

Visit ID	: YGT56608	UHID/MR No	: YGT.0000056430
Patient Name	: Mr. KOMMU MANOJ KUMAR A SWAROOP	Client Code	: YOD-DL-0021
Age/Gender	: 38 Y 0 M 0 D /M	Barcode No	: 10943538
DOB	:	Registration	: 24/Feb/2024 08:59AM
Ref Doctor	: SELF	Collected	: 24/Feb/2024 08:59AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 24/Feb/2024 12:04PM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**ULTRASOUND WHOLE ABDOMEN**

Clinical Details : General check-up.

LI VER : Normal in size (14.5 cm) and echo-texture. No focal lesion is seen. Intra hepatic biliary channels are not dilated.

GALL BLADDER : Well distended. No evidence of wall thickening / calculi.

Visualised common bile duct & portal vein appears normal.

PANCREAS : Normal in size and outlines. Parenchymal texture normal. No ductal dilatation. No calcifications / calculi.

SPLEEN : Normal in size (12.0 cm) and echotexture. No focal lesion is seen.

RIGHT KIDNEY : measures 9.8x4.7 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

LEFT KIDNEY : measures 10.2x5.3 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

URINARY BLADDER : Well distended. No evidence of wall thickening / calculi.

PROSTATE : Normal in size and echo-texture.

No enlarged nodes are visualised. No retro-peritoneal lesion is identified. Great vessels appear normal.

No free fluid is seen in peritoneal cavity.

IMPRESSION:

- No obvious sonological abnormality detected.

Verified By :
Kollipara Venkateswara Rao



Approved By :

Sushma
Dr. SUSHMA VUYYURU
MBBS; MD (Radio-Diagnosis)
CONSULTANT RADIOLOGIST

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DEPARTMENT OF RADIOLOGYX-RAY CHEST PA VIEWFindings:

Rotated film.

Soft tissues/ bony cage normal.

Trachea and Mediastinal structures are normal.

Heart size and configuration are normal.

Aorta and pulmonary vascularity are normal.

Lung parenchyma and CP angles are clear.

Bilateral hilae and diaphragmatic contours are normal.

IMPRESSION :

- No Significant Abnormality Detected.

Suggested Clinical Correlation & Follow up.

Verified By :
Kollipara Venkateswara Rao



Approved By :

Sushma Vuyyuru
Dr.SUSHMA VUYYURU
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CONSULTANT RADIOLOGIST

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Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 24/Feb/2024 10:34AM
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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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ESR (ERYTHROCYTE SEDIMENTATION RATE)

Sample Type : WHOLE BLOOD EDTA

ERYTHROCYTE SEDIMENTATION RATE	10	mm/1st hr	0 - 15	Capillary Photometry
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COMMENTS:

ESR is an acute phase reactant which indicates presence and intensity of an inflammatory process. It is never diagnostic of a specific disease. It is used to monitor the course or response to treatment of certain diseases. Extremely high levels are found in cases of malignancy, hematologic diseases, collagen disorders and renal diseases.


Increased levels may indicate: Chronic renal failure (e.g., nephritis, nephrosis), malignant diseases (e.g., multiple myeloma, Hodgkin disease, advanced Carcinomas), bacterial infections (e.g., abdominal infections, acute pelvic inflammatory disease, syphilis, pneumonia), inflammatory diseases (e.g. temporal arteritis, polymyalgia rheumatic, rheumatoid arthritis, rheumatic fever, systemic lupus erythematosus [SLE]), necrotic diseases (e.g., acute myocardial infarction, necrotic tumor, gangrene of an extremity), diseases associated with increased proteins (e.g., hyperfibrinogenemia, macroglobulinemia), and severe anemias (e.g., iron deficiency or B12 deficiency).

Falsely decreased levels may indicate: Sickle cell anemia, spherocytosis, hypofibrinogenemia, or polycythemia vera.

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 Consultant Pathologist

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DEPARTMENT OF HAEMATOLOGY

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BLOOD GROUP ABO & RH Typing

Sample Type : WHOLE BLOOD EDTA

ABO	A			
Rh Typing	POSITIVE			

Method : Hemagglutination Tube method by forward and reverse grouping

COMMENTS:

The test will detect common blood grouping system A, B, O, AB and Rhesus (RhD). Unusual blood groups or rare subtypes will not be detected by this method. Further investigation by a blood transfusion laboratory, will be necessary to identify such groups.

Disclaimer: There is no trackable record of previous ABO & RH test for this patient in this lab. Please correlate with previous blood group findings. Advsiied cross matching before transfusion

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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THYROID PROFILE (T3,T4,TSH)

Sample Type : SERUM

T3	1.26	ng/ml	0.60 - 1.78	CLIA
T4	9.62	ug/dl	4.82-15.65	CLIA
TSH	1.56	uIU/mL	0.30 - 5.60	CLIA

INTERPRETATION:

1. Serum T3, T4 and TSH are the measurements form three components of thyroid screening panel and are useful in diagnosing various disorders of thyroid gland function.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values along with depressed TSH levels.
3. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
4. Normal T4 levels accompanied by high T3 levels are seen in patients with T3 thyrotoxicosis. Slightly elevated T3 levels may be found in pregnancy and in 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 from TSH secreting pituitary tumors (secondary hyperthyroidism).
6. Low levels of Thyroid hormones (T3, T4 & FT3, FT4) are seen in cases of primary, secondary and tertiary hypothyroidism and sometimes in non-thyroidal illness also.
7. Increased levels are found in Grave's disease, hyperthyroidism and thyroid hormone resistance.
8. TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.

9. REFERENCE RANGE :

PREGNANCY	TSH in uIU/ mL
1st Trimester	0.60 - 3.40
2nd Trimester	0.37 - 3.60
3rd Trimester	0.38 - 4.04

(Reference range recommended by the American Thyroid Association)


Comments:

1. During pregnancy, Free thyroid profile (FT3, FT4 & TSH) is recommended.
2. TSH levels are subject to circadian variation, reaches peak levels between 2-4 AM and at a minimum between 6-10 PM. The variation of the day has influence on the measured serum TSH concentrations.

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DEPARTMENT OF BIOCHEMISTRY

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LIVER FUNCTION TEST(LFT)

Sample Type : SERUM				
TOTAL BILIRUBIN	1.00	mg/dl	0.3 - 1.2	JENDRASSIK & GROFF
CONJUGATED BILIRUBIN	0.19	mg/dl	0 - 0.2	DPD
UNCONJUGATED BILIRUBIN	0.81	mg/dl		Calculated
AST (S.G.O.T)	34	U/L	< 50	KINETIC WITHOUT P5P-IFCC
ALT (S.G.P.T)	54	U/L	< 50	KINETIC WITHOUT P5P-IFCC
ALKALINE PHOSPHATASE	72	U/L	30 - 120	IFCC-AMP BUFFER
TOTAL PROTEINS	7.1	gm/dl	6.6 - 8.3	Biuret
ALBUMIN	4.7	gm/dl	3.5 - 5.2	BCG
GLOBULIN	2.4	gm/dl	2.0 - 3.5	Calculated
A/G RATIO	1.96			Calculated

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DEPARTMENT OF BIOCHEMISTRY

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LIPID PROFILE

Sample Type : SERUM

TOTAL CHOLESTEROL	166	mg/dl	Refere Table Below	Cholesterol oxidase/peroxidase
H D L CHOLESTEROL	37	mg/dl	> 40	Enzymatic/ Immunoinhibiton
L D L CHOLESTEROL	101.2	mg/dl	Refere Table Below	Enzymatic Selective Protein
TRIGLYCERIDES	139	mg/dl	See Table	GPO
VLDL	27.8	mg/dl	< 35	Calculated
T. CHOLESTEROL/ HDL RATIO	4.49		Refere Table Below	Calculated
TRIGLYCEIDES/ HDL RATIO	3.76	Ratio	< 2.0	Calculated
NON HDL CHOLESTEROL	129	mg/dl	< 130	Calculated

Interpretation

NATIONAL CHOLESTEROL EDUCATION PROGRAMME (NCEP)	TOTAL CHOLESTEROL	TRI GLYCERIDE	LDL CHOLESTEROL	NON HDL CHOLESTEROL
Optimal	<200	<150	<100	<130
Above Optimal	-	-	100-129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220

REMARKS	Cholesterol : HDL Ratio
Low risk	3.3-4.4
Average risk	4.5-7.1
Moderate risk	7.2-11.0
High risk	>11.0

Note:

- Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol
- NLA-2014 identifies Non HDL Cholesterol (an indicator of all atherogenic lipoproteins such as LDL, VLDL, IDL, Lpa, Chylomicron remnants) along with LDL-cholesterol as co-primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL & Non HDL.
- Apolipoprotein B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved
- Additional testing for Apolipoprotein B, hsCRP, Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

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DEPARTMENT OF BIOCHEMISTRY

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HBA1C

Sample Type : WHOLE BLOOD EDTA

HBA1c RESULT	6.0	%	Normal Glucose tolerance (non-diabetic): <5.7% Pre-diabetic: 5.7-6.4% Diabetic Mellitus: >6.5%	HPLC
ESTIMATED AVG. GLUCOSE	126	mg/dl		

Note:
 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
 2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.
 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 .

