>Receiving Date</b>	24/02/2024 10:07AM
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 10:10AM
<b>Referred By</b>	Dr. CMO	<b>Report Status</b>	Final
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**LIVER:** Liver is 13.2 cm in size, both lobes of liver are normal in size with **increased echotexture**. No evidence of any focal lesion / intrahepatic billiary dilatation noted. CBD and Portal vein normal in size and echotexture.

**GALL BLADDER:** Partially distended, gall bladder wall thickness is normal. Contents are clear. No evidence of gall stones / cholecystitis.

**PANCREAS:** Obscured by bowel gas.

**SPLEEN:** Normal in size measuring 10.6 cms with normal echotexture.

**KIDNEYS:** Both kidneys are normal in size, shape, contour & position. Cortico medullary differentiation is well maintained. No evidence of any hydronephrosis / hydroureter. Right Kidney measures: 11.3 x 1.6 cms.  
Left Kidney measures : 11.0 x 1.2 cms.

**URINARY BLADDER:** Well distended with clear contents. Wall thickness is normal.

**PROSTATE:** is enlarged in size. Vol: 31.0 cc.  
No focal lesion seen. Both seminal vesicles appear normal.

No obvious free fluid in the peritoneal cavity.


**IMPRESSION:**

- Fatty liver.
- Prostatomegaly.

**\*\* Note:** All abnormalities cannot be detected by Ultrasound scan due to technical limitation, obesity and other factors. Scan findings to be correlated with old reports or other investigations.

--End Of Report--

**Verified By**  
Shashi Kumar G

  
**Dr. Chinmaya S Kudari**  
MBBS,MD in RadioDiagnosis  
Consultant Radiologist

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## LABORATORY

<b>Patient Name</b>	Mr. M SRIKANTH	<b>Lab No</b>	116703
<b>UHID</b>	226552	<b>Sample Date</b>	24/02/2024 8:13AM
<b>Age/Gender</b>	49 Yrs/Male	<b>Receiving Date</b>	24/02/2024 9:48AM
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 1:13PM
<b>Referred By</b>	Dr. CMO	<b>Report Status</b>	Final
<b>Bill No.</b>	OPCR/24/7643	<b>Manual No.</b>	

## X-RAY

### CHEST PA VIEW (X RAY)

#### FINDINGS:

The lungs on the either side show equal translucency.

Cardiac size and ventricular configuration are normal.

Both hilar region appear normal.

Both C P angles appear clear.


Both domes of diaphragm appear normal.

Bony cage and soft tissue appear normal.

**IMPRESSION: ESSENTIALLY NORMAL STUDY.**

--End Of Report--

**Verified By**  
Shashi Kumar G

  
**Dr. Chinmaya S Kudari**  
MBBS,MD in RadioDiagnosis  
Consultant Radiologist

\*You can access your Lab & Radiology reports online through the Patient Portal

\*In the Patient Portal, you can log in through your UHID No. & your registered Mobile No. shall be your Password.

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