

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

**HAEMATOLOGY**

**Complete Blood Count With - ESR**

Haemoglobin (EDTA Blood/Spectrophotometry)	12.7	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	40.0	%	42 - 52
RBC Count (EDTA Blood)	5.20	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood)	77.0	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	24.4	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	31.6	g/dL	32 - 36
RDW-CV (EDTA Blood)	13.4	%	11.5 - 16.0
RDW-SD (EDTA Blood)	36.11	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	5800	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood)	61.1	%	40 - 75
Lymphocytes (EDTA Blood)	29.6	%	20 - 45
Eosinophils (EDTA Blood)	1.3	%	01 - 06
Monocytes (EDTA Blood)	7.7	%	01 - 10

  
Dr Anusha.K.S  
Sr.Consultant Pathologist  
Reg No : 100674  
APPROVED BY

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Basophils (Blood)	0.3	%	00 - 02
<b>INTERPRETATION:</b> Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood)	3.54	10 <sup>3</sup> / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	1.72	10 <sup>3</sup> / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.08	10 <sup>3</sup> / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.45	10 <sup>3</sup> / µl	< 1.0
Absolute Basophil count (EDTA Blood)	0.02	10 <sup>3</sup> / µl	< 0.2
Platelet Count (EDTA Blood)	379	10 <sup>3</sup> / µl	150 - 450
MPV (EDTA Blood)	<b>6.1</b>	fL	7.9 - 13.7
PCT (EDTA Blood/Automated Blood cell Counter)	0.23	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood)	<b>22</b>	mm/hr	< 15

  
Dr Anusha.K.S  
Sr.Consultant Pathologist  
Reg No : 100674

APPROVED BY

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

**BIOCHEMISTRY**

**Liver Function Test**

Bilirubin(Total) (Serum/DCA with ATCS)	0.84	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	<b>0.40</b>	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.44	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	13.51	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	10.93	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	30.09	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	106.0	U/L	53 - 128
Total Protein (Serum/Biuret)	6.93	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.77	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.16	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	2.21		1.1 - 2.2

  
Dr RAVIKUMAR R  
MBBS, MD BIOCHEMISTRY  
CONSULTANT BIOCHEMIST  
Reg No : 78771

APPROVED BY

**Name** : Mr. KISHORE KOLLI RAMA  
**PID No.** : MED111450889 **Register On** : 11/01/2023 9:42 AM  
**SID No.** : 423001741 **Collection On** : 11/01/2023 9:49 AM  
**Age / Sex** : 33 Year(s) / Male **Report On** : 11/01/2023 6:15 PM  
**Type** : OP **Printed On** : 19/01/2023 7:52 PM  
**Ref. Dr** : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>Lipid Profile</u></b>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	181.59	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	52.44	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.

HDL Cholesterol (Serum/Immunoinhibition)	<b>32.07</b>	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	139	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	10.5	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	149.5	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

  
**Dr RAVIKUMAR R**  
 MBBS, MD BIOCHEMISTRY  
 CONSULTANT BIOCHEMIST  
 Reg No : 78771

**APPROVED BY**

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

**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.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	5.7		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)	1.6		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
--	-----	--	--

LDL/HDL Cholesterol Ratio (Serum/Calculated)	4.3		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
---	-----	--	---

  
Dr RAVIKUMAR R  
MBBS, MD BIOCHEMISTRY  
CONSULTANT BIOCHEMIST  
Reg No : 78771

APPROVED BY

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>Glycosylated Haemoglobin (HbA1c)</u></b>			
HbA1C (Whole Blood/HPLC)	6.1	%	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 %

Estimated Average Glucose 128.37 mg/dL  
(Whole Blood)

**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 glycaemic 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.

  
Dr RAVIKUMAR R  
MBBS, MD BIOCHEMISTRY  
CONSULTANT BIOCHEMIST  
Reg No : 78771

APPROVED BY

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

## IMMUNOASSAY

### THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/ECLIA)	2.28	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.

T4 (Tyroxine) - Total (Serum/ECLIA)	9.96	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.