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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BLOOD UREA NITROGEN (BUN)

Sample Type : Serum

SERUM UREA	19	mg/dL	13 - 43	Urease GLDH
Blood Urea Nitrogen (BUN)	8.9	mg/dl	5 - 25	GLDH-UV

Increased In:

Impaired kidney function, Reduced renal blood flow {CHF, Salt and water depletion, (vomiting, diarrhea, diuresis, sweating), Shock}, Any obstruction of urinary tract, Increased protein catabolism, AMI, Stress

Decreased In:

Diuresis (e.g. with over hydration), Severe liver damage, Late pregnancy, Infancy, Malnutrition, Diet (e.g., low-protein and high-carbohydrate, IV feedings only), Inherited hyperammonemias (urea is virtually absent in blood)

Limitations:

Urea levels increase with age and protein content of the diet.

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DEPARTMENT OF BIOCHEMISTRY

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FBS (GLUCOSE FASTING)

Sample Type : FLOURIDE PLASMA

FASTING PLASMA GLUCOSE	100	mg/dl	70 - 100	HEXOKINASE
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INTERPRETATION:
Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)

Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

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Client Name : MEDI WHEELS	Received : 24/Feb/2024 11:32AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 24/Feb/2024 11:54AM
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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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PPBS (POST PRANDIAL GLUCOSE)

Sample Type : FLOURIDE PLASMA

POST PRANDIAL PLASMA GLUCOSE	146	mg/dl	<140	HEXOKINASE
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INTERPRETATION:

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)


Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

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SERUM CREATININE

Sample Type : SERUM

SERUM CREATININE	1.36	mg/dl	0.70 - 1.30	KINETIC-JAFFE
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Increased In:

- Diet: ingestion of creatinine (roast meat), Muscle disease: gigantism, acromegaly,
- Impaired kidney function.

Decreased In:

- Pregnancy: Normal value is 0.4-0.6 mg/dL. A value >0.8 mg/dL is abnormal and should alert the clinician to further diagnostic evaluation.
- Creatinine secretion is inhibited by certain drugs (e.g., cimetidine, trimethoprim).

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URIC ACID -SERUM

Sample Type : SERUM

SERUM URIC ACID	8.2	mg/dl	3.5 - 7.20	URICASE - PAP
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Interpretation

Uric acid is the final product of purine metabolism in the human organism. Uric acid measurements are used in the diagnosis and treatment of numerous renal and metabolic disorders, including renal failure, gout, leukemia, psoriasis, starvation or other wasting conditions, and of patients receiving cytotoxic drugs.

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BUN/CREATININE RATIO

Sample Type : SERUM				
Blood Urea Nitrogen (BUN)	8.9	mg/dl	5 - 25	GLDH-UV
SERUM CREATININE	1.36	mg/dl	0.70 - 1.30	KINETIC-JAFFE
BUN/CREATININE RATIO	6.50	Ratio	6 - 25	Calculated

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DEPARTMENT OF RADIOLOGY**2D ECHO DOPPLER STUDY**

MITRAL VALVE : Normal
AORTIC VALVE : Normal
TRICUSPID VALVE : Normal
PULMONARY VALVE : Normal
RIGHT ATRIUM : Normal
RIGHT VENTRICLE : Normal
LEFT ATRIUM : 3.5 cms
LEFT VENTRICLE : EDD : 4.5 cm IVS(d) : 0.9cm LVEF :65 %
ESD : 2.4 cm PW (d) : 0.9cm FS :33 %
No RWMA
IAS : Intact
IVS : Intact
AORTA : 3.0cms
PULMONARY ARTERY : Normal
PERICARDIUM : Normal
IVS/ SVC/ CS : Normal
PULMONARY VEINS : Normal
INTRA CARDIAC MASSES : No

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Approved By :


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DN (CARDIOLOGY)
APNC Reg. No 70760

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Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 24/Feb/2024 11:00AM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY

DOPPLER STUDY :

MITRAL FLOW : E -0.9 m/sec, A -0.4 m/sec.
AORTIC FLOW : 1.2m/sec
PULMONARY FLOW : 1.1m/sec
TRICUSPID FLOW : TRJV :1.1 m/sec, RVSP -21 mmHg

COLOUR FLOW MAPPING: TRIVIAL TR


IMPRESSION :

- * MILD CONCENTRIC LVH
- * NO RWMA OF LV
- * GOOD LV FUNCTION
- * NORMAL LV FILLING PATTERN
- * NO MR/ NO AR/ NO PR
- * TRIVIAL TR, NO PAH
- * NO PE / CLOT / VEGETATIONS.

Verified By :
Kollipara Venkateswara Rao



Approved By :


Dr. B. Nagaraju
MD (Internal Medicine)
DN (CARDIOLOGY)
APNC Reg. No 70760

Visit ID : YGT56608	UHID/MR No : YGT.0000056430
Patient Name : Mr. KOMMU MANOJ KUMAR A SWAROOP	Client Code : YOD-DL-0021
Age/Gender : 38 Y 0 M 0 D /M	Barcode No : 10943538
DOB :	Registration : 24/Feb/2024 08:59AM
Ref Doctor : SELF	Collected : 24/Feb/2024 09:06AM
Client Name : MEDI WHEELS	Received : 24/Feb/2024 09:38AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 24/Feb/2024 10:34AM
Hospital Name :	

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
-----------	--------	------	-----------------------	--------

CUE (COMPLETE URINE EXAMINATION)
Sample Type : SPOT URINE
PHYSICAL EXAMINATION

TOTAL VOLUME	30ML	ml		
COLOUR	PALE YELLOW			
APPEARANCE	CLEAR			
SPECIFIC GRAVITY	1.010		1.003 - 1.035	Bromothymol Blue

CHEMICAL EXAMINATION


pH	5.0		4.6 - 8.0	Double Indicator
PROTEIN	NEGATIVE		NEGATIVE	Protein - error of Indicators
GLUCOSE(U)	NEGATIVE		NEGATIVE	Glucose Oxidase
UROBILINOGEN	NEGATIVE	mg/dl	< 1.0	Ehrlichs Reaction
KETONE BODIES	NEGATIVE		NEGATIVE	Nitroprasside
BILIRUBIN - TOTAL	NEGATIVE		Negative	Azocoupling Reaction
BLOOD	NEGATIVE		NEGATIVE	Tetramethylbenzidine
LEUCOCYTE	NEGATIVE		Negative	Azocoupling reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization Reaction

MICROSCOPIC EXAMINATION

PUS CELLS	2-3	cells/HPF	0-5	
EPITHELIAL CELLS	1-2	/hpf	0 - 15	
RBCs	NIL	Cells/HPF	Nil	
CRYSTALS	NIL	Nil	Nil	
CASTS	NIL	/HPF	Nil	
BUDDING YEAST	NIL		Nil	
BACTERIA	NIL		Nil	
OTHER	NIL			

 Verified By :
 Kollipara Venkateswara Rao


Approved By :


Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist


Visit ID	: YGT56608	UHID/MR No	: YGT.0000056430
Patient Name	: Mr. KOMMU MANOJ KUMAR A SWAROOP	Client Code	: YOD-DL-0021
Age/Gender	: 38 Y 0 M 0 D /M	Barcode No	: 10943538
DOB	:	Registration	: 24/Feb/2024 08:59AM
Ref Doctor	: SELF	Collected	: 24/Feb/2024 09:06AM
Client Name	: MEDI WHEELS	Received	: 24/Feb/2024 09:38AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 24/Feb/2024 10:34AM
Hospital Name	:		

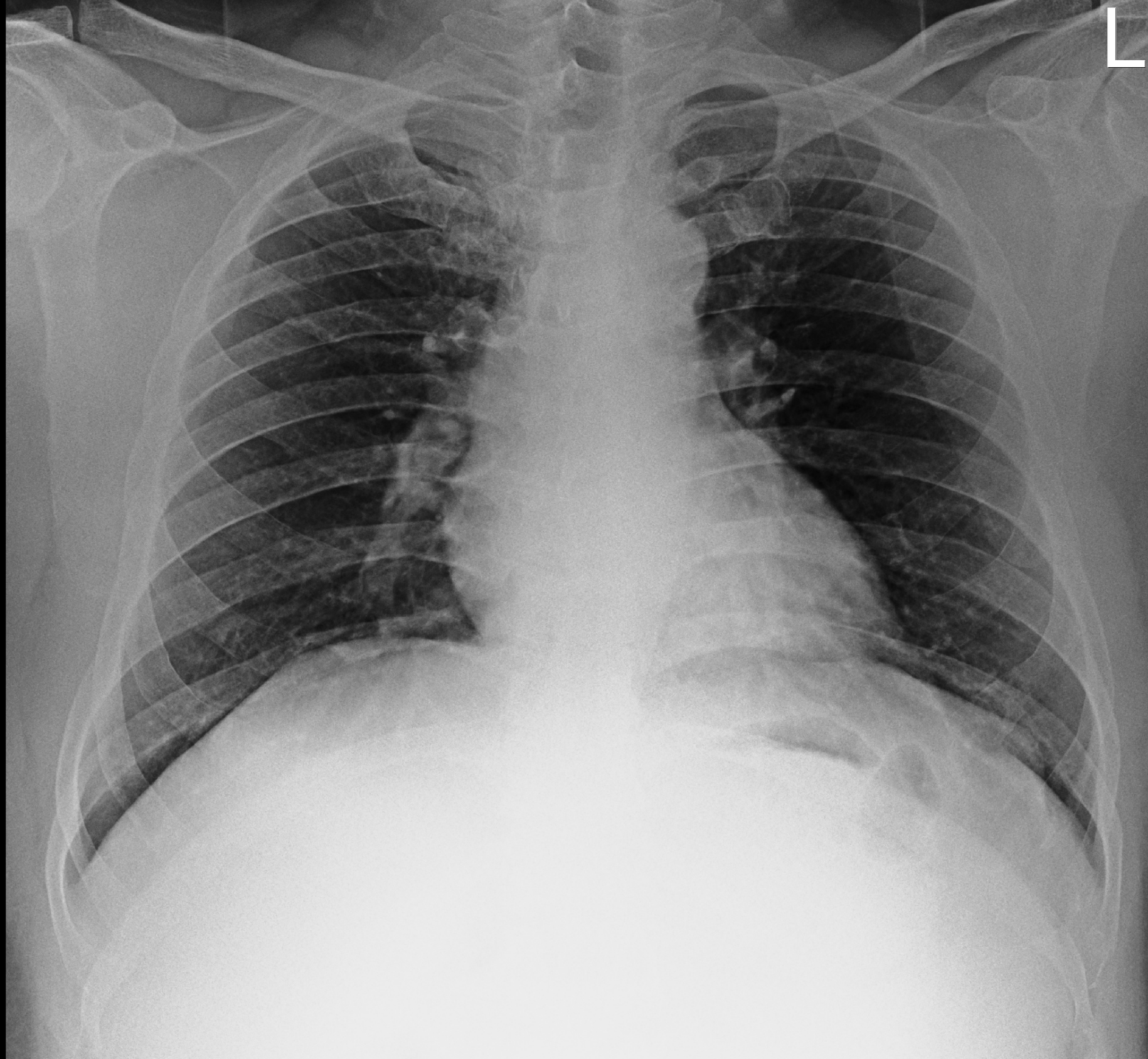
DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
-----------	--------	------	-----------------------	--------

***** End Of Report *****Verified By :
Kollipara Venkateswara Rao

Approved By :


Dr. Sumalatha
MBBS, DCP
Consultant Pathologist



KOMMU MANOJ KUMAR SWAROOP 38Y MALE YGT56608 CHEST PA 24-Feb-24

YODA DIAGNOSTICS

ID: 56608

Kommu manoj kumar A swaroop

Male 38Years

Req. No. :

24-02-2024 09:38:57

HR : 80 bpm

P : 110 ms

PR : 138 ms

QRS : 95 ms

QT/QTcBz : 338/390 ms

P/QRST : 14/40/5 °

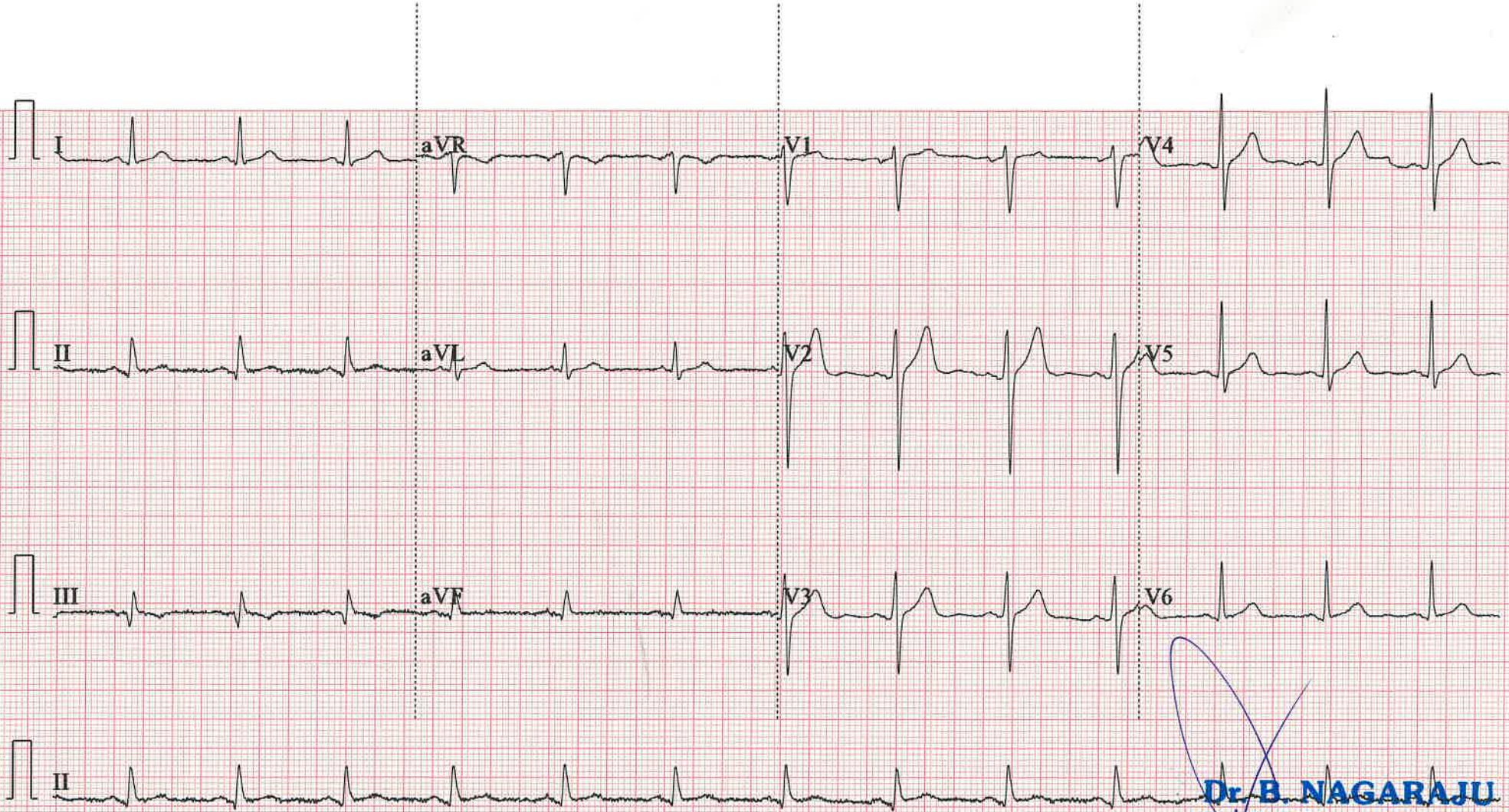
RV5/SV1 : 1.270/0.923 mV

Diagnosis Information:

Sinus Rhythm

Larged PtfV1

Report Confirmed by:



Dr. B. NAGARAJU
 Regd.No: 70760 MBBS, M.D, DM
 CONSULTANT CARDIOLOGIST
 YODA DIAGNOSTICS-GUNTUR



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

భారత ప్రభుత్వం

Unique Identification Authority of India
Government of India

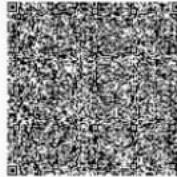
రిజిస్ట్రేషన్/ Enrolment No.: 2052/31212/04488

Download Date: 28/05/2018

To
శ్రీ ఏ స్వరూప్ మనోజ్ కుమార్
K A SWAROOP MANOJ KUMAR
S/O: Kommu Yesudasu
9-1-82
CHURCH ROAD
PERALA
OPP SMLJ COLLEGE
Chirala
Perala
Prakasam Andhra Pradesh - 523157
8297909898

Generation Date: 18/05/2018

Signature Not Verified
Digital Signature
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA
Date: 2018-05-22 20:08
IST



QR Code with Photo/Gravatar

మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

5966 9666 2736

VID : 9121 4636 8238 5793

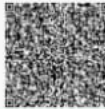
నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



శ్రీ ఏ స్వరూప్ మనోజ్ కుమార్
K A SWAROOP MANOJ KUMAR
పుట్టిన తేదీ/DOB: 25/08/1985
పురుషుడు/ MALE



5966 9666 2736

VID : 9121 4636 8238 5793

నా ఆధార్, నా గుర్తింపు



Government of India



సమాచారం

- ఆధార్ గుర్తింపుకు ధృవీకరణ, పాఠ్యత్యానికి కాదు.
- గుర్తింపుకు ధృవీకరణ ఆన్‌లైన్ ఆథెంటికేషన్ ద్వారా పొందవచ్చు.
- ఇది ఎలక్ట్రానిక్ పద్ధతిలో వ్రాయబడిన లేఖ.

INFORMATION

- **Aadhaar** is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

- ఆధార్ దేశమంతటా ఆమోదించబడుతుంది.
- ఆధార్ భవిష్యత్తులో ప్రభుత్వ మరియు ప్రభుత్వేతర సేవలు అందచేయడంలో సహాయ పడుతుంది.
- **Aadhaar** is valid throughout the country.
- **Aadhaar** will be helpful in availing Government and Non-Government services in future.



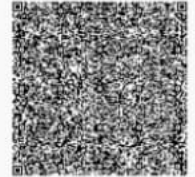
భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

చిరునామా:

S/O: కొమ్ము యేసుదాసు, 9-1-82, చర్చి రోడ్, హేలం, ప్రకాశం, ఆంధ్ర ప్రదేశ్ - 523157

Address:

S/O: Kommu Yesudasu, 9-1-82, CHURCH ROAD, PERALA, OPP SMLJ COLLEGE, Chirala, Prakasam, Andhra Pradesh - 523157



QR Code with Photo/Gravatar

5966 9666 2736

VID : 9121 4636 8238 5793



Prakasham@nic.ladcoad.gov.in

www.aadhaar.gov.in

DATE: 24/4/24

NAME: KOMMU MANOJ KUMARA SWAROOP

AGE: 38 M ADDRESS: _____

- TYPE OF LENS: GLASS CONTACTS
CR POLYCARBONATE
COATINGS : ARC HARD COAT
TINT : White SP2 PHOTO GREY
BIFOCALS : KRYPTOK EXECUTIVE
"D" PROGRESSIVE

	R			L		
	SPH	CYL	AXIS	SPH	CYL	AXIS
DV	<u>M</u>			<u>PL</u>		
ADD						

INSTRUCTIONS _____

I.P.D. _____ D.V. _____

N.V. _____ CONSTANT USE _____

Name: Mr. Kommu Manoj Kumar - A Swaroop
Date: 24/02/2024 Age: 38 yrs Sex: Male
Address: Guntur



Routine Health checkup

C/O Dyspepsia

H/O Hypertension

St. Uric Acid

- 8.2 mg/dl

1) Tab. FEBUGET 40m

1 ——— (15)

2) cap. PPRLOCK-DSR

1 — 0 — 0 — (30)

Dr. KEERTHI KISHORE NAGALLA
Regd.No: 64905 MBBS, M.D. General Medicine
CONSULTANT GENERAL PHYSICIAN
YODA DIAGNOSTICS-GUNTUR



YADA
DIAGNOSTICS



GPS Map Camera



Guntur, Andhra Pradesh, India

3-1-219/2, Old Club Rd, Gunturi Vari Thota, Kothapeta, Guntur, Andhra Pradesh 522001, India

Lat 16.299237°

Long 80.451624°

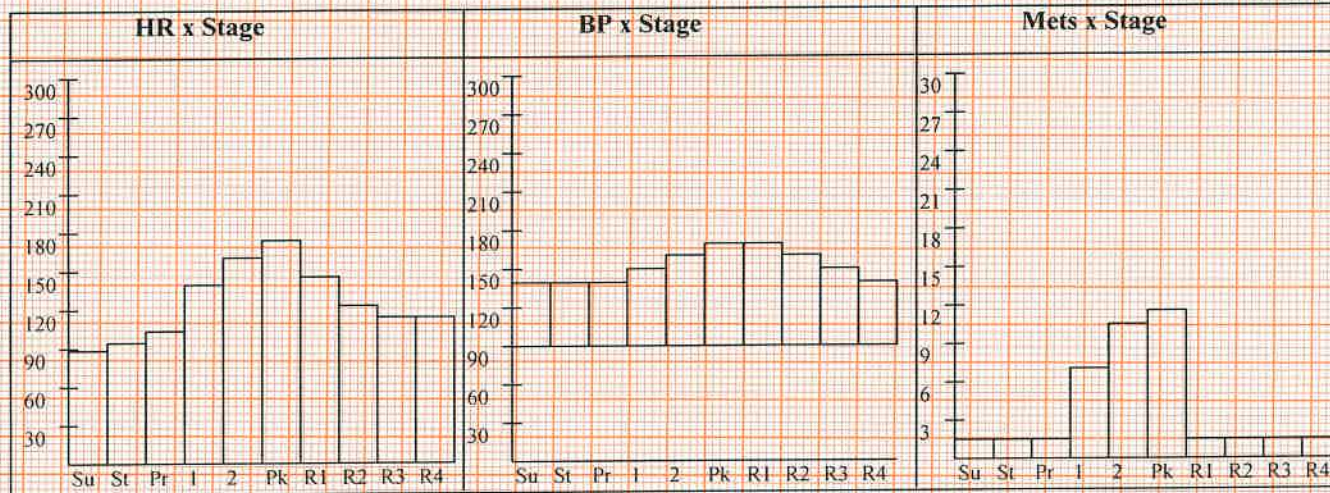
24/02/24 09:04 AM GMT +05:30

YODA DIAGNOSTICS CENTRE GUNTUR

Name: KOMMU MANOJ KUMAR A SWAROOP

Date: 24-02-2024

Time: 11:59



Interpretation

The Patient Exercised according to Bruce Protocol for 0:06:51 achieving a work level of 7.7 METS.
 Resting Heart Rate, initially 89 bpm rose to a max. heart rate of 174bpm (93% of Predicted Maximum Heart Rate).
 Resting Blood Pressure of 140/90 mmHg, rose to a maximum Blood Pressure of 170/90 mmHg
 * No Significant ST-T Changes During Exercise & Recovery
 * Good Exercise Tolerance
 * Test is Negative for Exercise Induced Ischemia.