TSH (Thyroid Stimulating Hormone) (Serum/ECLIA)	0.767	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&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

  
Dr Anusha.K.S  
Sr.Consultant Pathologist  
Reg No : 100674

APPROVED BY

**Name** : Mr. KISHORE KOLLI RAMA  
**PID No.** : MED111450889      **Register On** : 11/01/2023 9:42 AM  
**SID No.** : 423001741      **Collection On** : 11/01/2023 9:49 AM  
**Age / Sex** : 33 Year(s) / Male      **Report On** : 11/01/2023 6:15 PM  
**Type** : OP      **Printed On** : 19/01/2023 7:52 PM  
**Ref. Dr** : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

**CLINICAL PATHOLOGY**

**PHYSICAL EXAMINATION (URINE COMPLETE)**

Colour (Urine)	Pale yellow		Yellow to Amber
Appearance (Urine)	Clear		Clear
Volume(CLU) (Urine)	20		

**CHEMICAL EXAMINATION (URINE COMPLETE)**

pH (Urine)	6.5		4.5 - 8.0
Specific Gravity (Urine)	1.010		1.002 - 1.035
Ketone (Urine)	Negative		Negative
Urobilinogen (Urine)	Normal		Normal
Blood (Urine)	Negative		Negative
Nitrite (Urine)	Negative		Negative
Bilirubin (Urine)	Negative		Negative
Protein (Urine)	Negative		Negative

  
**Dr Anusha.K.S**  
 Sr.Consultant Pathologist  
 Reg No : 100674  
**APPROVED BY**



Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Glucose (Urine/GOD - POD)	Negative		Negative
Leukocytes(CP) (Urine)	Negative		

**MICROSCOPIC EXAMINATION**  
**(URINE COMPLETE)**

Pus Cells (Urine)	0-1	/hpf	NIL
Epithelial Cells (Urine)	0-1	/hpf	NIL
RBCs (Urine)	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.

Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL

  
Dr Anusha.K.S  
Sr.Consultant Pathologist  
Reg No : 100674  
APPROVED BY

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>PHYSICAL EXAMINATION(STOOL COMPLETE)</u></b>			
Mucus (Stool)	Absent		Absent
Consistency (Stool)	<b>Semi solid</b>		Semi Solid to Solid
Colour (Stool)	Brown		Brown
Blood (Stool)	Absent		Absent
<b><u>MICROSCOPIC EXAMINATION(STOOL COMPLETE)</u></b>			
Ova (Stool)	NIL		NIL
Cysts (Stool)	NIL		NIL
Trophozoites (Stool)	NIL		NIL
RBCs (Stool)	NIL	/hpf	Nil
Pus Cells (Stool)	<b>0-1</b>	/hpf	NIL
Others (Stool)	NIL		
<b><u>CHEMICAL EXAMINATION(STOOL ROUTINE)</u></b>			
Reaction (Stool)	<b>Acidic</b>		Alkaline

  
Dr Anusha.K.S  
Sr.Consultant Pathologist  
Reg No : 100674  
APPROVED BY

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

Investigation

Observed  
Value

Unit

Biological  
Reference Interval

Reducing Substances  
(Stool/Benedict's)

Negative

Negative

  
Dr Anusha.K.S  
Sr.Consultant Pathologist  
Reg No : 100674  
APPROVED BY

Name : Mr. KISHORE KOLLI RAMA  
PID No. : MED111450889 Register On : 11/01/2023 9:42 AM  
SID No. : 423001741 Collection On : 11/01/2023 9:49 AM  
Age / Sex : 33 Year(s) / Male Report On : 11/01/2023 6:15 PM  
Type : OP Printed On : 19/01/2023 7:52 PM  
Ref. Dr : MediWheel

---

Investigation

Observed  
Value

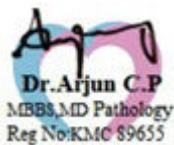
Unit

Biological  
Reference Interval

**IMMUNOHAEMATOLOGY**

BLOOD GROUPING AND Rh TYPING  
(EDTA Blood/Agglutination)

'AB' 'Positive'



APPROVED BY

**Name** : Mr. KISHORE KOLLI RAMA  
**PID No.** : MED111450889 **Register On** : 11/01/2023 9:42 AM  
**SID No.** : 423001741 **Collection On** : 11/01/2023 9:49 AM  
**Age / Sex** : 33 Year(s) / Male **Report On** : 11/01/2023 6:15 PM  
**Type** : OP **Printed On** : 19/01/2023 7:52 PM  
**Ref. Dr** : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>BIOCHEMISTRY</u></b>			
BUN / Creatinine Ratio	12.6		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	91.40	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.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	96.13	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.

Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	9.1	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.72	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-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	5.31	mg/dL	3.5 - 7.2
--------------------------------	------	-------	-----------

  
**Dr RAVIKUMAR R**  
**MBBS, MD BIOCHEMISTRY**  
**CONSULTANT BIOCHEMIST**  
**Reg No : 78771**

**APPROVED BY**

-- End of Report --

Name	MR. KISHORE KOLLI RAMA	ID	MED111450889
Age & Gender	33Y/MALE	Visit Date	11 Jan 2023
Ref Doctor Name	MediWheel		

## 2 D ECHOCARDIOGRAPHIC STUDY

### M mode measurement:

AORTA	:	3.0cms
LEFT ATRIUM	:	3.2cms
AVS	:	----
LEFT VENTRICLE (DIASTOLE)	:	4.1cms
(SYSTOLE)	:	2.7cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.2cms
POSTERIOR WALL (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.4cms
EDV	:	74ml
ESV	:	27ml
FRACTIONAL SHORTENING	:	34%
EJECTION FRACTION	:	64%
EPSS	:	---
RVID	:	1.94cms

### DOPPLER MEASUREMENTS:

MITRAL VALVE	:	E' 0.72 m/s	A' 0.49 m/s	NO MR
AORTIC VALVE	:	1.08 m/s		NO AR
TRICUSPID VALVE	:	E' - m/s	A' - m/s	NO TR
PULMONARY VALVE	:	0.94 m/s		NO PR

Name	MR. KISHORE KOLLI RAMA	ID	MED111450889
Age & Gender	33Y/MALE	Visit Date	11 Jan 2023
Ref Doctor Name	MediWheel		

## **2D ECHOCARDIOGRAPHY FINDINGS:**

Left ventricle : Normal size, Normal systolic function.  
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

## **IMPRESSION:**

- **NORMAL SIZED CARDIAC CHAMBERS.**
- **NORMAL LV SYSTOLIC FUNCTION. EF: 64%.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

**DR. K.S. SUBRAMANI. MBBS, MD, DM (CARDIOLOGY) FESC, FICC**  
**SENIOR CONSULTANT INTERVENTIONAL CARDIOLOGIST**  
*Kss/VP*

### **Note:**

**\* Report to be interpreted by qualified medical professional.**

Name	MR. KISHORE KOLLI RAMA	ID	MED111450889
Age & Gender	33Y/MALE	Visit Date	11 Jan 2023
Ref Doctor Name	MediWheel		

**\* To be correlated with other clinical findings.**

**\* Parameters may be subjected to inter and intra observer variations.**

**\* Any discrepancy in reports due to typing errors should be corrected as soon as possible.**



Name	MR. KISHORE KOLLI RAMA	ID	MED111450889
Age & Gender	33Y/MALE	Visit Date	11 Jan 2023
Ref Doctor Name	MediWheel		

### ABDOMINO-PELVIC ULTRASONOGRAPHY

**LIVER** is normal in shape, size and has uniform echopattern. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

**GALL BLADDER** shows few non-mobile echogenicities along the anterior and posterior wall, measuring 2-3 mm. No biliary dilatation. Gall bladder wall is of normal thickness. CBD is of normal calibre.

**PANCREAS** has normal shape, size and uniform echopattern. No evidence of ductal dilatation or calcification.

**SPLEEN** shows normal shape, size and echopattern. Spleen measures -cms in long axis. No demonstrable Para -aortic lymphadenopathy.

**KIDNEYS** move well with respiration and have normal shape, size and echopattern. Cortico- medullary differentiations are well made out. No evidence of calculus or hydronephrosis on left side.

**Right kidney shows a calculus, measuring 3.5 mm in lower pole. No hydronephrosis.**

**The kidney measures as follows:**

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	<b>10.3</b>	<b>0.9</b>
Left Kidney	<b>11.7</b>	<b>1.5</b>

**URINARY BLADDER** shows normal shape and wall thickness. It has clear contents. No evidence of diverticula.

**PROSTATE** shows normal shape, size and echopattern. It measures 2.4 x 2.6 x 2.9 cms (Vol:9.5 cc).

No evidence of ascites / pleural effusion.

#### IMPRESSION:

- Gallbladder polyps.
- Right non-obstructive renal calculus.

**DR. APARNA**  
**CONSULTANT RADIOLOGIST**

A/PR

Name	MR. KISHORE KOLLI RAMA	ID	MED111450889
Age & Gender	33Y/MALE	Visit Date	11 Jan 2023
Ref Doctor Name	MediWheel		

Name	KISHORE KOLLI RAMA	Customer ID	MED111450889
Age & Gender	33Y/M	Visit Date	Jan 11 2023 9:33AM
Ref Doctor	MediWheel		

**X - RAY CHEST PA VIEW**

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

**Impression: No significant abnormality detected.**



**DR. APARNA**

**CONSULTANT RADIOLOGIST**