Ref. Doctor: SELF

Dr. B. NAGARAJU
 Regd.No: 70760 MBBS, M.D, DM
 CONSULTANT CARDIOLOGIST
 YODA DIAGNOSTICS-GUNTUR

Doctor: DR.B NAGARAJU

(Summary Report edited by User)

YODA DIAGNOSTICS CENTRE GUNTUR

Name: KOMMU MANOJ KUMAR A SWAROOP **Date: 24-02-2024** **Time: 11:59**
Age: 38 **Gender: M** **Height: 171 cms** **Weight: 96 Kg** **ID: 56608**
Clinical History: HTN+
Medications: YES

Test Details:
Protocol: Bruce **Predicted Max HR: 188** **Target HR: 159 (85% of Pr. MHR)**
Exercise Time: 0:06:51 **Achieved Max HR: 174 (93% of Pr. MHR)**
Max BP: 170/90 **Max BP x HR: 29580** **Max Mets: 7.7**
Test Termination Criteria:

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	ST Level mm	ST Slope mV/S
Supine	00:20	1	0	0	89	140/90	12460	2.4 V2	1.6 V2
Standing	00:19	1	0	0	94	140/90	13160	2.6 V2	1.9 V2
PreTest	00:16	1	1.6	0	103	140/90	14420	0.7 II	1.9 V2
Stage: 1	03:00	4.7	2.7	10	140	150/90	21000	2.2 V2	2.1 V2
Stage: 2	03:00	7	4	12	161	160/90	25760	1.8 V1	1.8 V2
Peak Exercise	00:51	7.7	5.5	14	174	170/90	29580	1.9 V2	1.4 V2
Recovery1	01:00	1	0	0	146	170/90	24820	4.9 V2	2.4 V2
Recovery2	01:00	1	0	0	123	160/90	19680	2.9 V2	1.9 V2
Recovery3	01:00	1	0	0	114	150/90	17100	2.5 V2	2.1 V2
Recovery4	00:30	1	0	0	114	140/90	15960	2 V2	1.6 V2

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

Bruce Protocol

ID: 56608

Date: 24-02-2024

Exec Time : 0:00:00

Stage Time: 00:20

HR: 89 bpm

BP: 140/90 mmHg

STLevel(mm) STSlope(mV/s)

Stage: Supine

Speed: 0 km/h

Slope: 0%

THR: 159 bpm

STLevel(mm) STSlope(mV/s)

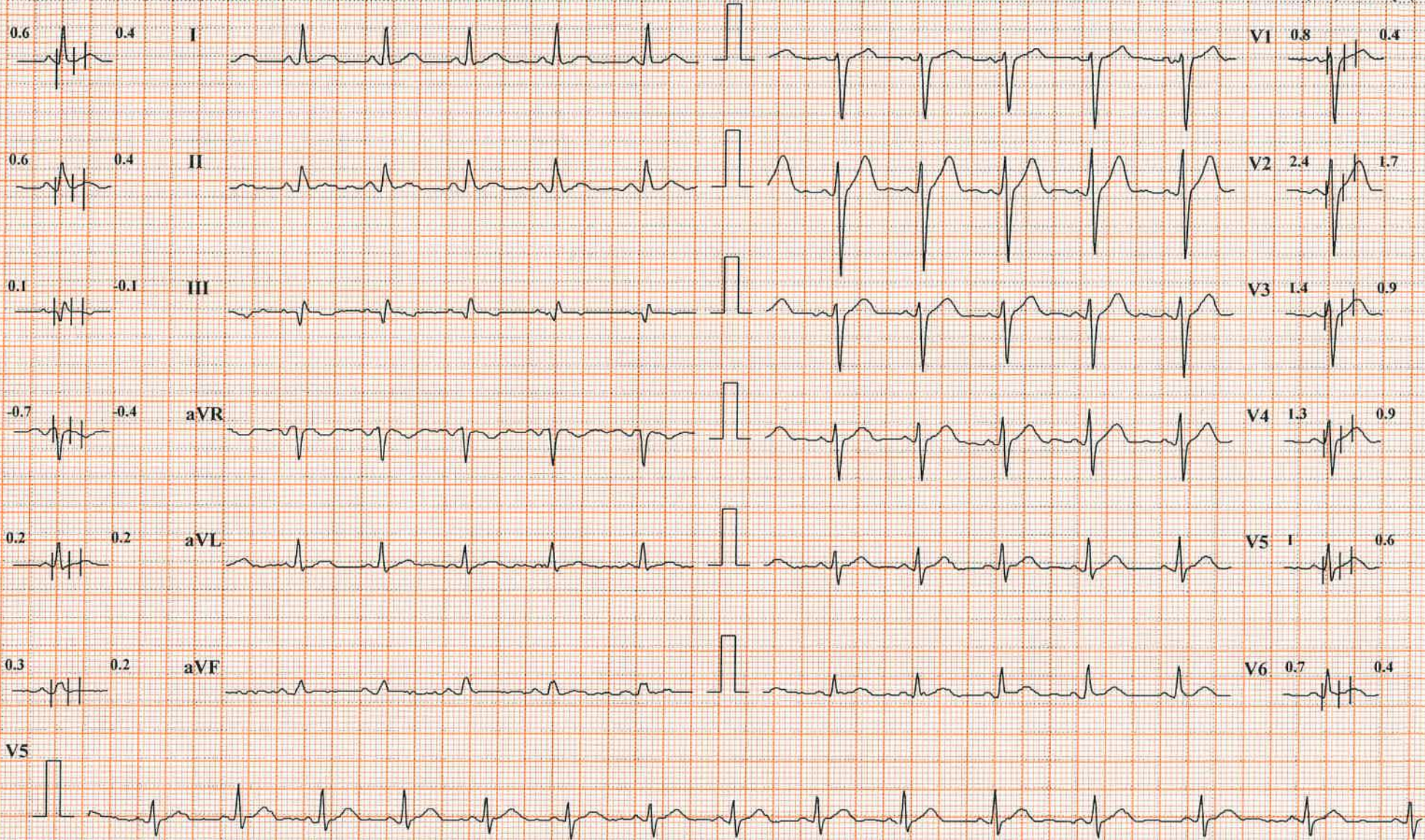


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version 3.5

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

Bruce Protocol

ID: 56608

Date: 24-02-2024

Exec Time : 0:00:00

Stage Time: 00:19

HR: 94 bpm

BP: 140/90 mmHg

STLevel(mm) STSlope(mV/s)

Stage: Standing

Speed: 0

Slope: 0 %

THR: 159 bpm

STLevel(mm) STSlope(mV/s)

0.6 0.6

I

V1 0.9 0.5

0.6 0.4

II

V2 2.7 2

0 -0.1

III

V3 1.6 1.1

-0.6 -0.5

aVR

V4 1.4 1

0.3 0.4

aVL

V5 1 0.8

0.3 0.1

aVF

V6 0.8 0.4

V5

Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version 3.5

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

ID: 56608

Date: 24-02-2024

Exec Time : 0:03:00

Stage Time: 03:00

HR: 139 bpm

Bruce Protocol

Stage: I

Speed: 2.7 kmph

Slope: 10 %

THR: 159 bpm

BP: 150/90 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)

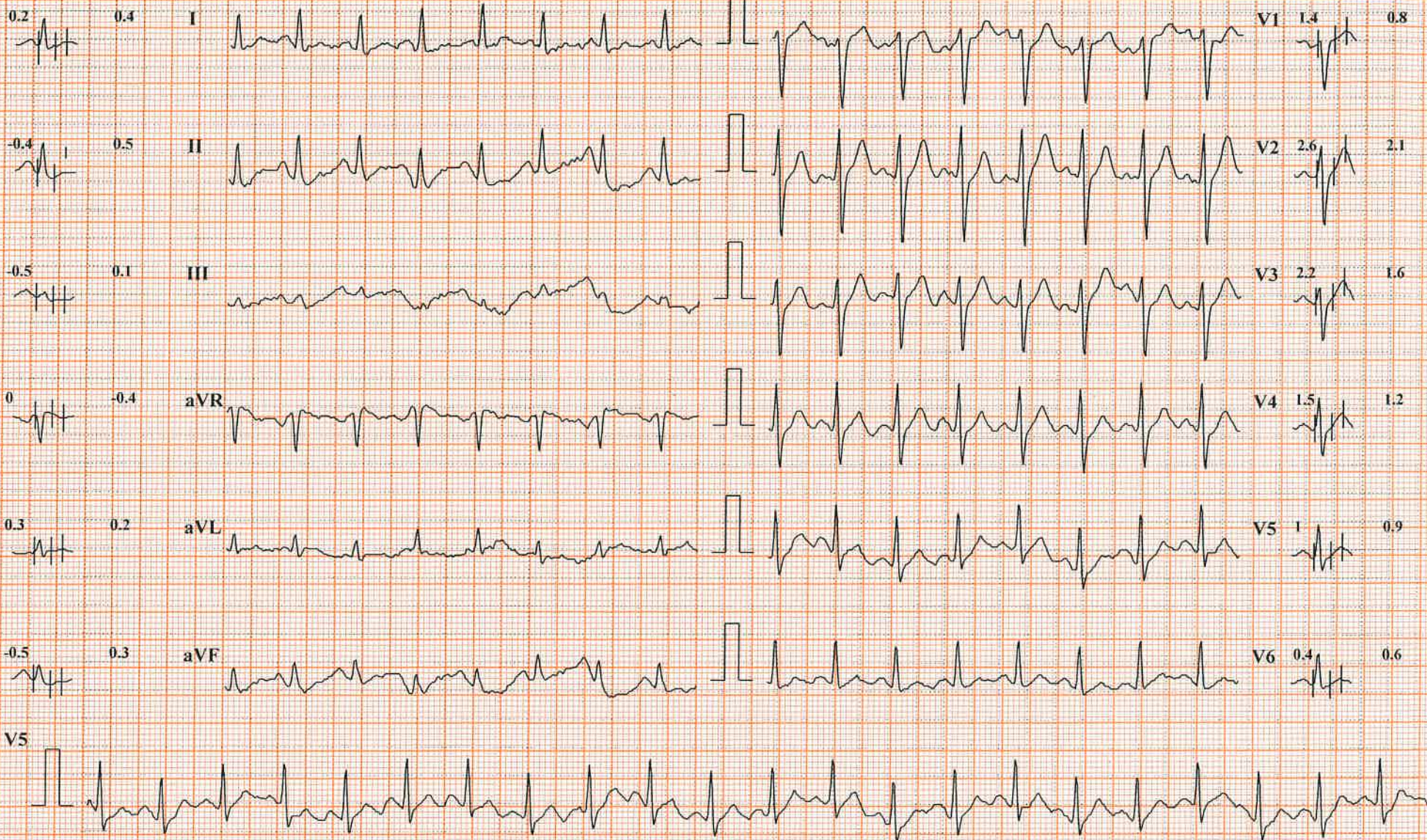


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version 3.5

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

Bruce Protocol

ID: 56608

Date: 24-02-2024

Exec Time : 0:06:00

Stage Time: 03:00

HR: 161 bpm

BP: 160/90 mmHg

STLevel(mm) STSlope(mV/s)

Stage: 2

Speed: 4 kmph

Slope: 12 %

THR: 159 bpm

STLevel(mm) STSlope(mV/s)

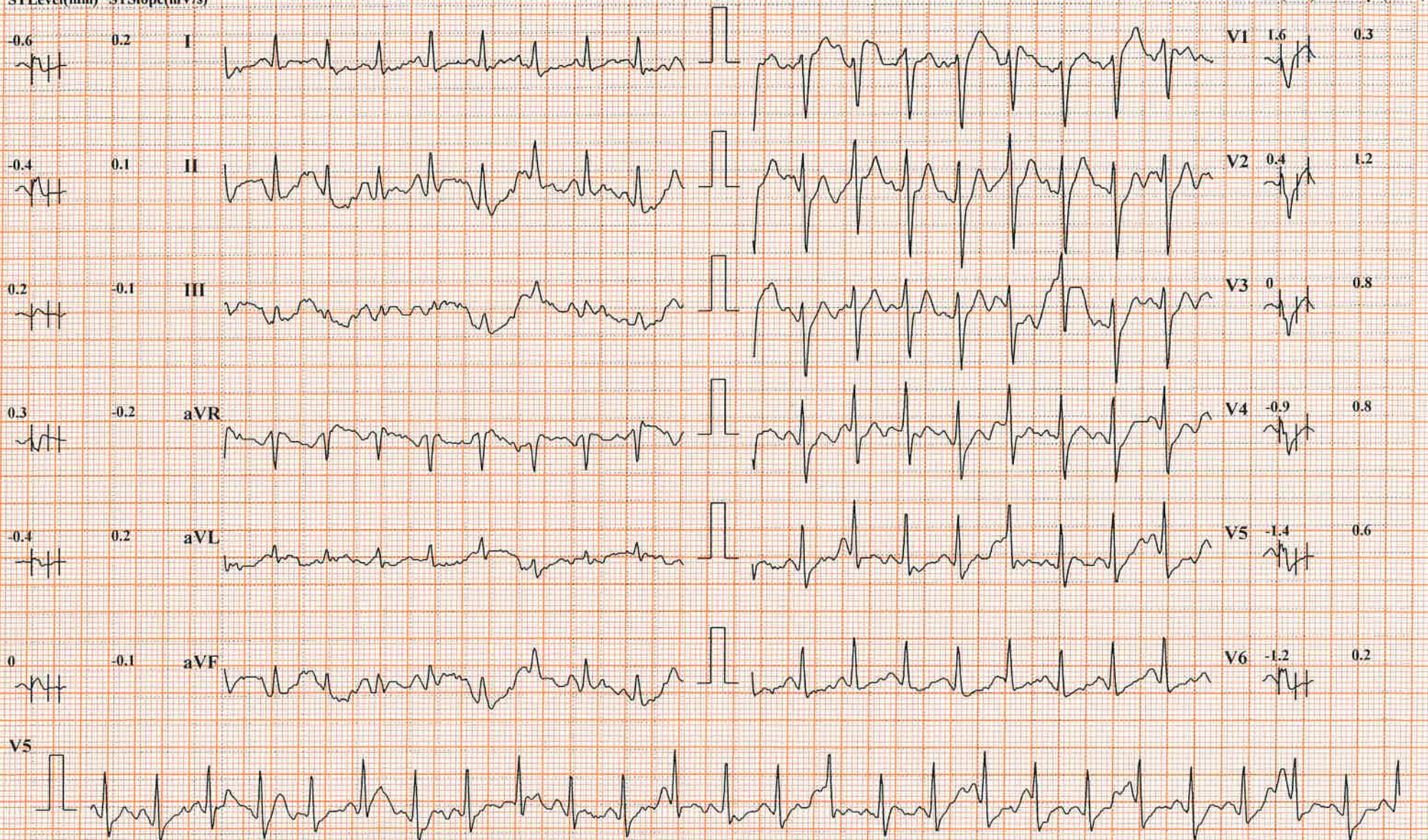


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version:3.5

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

ID: 56608

Date: 24-02-2024

Exec Time : 0:06:51

Stage Time: 00:51

HR: 174 bpm

Bruce Protocol

Stage: 3 Peak Exercise

Speed: 5.5 kmph

Slope: 14 %

THR: 159 bpm

BP: 170/90 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)

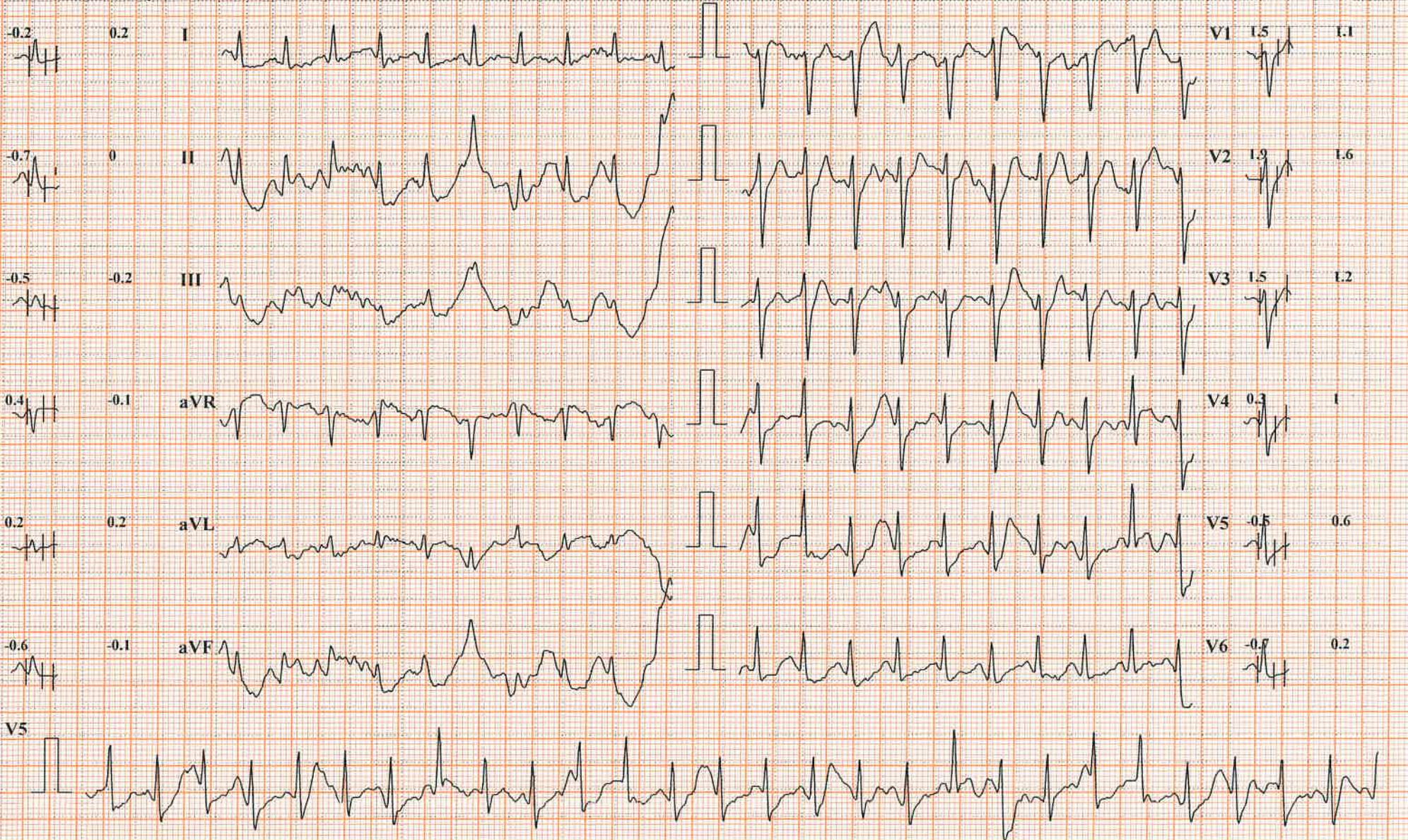


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz

Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version:3.5

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

Bruce Protocol

ID: 56608

Date: 24-02-2024

Exec Time : 00:00

Stage Time: 01:00

HR: 146 bpm

BP: 170/90 mmHg

Stage: Recovery I

Speed: 0 kmph

Slope: 0 %

THR: 159 bpm

STLevel(mm) STSlope(mV/s)

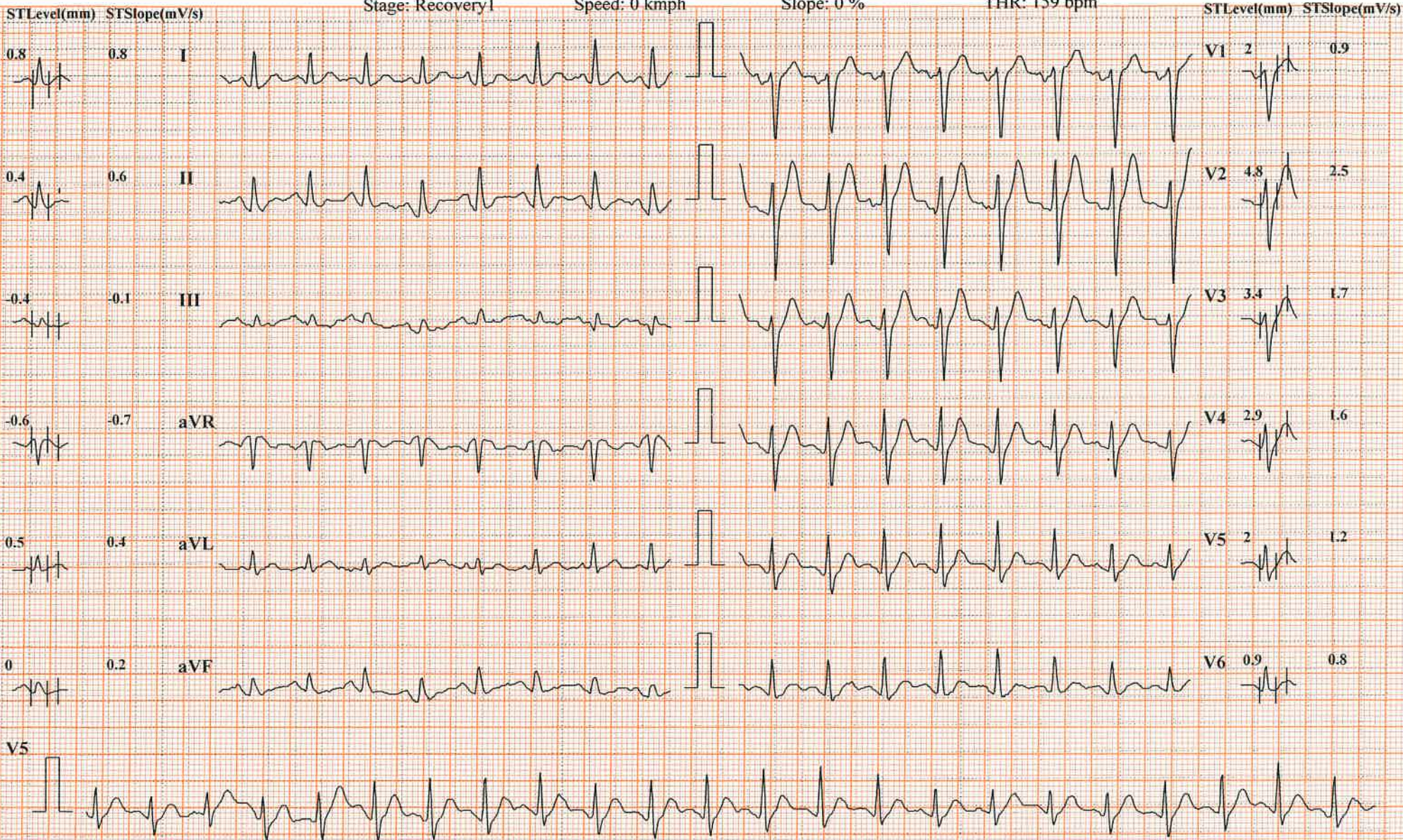


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version 3.5

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

Bruce Protocol

ID: 56608

Date: 24-02-2024

Exec Time : 00:00

Stage Time: 01:00

HR: 123 bpm

BP: 160/90 mmHg

STLevel(mm) STSlope(mV/s)

Stage: Recovery2

Speed: 0 kmph

Slope: 0 %

THR: 159 bpm

STLevel(mm) STSlope(mV/s)

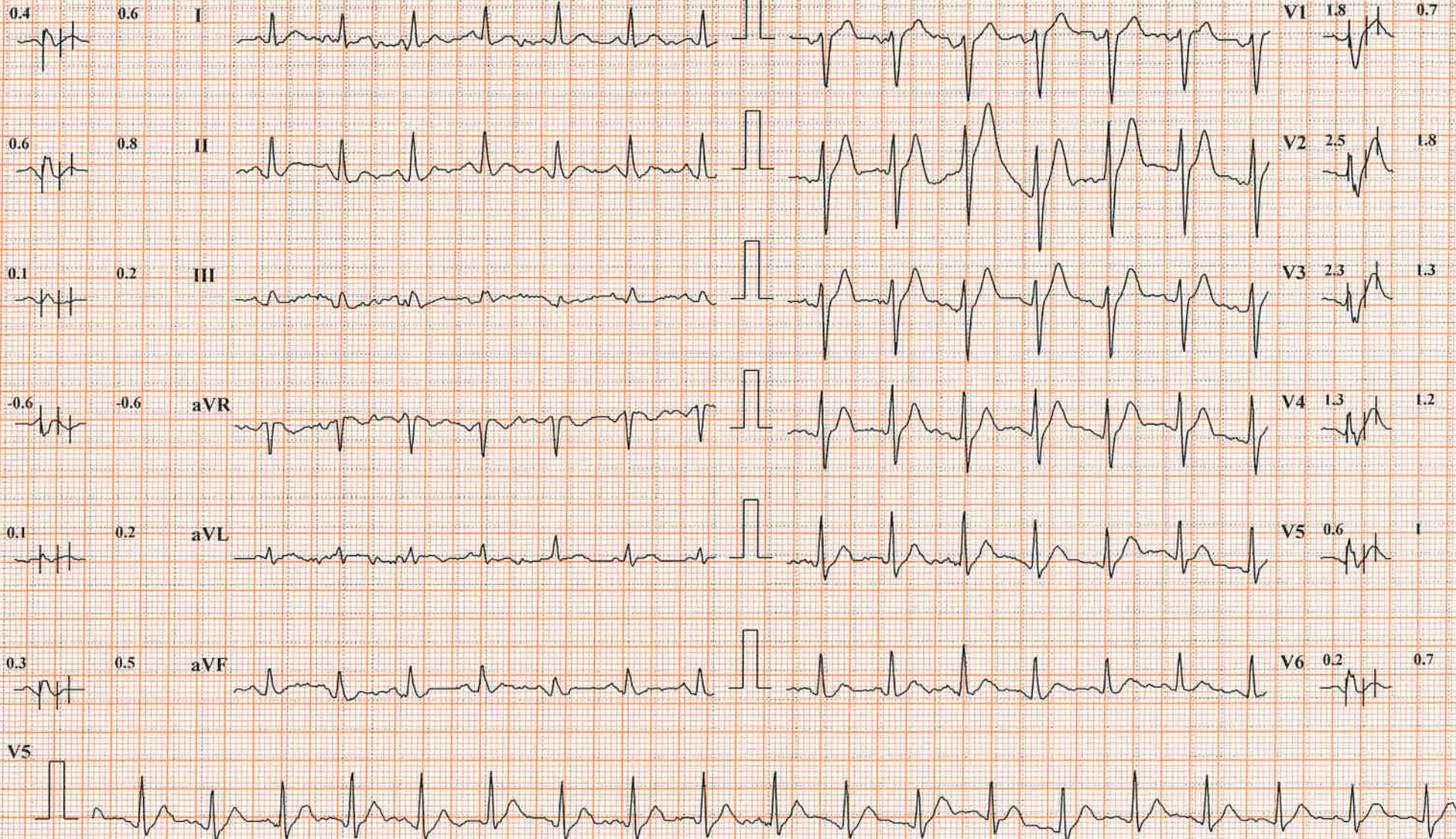


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version:3.5

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

ID: 56608

Date: 24-02-2024

Exec Time : 00:00

Stage Time: 01:00

HR: 114 bpm

Bruce Protocol

Stage: Recovery3

Speed: 0 kmph

Slope: 0 %

THR: 159 bpm

BP: 150/90 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)

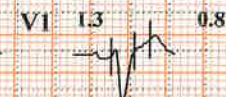


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz

Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version:3.5

YODA DIAGNOSTICS CENTRE GUNTUR

KOMMU MANOJ KUMAR A SWAROOP (38 M)

Bruce Protocol

ID: 56608

Date: 24-02-2024

Exec Time : 00:00

Stage Time: 00:30

HR: 114 bpm

BP: 140/90 mmHg

STLevel(mm) STSlope(mV/s)

Stage: Recovery4

Speed: 0 kmph

Slope: 0 %

THR: 159 bpm

STLevel(mm) STSlope(mV/s)

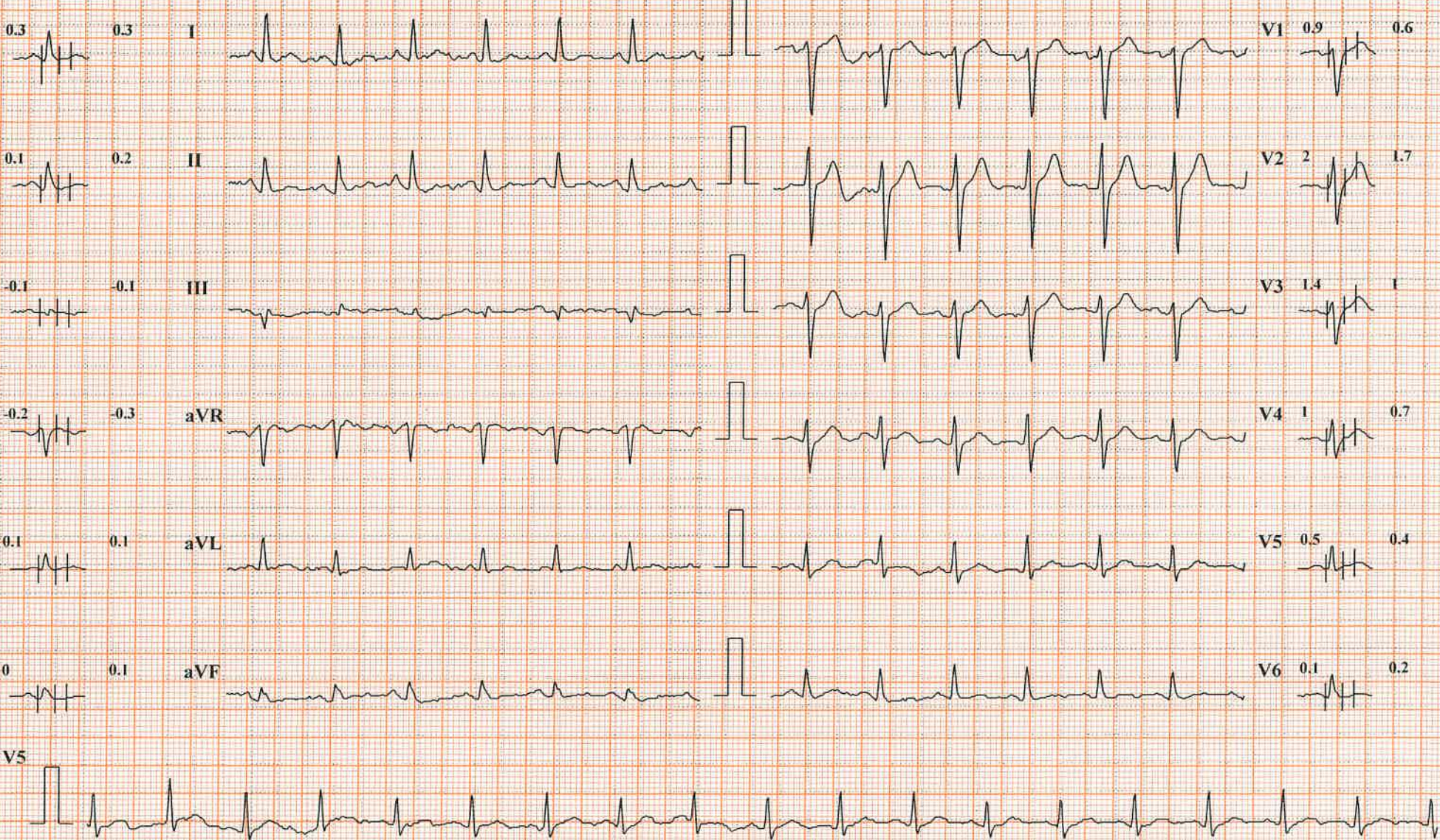


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version:3.5